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Comparative Analysis of Kidney Transplantation Outcomes between Extended Criteria Donors and Waiting List in Patients Aged 60 and Above

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Introduction: The decision to perform kidney transplantation with extended criteria donor (ECD) kidneys in elderly patients remains a topic of ongoing debate. This study aims to evaluate whether receiving an ECD kidney provides a survival benefit in patients aged 60 and above compared to remaining on the waiting list.

Methods: A retrospective analysis was conducted on 178 patients aged 60 and above who received deceased donor kidney transplants and 909 patients on the waiting list from January 2008 to February 2023 at a single center. Transplant recipients were stratified based on the presence or absence of heart or cerebrovascular diseases.

Results: Multivariate analysis identified age (HR=1.162, 95% CI=1.061-1.273), arrhythmias (HR=4.047, 95% CI=1.432-11.436), and history of cerebrovascular accidents (HR=2.912, 95% CI=1.174-7.223) as significant predictors of reduced survival. In contrast, factors such as extended criteria donor status, kidney donor profile index (KDPI), and dialysis duration were not significant. The Kaplan-Meier survival analysis revealed that transplant recipients without these comorbidities had comparable survival rates to those on the waiting list, while those with comorbidities had significantly lower survival (P<0.001).

Conclusion: This study suggests that, in patients aged 60 and above, heart or cerebrovascular diseases are a more significant determinant of survival rates than receiving an ECD kidney. Therefore, a comprehensive pre-transplant assessment for these comorbidities is crucial in this patient population.