

Infectious Complications in 135 Turkish Renal Transplant Patients

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Summary

Infections are the emerging causes of mortality and morbidity due to lifelong immunosuppressive therapy in renal transplant patients (1, 4). Here, we report infectious complications of 135 renal allograft recipients who were followed up in the last 20 years in Gülhane Military Medical Academy, Ankara, Turkey. Of them, 83 (61.4%) had a transplant from living related donors, 18 (13.3%) from living non-related HLA matched donors and 34 (25.1%) from cadaveric matched donors. Immunosuppression was achieved in 42 (31.1%) recipients by azathioprine plus corticosteroid (AZA+CS) and in 93 (68.8%) by AZA+CS+cyclosporin A (CsA). Encountered infections were classified according to three different periods of the transplantation procedure [early (first month), intermediate (2-6th months) and late (after the 6th month)]. Bacterial infections were the leading infections in all three periods and the most affected system was the urinary tract. Each recipient had at least one episode of urinary tract infection (UTI) and *E.coli* was the most common urinary pathogen. On the other hand, HCV was the leading viral pathogen (14.3%). The total mortality rate was 7.4%, and septic shock was the most common cause of death (80%).

Key words: infections, renal transplantation

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