

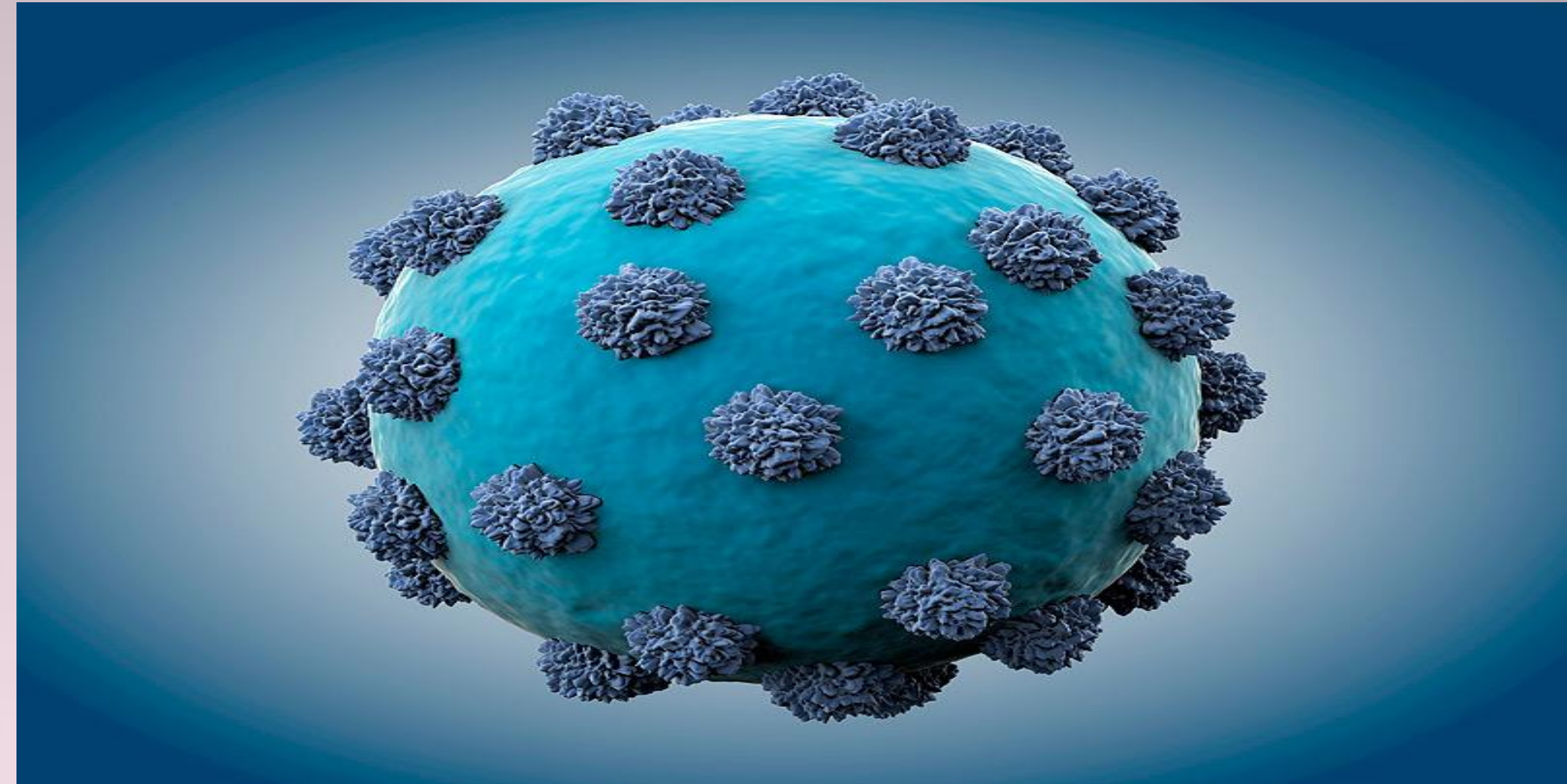
CHALLENGES AND RISKS OF HCV INFECTION THERAPY IN KIDNEY TRANSPLANTATION

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Introduction

Treatment options for chronic hepatitis C infection in patients with transplanted kidneys were reduced prior to the development of interferon free therapy. This novel treatment seems very efficient. Here we report our experience in treatment of patients with chronic hepatitis C prior and after kidney transplantation.



