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Performance and Outcome of Pioneering Kidney Transplantation in a Resource-Constrained Setting in Southeast Nigeria

Performance et Résultats de la Transplantation Rénale Pionnière dans un Contexte de Ressources Limitées au Sud-Est du Nigeria

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ABSTRACT

INTRODUCTION: Kidney transplantation is the optimal treatment for improving survival and quality of life for patients with end-stage kidney disease. There was no kidney transplant surgery and acute transplant care services in Southeast Nigeria until 2017 when our institution commenced kidney transplant surgery and acute transplant care. This study aims to share our first eight year experience including graft and patient outcome.

OBJECTIVES: To obtain the transplant rate, short and long term complications and the graft and patient survival over an eight year period in a tertiary hospital in Southeast Nigeria.

METHOD: A retrospective review of the transplant register for patients referred to the kidney transplant unit over an eight year period from January 2017 to January 2025.

RESULT: Complete data for ninety-three patients were analyzed. Out of these, twelve were transplanted giving a transplantation rate of 13%. Financial constraint is the leading reason (40%) for failure to get a kidney transplant done. Hypertension, hyperkalemia, anemia and urinary tract infection were the leading acute complications encountered while cytomegalovirus infection, recurrence of native disease, chronic graft loss and death were the major long term complications. The three-month, one-year, three-year and five-year patient survival in our program were 100%, 90%, 80% and 80% respectively while the graft survival were 90%, 90%, 70% and 60% respectively.

CONCLUSION: The transplant conversion rate is low and a review of patient selection criteria will improve access kidney transplant. Acute complications were treatable in most cases. The patient and graft outcomes appear similar with other centres in Nigeria.

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KEYWORDS: Kidney transplantation, Outcome, Complication, Southeast Nigeria, Pioneering

RÉSUMÉ

INTRODUCTION: La transplantation rénale est le traitement optimal pour améliorer la survie et la qualité de vie des patients atteints d'insuffisance rénale terminale. Il n'existait aucun service de chirurgie de transplantation rénale ni de soins aigus post-transplantation dans le Sud-Est du Nigeria jusqu'en 2017, année où notre établissement a lancé ces services. Cette étude vise à partager notre expérience sur huit ans, incluant les résultats des greffes et des patients.

OBJECTIFS: Obtenir le taux de transplantation, les complications à court et à long terme, ainsi que la survie du greffon et du patient sur une période de huit ans dans un hôpital tertiaire du sud-est du Nigeria

MÉTHODE: Revue rétrospective du registre de transplantation pour les patients référés à l'unité de transplantation rénale sur une période de huit ans, de janvier 2017 à janvier 2025.

RÉSULTATS: Les données complètes de quatre-vingt-treize patients ont été analysées. Parmi eux, douze ont bénéficié d'une transplantation, soit un taux de 13 %. La contrainte financière est la principale raison (40 %) de l'échec à réaliser une transplantation. L'hypertension, l'hyperkaliémie, l'anémie et les infections urinaires étaient les principales complications aiguës rencontrées, tandis que l'infection à cytomégalovirus, la récurrence de la maladie native, la perte chronique du greffon et le décès représentaient les complications à long terme majeures. Les taux de survie des patients à trois mois, un an, trois ans et cinq ans étaient respectivement de 100 %, 90 %, 80 % et 80 %, tandis que les taux de survie du greffon étaient de 90 %, 90 %, 70 % et 60 %.

CONCLUSION: Le taux de conversion en transplantation est faible, et une révision des critères de sélection des patients pourrait améliorer l'accès à la transplantation rénale. Les complications aiguës étaient généralement traitables. Les résultats des patients et des greffons semblent comparables à ceux d'autres centres au Nigeria. **WAJM 2025; 42 (5): 413-418**

MOTS-CLÉS: Transplantation rénale, Résultats, Complications, Sud-Est du Nigeria, Pionnier

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