1239: RECIPIENT HYPERTENSION AND PROLONGED COLD ISCHEMIA TIME IS A SIGNIFICANT PREDICTIVE FACTORS OF RENAL TRANSPLANT FIBROSIS AT ONE MONTH POST LIVE DONOR RENAL TRANSPLANTATION

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Background: Renal transplantation is the therapeutic option of choice in the appropriate patient with end-organ disease. Donor characteristics and its relations to post transplant fibrosis was not clearly assessed in the past.

Method: The study has been designed to identify recipients co-morbidities prior to live donor renal transplantation. 300 live donor renal transplant recipients over 12 years (1997- 2009) has been assessed. Multivariate linear regression analysis was performed to explore the association between fibrosis at one month and donor characteristics. Cold ischemia and HTN were included in this analysis.

Statistical analysis: Multivariate linear regression analysis was performed to explore the association between fibrosis at one month and donor characteristics. Cold ischemia and HTN were included in this analysis. The age of the donor, their relation to the patient, the pre-op creatinine, number of arteries, kidney weight and warm ischemia time were not found to be significantly associated with fibrosis at one month.

Result: In this complex model; HTN in the recipient and cold ischemia time were found to be strong predictive factors of fibrosis at one month (HTN: p < 0.001, 95% CI -0.08 to -0.02, Coefficient -0.05), (Cold ischemia time: p=0.03, 95% CI -0.1 to -0.04, Coefficient -0.5)

Conclusion: Hypertension and prolonged cold ischemia time in live donor renal transplant recipients is a significant predictive factor of kidney fibrosis at one month post transplantation.