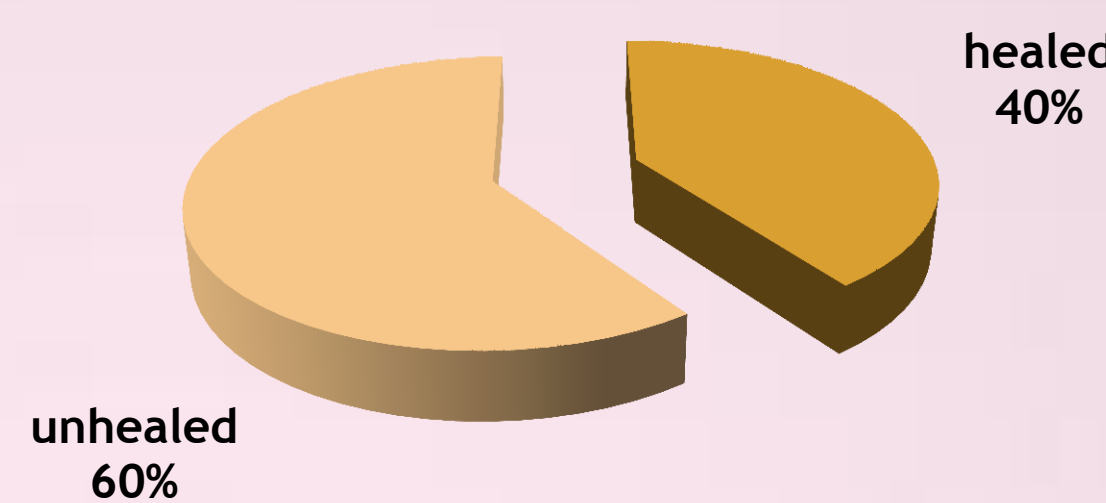
Methods

Clinical data and laboratory results have been recorded from patients with chronic hepatitis C that have received a kidney transplant. We monitored the clinical course, complete blood count, liver, kidney function and HCV RNA levels.

