

## Transplantation of elderly patients is associated with inferior outcomes compared with younger patients.

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### Introduction

Transplantation of older patients is increasing as the number of older people offered renal replacement therapy grows. Which older recipients benefit from transplantation (from a prognosis and quality of life perspective) is not always clear. The aim of this retrospective study was to review patient outcomes by age, to help inform both clinicians and patients.

### Methods

1738 patients all receiving Alemtuzumab induction and tacrolimus monotherapy were studied. Transplant outcomes were obtained from a prospectively maintained registry.

### Results

1232 <60, 415 >60-70 and 91 >70 year olds were transplanted over a 15 year period. Older patients were more likely to receive a deceased donor transplant and have diabetes ( $p < 0.01$ ). Younger patients were more likely to receive a live donor pre-emptive transplant and have an underlying diagnosis of glomerulonephritis ( $p < 0.01$ ). Older patients had a longer median length of stay post transplant at 9(8-13), 11(8-17) and 12.5(10-20) days, in the <60, >60 and >70 groups respectively,  $p < 0.01$ .

Transplant outcomes are shown in the table attached.

### Discussion

This study shows that transplantation does not offer the same prognosis for older patients. Despite uniform immunotherapy, older patients were more likely to have infection but lesser risk of rejection. Further evidence is needed to determine the best management in terms of RRT modality, patient selection, and how to tailor immunotherapy in the older population.