A COMPARATIVE STUDY OF STEROID SPARING IMMUNOSUPRESSIVE REGIMEN WITH STEROID INCLUSIVE REGIMEN IN RENAL TRANSPLANT PATIENTS.

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With the advent of newer agents, it is not known whether steroids sparing regimen (SSR) would be a safe alternative to steroid inclusive regimen (SIR).

A cohort of 14 consecutive renal transplant patients treated with SSR (group 1) were compared to 15 matched patients receiving SIR (group 2). Data, including demographic, donor related, pre transplant medical history, details of the transplantation, post transplant immunosuppressive regimen, complications and metabolic parameters at 3, 6 and 12 month follow up, were collected. Primary outcome variables were episodes of rejection and mortality. Secondary outcome variables were metabolic and hemodynamic parameters, infections and tacrolimus dose.

The baseline characteristics including mean age, systolic and diastolic blood pressures, body mass index (BMI), serum creatinine were similar in both groups. Majority of group 1 patients received living related donors where as group 2 patients had more often cadaveric transplants. The outcome variables were similar in both groups (see table).

SSR for immunosuppression following renal transplant is a reasonable alternative for SIR. The adverse effects of steroid therapy especially susceptibility to infection can be minimized by this therapy. However, these results need to be validated in larger studies.

Table: comparison of outcome variables in the two groups.

Outcome Variables	**Group 1**	**Group 2**
Acute Rejection (n)	1	2
Chronic Allograft Nephropathy (n)	0	2
Death (n)	1	0
BMI (mean Change)	0.4	2.5
SBP 12 month (mean) mmHg	119.6	122.7
Last Serum Creatinine mg/dl	1.4	1.3
Minor Infections (n)	3	9
Major Infections (n)	4	2