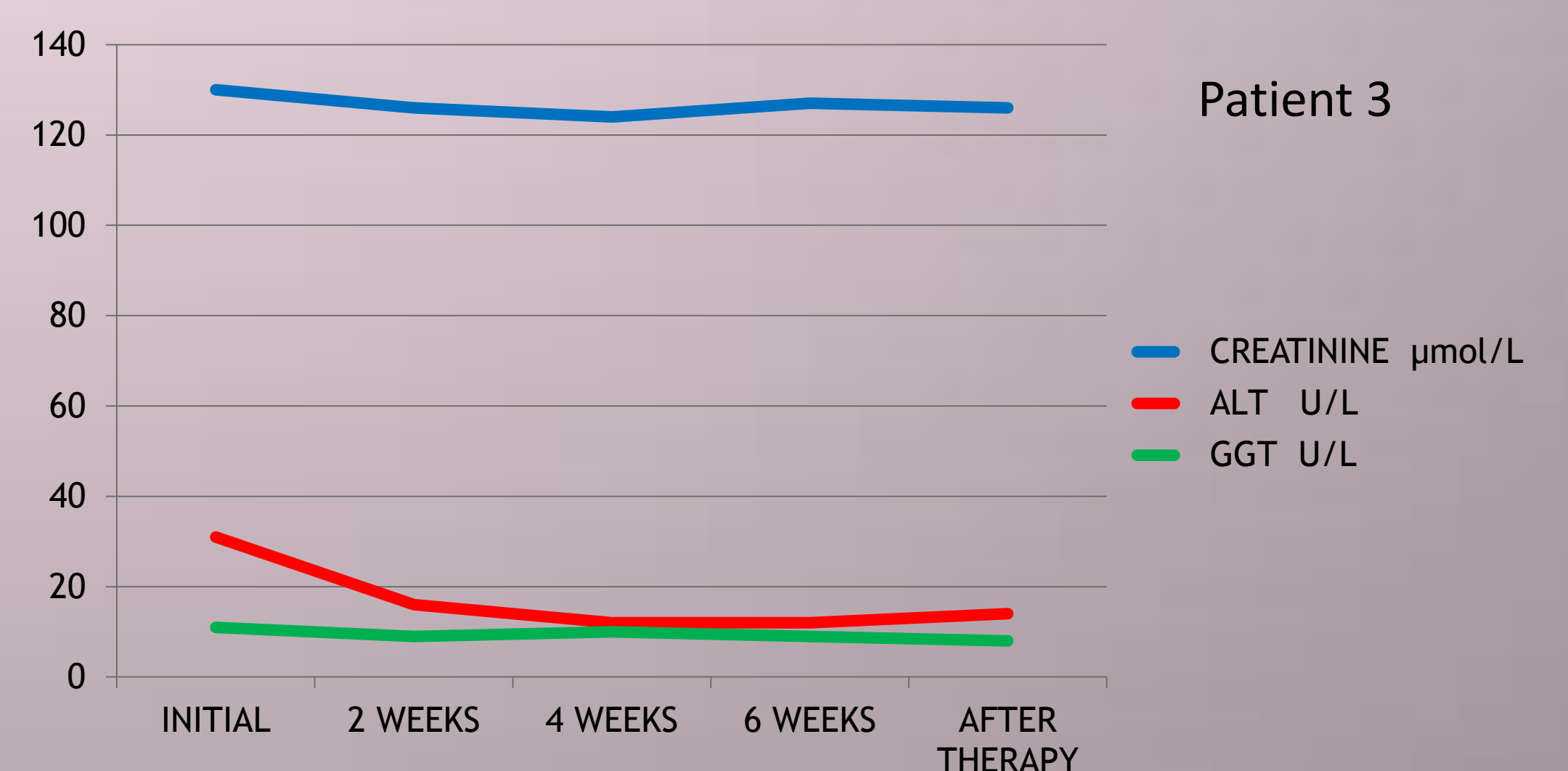
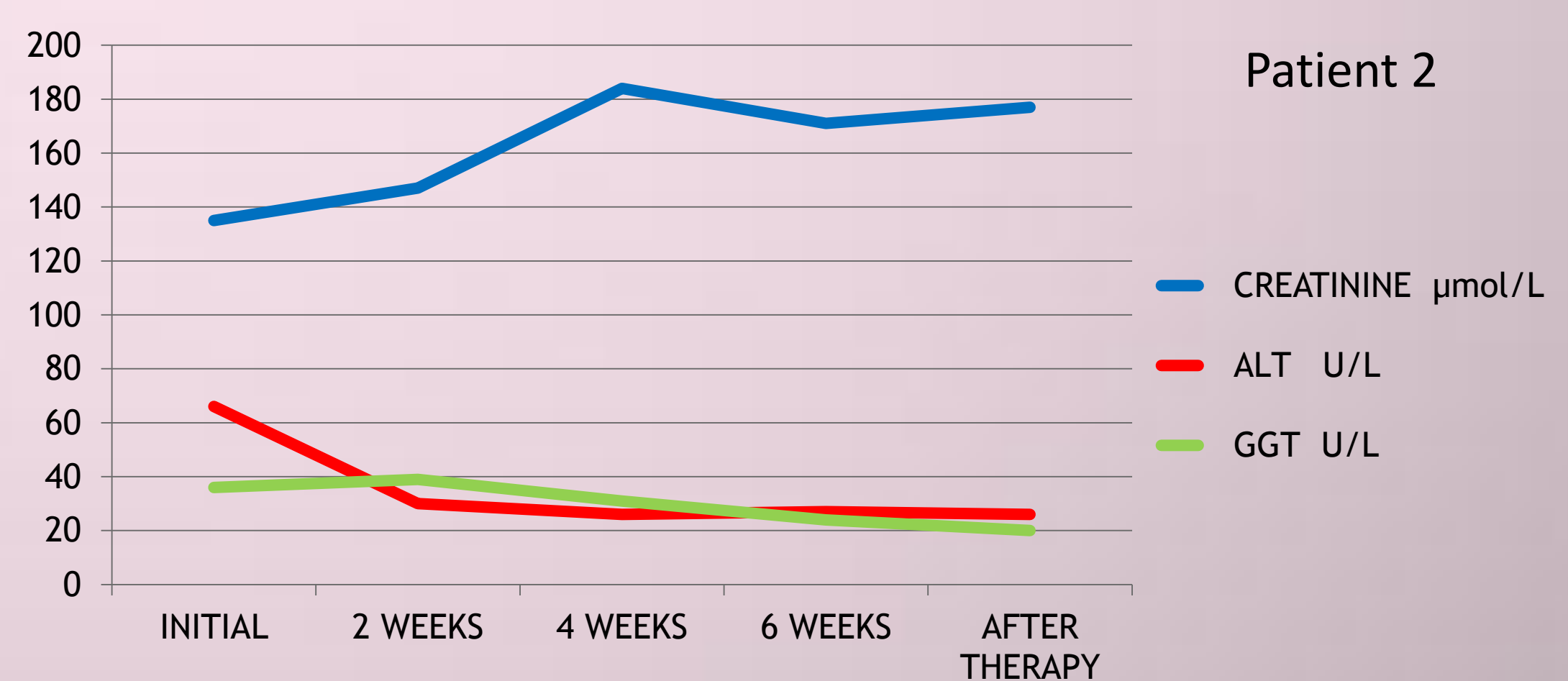
