

Re: Risk of End-Stage Renal Disease Following Live Kidney Donation

Muzaale AD¹, Massie AB¹, Wang MC², Montgomery RA¹, McBride MA³, Wainright JL³, Segev DL⁴

¹Johns Hopkins University Faculty of Medicine, Department of Surgery, Baltimore, Maryland

²Johns Hopkins Bloomberg School of Public Health, Department of Biostatistics, Baltimore, Maryland

³United Network for Organ Sharing, Richmond, Virginia

⁴Department of Surgery, Johns Hopkins University School of Medicine, Baltimore, Maryland

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EDITORIAL COMMENT

The authors compare the risk of end-stage renal disease (ESRD) in 96217 kidney donors in the United States, followed for a median of 7.6 years with that of a healthy cohort of 20024 nondonors, followed for a median of 15 years of who are at equally low risk of renal disease and free of contraindications to live donation. Live kidney donors who are supposed to be "super healthy"; on average have excellent quality of life compared with healthy control individuals in the population. The authors were able to use a very healthy population of their country as a comparison group. However most analyses have included control groups less healthy than the living donor population and have had relatively short follow-up periods. Previously we didn't have accurate information about a live donor's lifetime risk of needing dialysis. The authors found that live kidney donors have an elevated relative risk of developing ESRD. However, the risk of reaching ESRD in the donor's lifetime is very low. In this study estimated risk for ESRD would be less than 1% at 15 years for the donors in the United States. Nonetheless, that the risk for ESRD for live kidney donors remain lower than the risk for the average person in the population, but the risks are probably higher than if these "super healthy" people had never donated a kidney. These findings allowed us to have a precise understanding of the risks related to live kidney donation and may help to inform people better considering this option as a gift of life.

SUGGESTED READING

Mjøen G, Hallan S, Hartmann A, Foss A, Midtvedt K, Øyen O, Reisæter A, Pfeffer P, Jenssen T, Leivestad T, Line PD, Øvrehus M, Dale DO, Pihlstrøm H, Holme I, Dekker FW, Holdaas H. Long-term risks for kidney donors. *Kidney Int* 2014;86:162-167.

Yarkin Kamil Yakupoğlu MD

Re: Low Testosterone at Time of Transplantation is Independently Associated with Poor Patient and Graft Survival in Male Renal Transplantation Recipients

Shoskes DA, Kerr H, Askar M, Goldfarb DA, Schold J.

Glickman Urological and Kidney Institute, Cleveland Clinic, Cleveland, Ohio

J Urol 2014;192:1168-1171.

EDITORIAL COMMENT

It is a well-known issue that men with chronic renal disease or failure are more prone to low testosterone. In this retrospective cohort, authors have calculated serum testosterone levels from assayable serum samples collected at the time of transplantation of 197 first time kidney transplant recipients who were followed more than 6 years. Besides being an independent risk factor for patient death, low testosterone levels have also been associated with worse patient and graft survival rates in this cohort. As expected deaths in the low testosterone group has been mainly due to cardiac events. Nevertheless, the evidence from the study needs to be confirmed prospectively and also the role of testosterone replacement therapy must be well established in the setting of kidney transplantation. Also in the search for a reliable biomarker for posttransplant risk stratification for male transplant recipients, low testosterone might have a spot at this point.

SUGGESTED READING

Iglesias P, Carrero JJ and Diez JJ. Gonadal dysfunction in men with chronic kidney disease: clinical features, prognostic implications and therapeutic options. *J Nephrol* 2012;25:31-42.

Yarkin Kamil Yakupoğlu MD