

Impact of Slow and Delayed Graft Function on Kidney Graft Survival Between Various Subgroups Among Renal Transplant Patients

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Abstract

Objective: Renal allografts with excellent graft function show good long-term outcomes, while grafts with delayed function have been associated with poor long-term survivals, although few reports have analyzed outcomes among these groups. We compared first-week postoperative graft function among renal transplant patients to analyze the impact of slow graft function (SGF) and delayed graft function (DGF) on graft survival. **Materials and Methods:** Renal transplantations were performed from 362 unrelated, 46 related, and 163 deceased donors. Kidney transplant patients were divided into 3 groups according to their initial graft function. First-week dialyzed patients formed the DGF group. Nondialyzed patients were divided into a SGF or an excellent graft function (EGF) cohort according to whether the serum creatinine at day 7 was higher vs lower than 2.0 mg/dL, respectively. **Results:** Of the 570 renal transplant recipients, DGF was observed in 39 patients (6.8%), SGF in 74 (12.9%), and EGF in 457 (80.3%). There was no significant difference in SGF vs DGF between patients who received kidneys from unrelated vs related living or deceased donors. Graft survival was worse among the DGF than the SGF or EGF patients, with no significant difference between the last 2 groups. The 6-month graft survivals were 74%, 93%, and 96%; the 3-year graft survivals were 70%, 88%, and 90%, respectively ($P < .001$). **Conclusions:** We observed a similar impact of EGF and SGF on kidney graft survival. Kidney transplant recipients who developed DGF showed worse graft survival than those with EGF or SGF. © 2009 Elsevier Inc. All rights reserved.

Indexed Keywords

EMTREE drug terms: azathioprine; creatinine; cyclosporin; mycophenolic acid γ morpholinoethyl ester; steroid

EMTREE medical terms: adult; article; cadaver kidney; creatinine blood level; delayed graft function; female; graft recipient; graft survival; hemodialysis patient; human; kidney graft; kidney graft rejection; major clinical study; male; organ donor; postoperative period; priority journal; retrospective study; survival rate

MeSH: Adolescent; Adult; Cadaver; Cohort Studies; Creatinine; Delayed Graft Function; Family; Female; Graft Survival; Humans; Kidney Transplantation; Living Donors; Male; Postoperative Period; Time Factors; Tissue Donors; Transplantation, Homologous; Treatment Outcome; Young Adult

Medline is the source for the MeSH terms of this document.

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