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15th Annual Congress on

# Kidney: Nephrology & Therapeutics

August 28-30, 2017 Philadelphia, USA



## Veerasamy Tamilarasi

Christian Medical College Vellore, India

### Pediatric kidney transplantation

**Introduction:** Renal transplantation is undoubtedly the treatment of choice for children with End Stage Renal Disease. Successful transplantation in children and adolescents not only ameliorates uremic symptoms but also allows for significant improvement, and often correction, of delayed skeletal growth, sexual maturation, cognitive performance, and psychosocial functioning. In addition, lack of awareness among parents and physicians alike, resource allocation and the perceived infective milieu makes pediatric renal transplantation in India a challenge.

**Method:** A retrospective analysis on 133 pediatric renal transplants (age at transplant <18yr) done in a tertiary care center in south India over a 25 year period (1991 to 2016) was done. Data was collected from renal transplant database and Clinical workstation network. Mortality and graft loss were primary outcome variables studied.

**Results:** The mean age of the recipients was 25 years (6 to 18 years), [accounting for 6.1% of all the renal transplants done at our center (133/3455). 96% of patients received kidney from live related donors. The major causes of ESRD were glomerulonephritis (29%) and urological abnormalities (18%), while the aetology was unknown in 46.5%. Immunosuppression was based on a triple drug regimen in 99% of children. Amongst complications, any rejection episode (41.7%), UTI (29.7%) and CMV disease (16.8%) were predominated. The mean duration of follow up was 38.6±33.5 months (4,159) Graft loss occurred in 10 children (10%) at a mean duration of 35±22 month (6.70). Overall 1, 5 and 10 year graft survival was 97% 83%, and 75% respectively Overall 1.5 year and 10 year patient survival was 95%, 86% and 79%. The significant predictor of graft loss was CMV disease (p=0.039) while sepsis (p=0.01) was the most important contributor to patient loss.

**Conclusion:** Pediatric renal transplantation in India can be accomplished successfully. The graft and patient survival in our study, the largest from India, is comparable to those published from developed countries and is encouraging given the limited resources.

#### **Biography**

Veerasamy Tamilarasi is working as Head of Department of Nephrology in Christian Medical College Vellore, India. She was a Dean of Vellore Medical College. She has attended several national and international conferences.

vtarasi@cmcvellore.ac.in

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