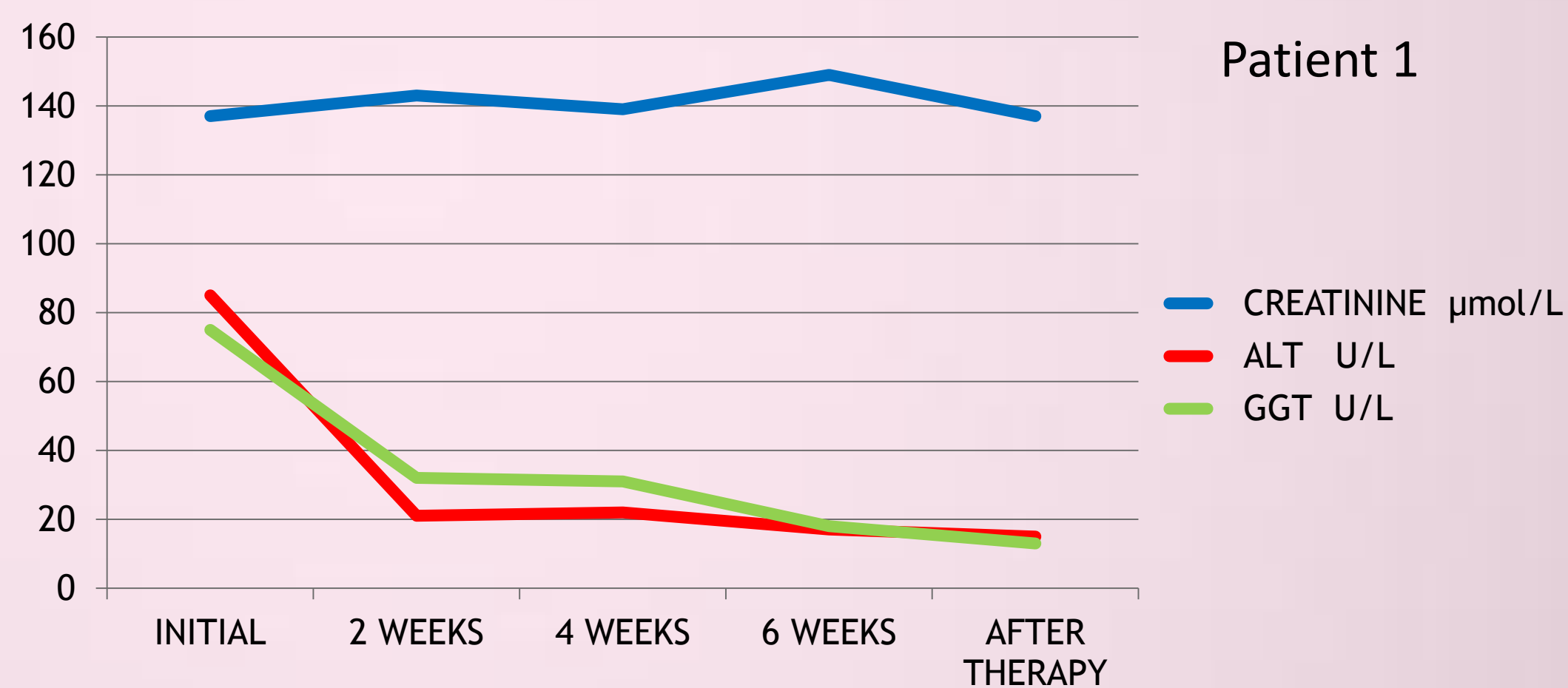
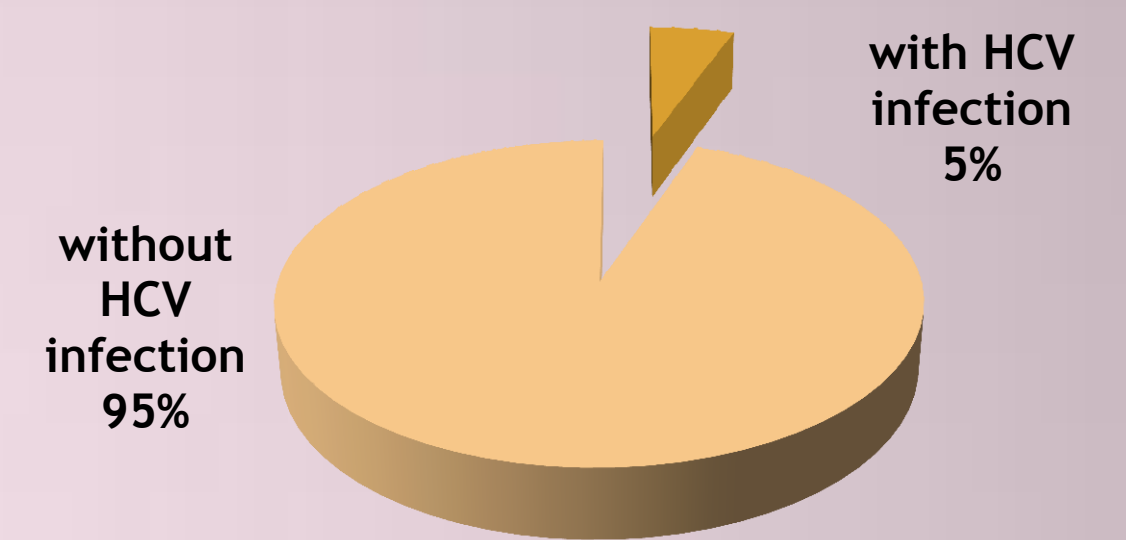
Results

