

ABSTRACT NO. 39

**RENAL TRANSPLANTATION IN ETHNIC MINORITIES**

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**Background:** renal transplant outcomes are inferior in ethnic minorities. We present the experience of a small kidney transplant (KTx) program ( $\approx$  30 KTx /y) with majority of patients represented by minority populations.

**Material and Methods:** analysis of Scientific Registry of Transplant Recipients (SRTR) of single KTx center. Results are presented based on different cohorts for the time period examined (07/01/2001 to 12/31/2006) and overall 152 KTx (25.3 KTx/y)

**Results:** recipient characteristics for deceased donor transplants: 56.5% M, 43.5% F. 13% C, 39.1% AA, 34.8% H, 13% A. Of these, 52% between 18-49 and 35% between 50-64 y of age: 13% above the age of 64.

For living donor transplants: 98% M with 80% between 18-49 y and 20% between 50-64 y of age. Immunosuppression was based on steroids, CNI, MMF.

One month, 1y and 3y observed and expected graft survival were 95.35%, 92.37%, 87.5% and 96.6%, 90.9%, 82.4% respectively.

Graft survival was 95%, 91.9%, 84.6% and 96.5%, 90.5% and 81.1% respectively for DD, 100% in all 3 groups compared to the expected of 98.5%, 96.3% and 88.1% for the LD.

One month, 1y and 3y observed and expected patient survival were 100%, 97.4%, 90% and 98.8%, 94.4% and 89.8% respectively. Patient survival was 100% 97.2%, 87.7% and 98.8%, 94.1%, 88.8% respectively for DD and 100% in all 3 groups compared to the expected 99.7%, 98.3% and 94.5% for LD. Preponderance of ethnic minorities was more evident when we examined the data of the new waitlist registration with 2.4% C, 41.5% AA, 43.9% H, and 2.4% other.

Observed patient and graft survival are not inferior to the expected. This has required longer patients education process and full social support.

**Conclusion:** our results suggest that renal transplantation can be successfully performed in ethnic minorities. These results will need to be confirmed in larger studies.