



CHARACTERIZATION OF PATIENTS WITH LUPUS NEPHRITIS SUBMITTED KIDNEY TRANSPLANTATION

SUELI CARNEIRO (UERJ, RIO DE JANEIRO, RJ, Brasil), DARCI RAMOS FERNANDES (UFMA, SÃO LUIS, MA, Brasil), RITA GRAÇA CARVALHAL FRAZÃO CORRÊA (UFMA, SÃO LUIS, MA, Brasil), ROSELINE OLIVEIRA CALISTO LIMA (UFMA, SÃO LUIS, MA, Brasil)

BACKGROUND

Lupus nephritis (NL) is an important cause of morbidity and mortality due to the possibility of progression to chronic kidney disease (CKD) and/or treatment-related complications. Renal transplantation is considered a safe procedure in patients with CKD due to lupus nephritis and the survival of these patients has increased over the years. However, the recurrence of the disease and its impact on graft survival still remain controversial. Aims to characterize the socio-economic and clinical profile of patients with NL submitted kidney transplantation in a tertiary public hospital.

MATERIALS AND METHODS

Cross-sectional, observational study performed in sector of nephrology at an University Hospital in the Northeast of Brazil, with 96 renal transplant patients, in regular outpatient follow-up, of whom, 18 had a diagnosis of Lupus nephritis as a cause of terminal chronic kidney disease, a functioning graft for more than 6 months, older than 18 years, in regular outpatient follow-up; was used a form to characterize sociodemographic and clinical data; the categorical variables were described by frequencies and percentages, the quantitative variables by mean and standard deviation.

RESULTS

Female gender (100%); age 18 to 60 years, mean 41 years; 66.6% Brown; from the capital 75%; 66.6% high school; 58.3% single; 66.6% receive 1 minimum wage; transplant time 6 months to 14 years; 60% Received organ of living donor; comorbidity more frequent hypertension 75%; 55% altered blood pressure; 33.3% Overweight; Diagnosis of Systemic Lupus Erythematosus until kidney transplantation 3 to 7 years; Renal transplant time 8 months to 12 years; Physical activity 58.3%.

CONCLUSION

The study allowed to characterize patients with Lupus nephritis submitted kidney transplantation, indispensable to guide care to this clientele, evidencing the need for guidance aimed at the prevention and control of comorbidities, and that stimulate the patients to better understand the meaning of the procedure regarding the importance of adherence to treatment, correct use of immunosuppressants, continuous multiprofessional monitoring. We also found that patients with Lupus nephritis undergoing kidney transplantation have good survival in a follow-up period of 12 years.