



Leading European Nephrology

# NEWS

## European Renal Association – European Dialysis and Transplant Association

### Kidney Transplantation versus Dialysis

**A study in the current issue of ckj shows: 5-year mortality risk of transplanted patients is about 47% lower than that of patients on the waiting list!**

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The number of adults waiting for a kidney transplant is growing from year to year. The main aim of an Irish study [1], lately published in CKJ ("Clinical Kidney Journal"), the open-access journal of the ERA-EDTA, was to compare the survival of patients who received a kidney transplant with the survival of patients awaiting transplantation and non-listed dialysis patients.

To determine and compare the mortality of these three groups of patients, an analysis of the National Renal Transplant Registry and the Beaumont Hospital Renal Database (Clinical Vision 3.4a Version 1.1.34.1, Clinical Computing, Cincinnati, OH, USA) was carried out from 1 January 2004 to 31 December 2013. Analysis of survival was from the time of initial inclusion in the transplant waiting list to the time of death. What were the results? During the first 12 weeks after transplantation, the adjusted relative risk of death among kidney transplant recipients was 1.7 – 1.9 times higher than the risk among patients on the transplant waiting list. However, the risk of death among kidney transplant recipients started to fall thereafter to values below those on the waiting list. The 5-year mortality risk was estimated to be 47% lower than that of patients on the waiting list (RR, 0.53; 95% CI, 0.37–0.77; P = 0.001).

"Directly after transplantation the mortality risk is somewhat higher due to the risk of surgical complications, infections or rejections. But after one year only, the patients benefit in terms of survival", explains Professor Alberto Ortiz, Madrid/Spain, CKJ's editor-in-chief. "The fact that the 5-year mortality of patients who had received a transplantation was nearly 46% lower shows that kidney transplantation remains the best available treatment for end-stage kidney disease. We have to keep that in mind and initiate campaigns to fight organ donor shortage for the sake of our patients."

According to Ortiz the observed benefit is definitely a benefit of transplantation. The study compared kidney transplant recipients to patients on the waiting list. "Whoever is listed on the waiting list is fit for transplantation and as 'healthy' as the patients who had received an organ transplantation. Therefore, no bias can be observed."



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And indeed, the group of patients on dialysis but not on the transplant waiting list had an annual death rate that was seven times higher than the group of patients on the waiting list.

[1] <https://academic.oup.com/ckj/article/doi/10.1093/ckj/sfx117/4557548/A-comparative-analysis-of-survival-of-patients-on>

### About ERA-EDTA

With more than 7,500 members, the ERA-EDTA ("European Renal Association – European Dialysis and Transplant Association") is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. It also supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all its activities ERA-EDTA has the "Young Nephrologists' Platform" (YNP), a very active committee whose board includes members who are 40 years old or younger. Besides, it has established various working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board was established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association's journals, NDT (Nephrology, Dialysis, Transplantation) and CKJ (Clinical Kidney Journal), are currently the leading nephrology journals in Europe; furthermore NDT-Educational is the online educational journal, open for free to all uses, of the Society as well as the very important and useful feature of NDT-Educational "Literature Review". The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. ENP, the European Nephrology Portal, is the latest new initiative of ERA-EDTA: here all those interested in the activities of the Society can find everything that is done, all in one place! Finally, ERA-EDTA is a member of the European Kidney Health Alliance (EKHA), a consortium of patients, nurses, foundations all related to renal issues that actively interacts with the European Parliament. For more information please visit [www.era-edta.org](http://www.era-edta.org)