From total of 1880 kidney transplant patients in our Department 101 had HCV infection, 5 of whom were re-transplanted. Fourteen of these patients have received pegylated interferon therapy prior to transplantation (2 with ribavirin). The efficacy of treatment was 40%. Interferon-free therapy was conducted in the past year in 3 patients with 100% efficacy. Two patients had fatigue and headache as side effects and one had hypertension with fluid retention. All of our patients had normal hepatic enzymes and CBC levels, while creatinine was increased in 1 patient. HCV RNA was undetectable in week 4 and 12 during and 12 weeks after the interferon-free therapy.

Efficacy of treatment with pegylated interferon



Kidney transplant patients



HCV – RNA No.			
	PATIENT 1	PATIENT 2	PATIENT 3
INITIAL	9.2 x 10 ⁵ IU/ml	8.4 x 10 ⁵ IU/ml	5,5 x 10 ⁵ IU/ml
4 WEEKS	undetectable	undetectable	undetectable
12 WEEKS	undetectable	undetectable	undetectable
24 WEEKS	undetectable	undetectable	undetectable
	SVR*	SVR*	SVR*

* SVR – sustained virological response

Conclusion

1. In the overall care of kidney transplant patients multidisciplinary team collaboration is needed
2. This includes intensive monitoring by transplant nephrologist during and after treatment
3. Nurses role in this team is to organize tests, educate patients, give psychological support and to recognize and prevent possible complications