

FULL TEXT LINKS



Review [Transplantation](#). 2025 Apr 1;109(4):622-637. doi: 10.1097/TP.00000000000005186.

Epub 2025 Mar 19.

Bridging the Gap Between CKD Management Paradigms in Transplant and Nontransplant Settings: Published Evidence, Challenges, and Perspectives

Inès Dufour ^{1 2}, Elliott Van Regemorter ^{1 2}, Nada Kanaan ^{1 2}, Antoine Buemi ³, Tom Darius ³, Michel Mourad ³, Eric Goffin ^{1 2}, Michel Jadoul ^{1 2}, Arnaud Devresse ^{1 2 3}, Valentine Gillion ^{1 2}

Affiliations

Affiliations

- 1 Department of Nephrology, Cliniques universitaires Saint-Luc, Université catholique de Louvain, Brussels, Belgium.
- 2 Institut de Recherche Expérimentale et Clinique, Université Catholique de Louvain, Brussels, Belgium.
- 3 Department of Abdominal Surgery and Transplantation, Cliniques universitaires Saint-Luc, Université catholique de Louvain, Brussels, Belgium.

PMID: 39198967 DOI: [10.1097/TP.00000000000005186](#)

Abstract

Kidney transplantation (KT) is the best treatment for patients with kidney failure, associated with improved survival and quality of life compared with maintenance dialysis. However, despite constant improvements in the assessment and management of the alloimmune response, KT patients frequently demonstrate a reduced estimated glomerular filtration rate. Therefore, the usual complications of chronic kidney disease (CKD), such as anemia, hypertension, metabolic acidosis, hyperkalemia, or persistent secondary hyperparathyroidism, are highly prevalent after KT. However, their underlying mechanisms are different in the transplant setting (compared with the nontransplanted CKD population), and management recommendations are based on relatively poor-quality data. In recent years, new therapies have emerged, significantly improving kidney and cardiovascular outcomes of non-KT patients with CKD. Whether those new drugs could improve the outcomes of KT patients has largely been under investigated so far. In this review, we will address the challenges of the management of a KT patient with a reduced estimated glomerular filtration rate, cover the published evidence, and highlight the critical knowledge gaps.

Copyright © 2024 Wolters Kluwer Health, Inc. All rights reserved.

[PubMed Disclaimer](#)

Related information

[MedGen](#)

LinkOut – more resources

Full Text Sources

[Wolters Kluwer](#)

Medical

[MedlinePlus Health Information](#)

