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Management of patients with a failed kidney transplant: Dialysis re-initiation, immunosuppression weaning and allograft nephrectomy

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Abstract

Over the past two decades, while the proportion of failed kidney transplant patients returning to dialysis has remained stable and comprises of 4-5% of all incident dialysis patients in the United States, the absolute number of patients reinitiating dialysis after a failed transplant has more than doubled. More importantly, the United States Renal Data System (USRDS) database revealed a greater than 3-fold increase in the annual adjusted mortality rates for patients returning to dialysis after graft loss compared with those with a functioning graft (9.4% *vs.* 2.8%, respectively). The Canadian Organ Replacement Registry database similarly demonstrated a greater than 3-fold increase in the risk of death among patients with a failed allograft compared with those with a functioning graft. Continuation of low-dose immunosuppression to maintain residual allograft function has been suggested as a contributing factor, presumably via treatment-related infectious and cardiovascular complications, among others. In contrast, a survival advantage in maintaining patients on long-term immunosuppression has been suggested among those returning to peritoneal dialysis. Whether early versus late re-initiation of dialysis or whether allograft nephrectomy has an impact on patient survival remains poorly defined. Despite the significant number of patients requiring re-initiation of some form of renal replacement therapy after a failed transplant and the increasing evidence suggesting their high mortality and morbidity rates, management of the failed allograft in these patients has received little attention. An overview of the literature on the management of immunosuppression after allograft failure, the ideal timing of dialysis re-initiation, a review on the pros and cons of allograft nephrectomy, and the author' perspectives on the management of this special patient population are presented.

Biography

Phuong-Thu Pham is Professor of Medicine and Director of Outpatient Services of the Kidney Transplant Program at UCLA Medical Center. Her major areas of interest and research include recurrence of glomerular diseases following primary kidney transplantation, new onset diabetes after transplantation, BK virus screening and management after kidney transplantation. Her interests in these topics have resulted in publications in well-known Nephrology textbooks and journals as well as invitations to speak at both national and international meetings. She has written over thirty book chapters for major Nephrology and solid organ transplantation textbooks including Comprehensive Clinical Nephrology, Textbook of Organ Transplantation, Transplantation of the Liver, Pancreas, islet and stem cell transplantation for diabetes, Chronic Kidney Disease: Dialysis and Transplantation and Handbook of Kidney Transplantation. She also served as moderator for transplant-related conferences at the American Society of Nephrology and World Congress of Nephrology. She serves as an Editorial Board Member for the *Case Reports in Nephrology* and *Transplantation Technologies and Research* journals and Member of the Organizing Committee for the International Conference on Nephrology and Therapeutics.