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A French Cohort Study of Kidney Retransplantation after Post-Transplant Lymphoproliferative Disorders

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Abstract

Background and objectives Post-transplant lymphoproliferative disorders arising after kidney transplantation portend an increased risk of morbidity and mortality. Retransplantation of patients who had developed post-transplant lymphoproliferative disorder remains questionable owing to the potential risks of recurrence when immunosuppression is reintroduced. Here, we investigated the feasibility of kidney retransplantation after the development of post-transplant lymphoproliferative disorder.

Design, setting, participants, & measurements We reviewed the data from all patients who underwent kidney retransplantation after post-transplant lymphoproliferative disorder in all adult kidney transplantation centers in France between 1998 and 2015.

Results We identified a total of 52 patients with kidney transplants who underwent 55 retransplantations after post-transplant lymphoproliferative disorder. The delay from post-transplant lymphoproliferative disorder to retransplantation was 100 ± 44 months (28–224); 98% of patients were Epstein-Barr virus seropositive at the time of retransplantation. Induction therapy for retransplantation was used in 48 patients (*i.e.*, 17 [31%] patients received thymoglobulin, and 31 [57%] patients received IL-2 receptor antagonists). Six patients were also treated with rituximab, and 53% of the patients received an antiviral drug. The association of calcineurin inhibitors, mycophenolate mofetil, and steroids was the most common maintenance immunosuppression regimen. Nine patients were switched from a calcineurin inhibitor to a mammalian target of rapamycin inhibitor. One patient developed post-transplant lymphoproliferative disorder recurrence at 24 months after retransplantation, whereas post-transplant lymphoproliferative disorder did not recur in 51 patients.

Conclusions The recurrence of post-transplant lymphoproliferative disorder among patients who underwent retransplantation in France is a rare event.

Adult Antilymphocyte Serum Antiviral Agents Calcineurin
 Calcineurin Inhibitors Cohort Studies Epstein-Barr Virus Infections
 France Herpesvirus 4, Human Humans Immunosuppression
 kidney kidney transplantation Lymphoproliferative Disorders
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