



# The Natural History of Clinical Operational Tolerance After Kidney Transplantation Through Twenty-Seven Cases

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Mots-clés	Dysfunction [31], Human [32], Immunology [33], Kidney [34], operational tolerance [35], transplantation [36]
Résumé en anglais	<p>We report here on a European cohort of 27 kidney transplant recipients displaying operational tolerance, compared to two cohorts of matched kidney transplant recipients under immunosuppression and patients who stopped immunosuppressive drugs and presented with rejection. We report that a lower proportion of operationally tolerant patients received induction therapy (52% without induction therapy vs. 78.3%[<math>p = 0.0455</math>] and 96.7%[<math>p = 0.0001</math>], respectively), a difference likely due to the higher proportion (18.5%) of HLA matched recipients in the tolerant cohort. These patients were also significantly older at the time of transplantation (<math>p = 0.0211</math>) and immunosuppression withdrawal (<math>p = 0.0002</math>) than recipients who rejected their graft after weaning. Finally, these patients were at lower risk of infectious disease. Among the 27 patients defined as operationally tolerant at the time of inclusion, 19 still display stable graft function (mean <math>9 \pm 4</math> years after transplantation) whereas 30% presented slow deterioration of graft function. Six of these patients tested positive for pre-graft anti-HLA antibodies. Biopsy histology studies revealed an active immunologically driven mechanism for half of them, associated with DSA in the absence of C4d. This study suggests that operational tolerance can persist as a robust phenomenon, although eventual graft loss does occur in some patients, particularly in the setting of donor-specific alloantibody.</p>

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