



1725 I Street NW • Suite 510 • Washington, DC 20006
Tel 202-659-0599 • Fax 202-659-0709 • www.asn-online.org

EMBARGOED FOR RELEASE UNTIL 5:00 PM ET ON APRIL 30, 2009

Contact: Shari Leventhal: 202-416-0658, sleventhal@asn-online.org

SIMULTANEOUS TRANSPLANT GIVES BEST RESULTS IN DIABETICS WITH KIDNEY DISEASE

Results May Aid Help Type 1 Diabetics Make Decisions about Transplants

Washington, DC (Monday, April 27, 2009) — For patients with type 1 diabetes who need a kidney transplant, simultaneous pancreas-kidney (SPK) transplantation offers a higher survival rate than other options—but with some increased risks, reports a study in an upcoming edition of the *Clinical Journal of the American Society of Nephrology* (CJASN). "This study helps patients with type 1 diabetes and their providers decide upon the best transplant treatment option," comments Alexander Wiseman, MD (University of Colorado).

The study included nearly 6,900 type 1 diabetics undergoing SPK transplantation. When SPK transplant was successful with both organs functional at one year, the long-term survival rate was 89 percent, compared to 80 percent for patients receiving a kidney from a living donor and 65 percent for those receiving a kidney (but not pancreas) from a deceased donor (All SPK transplants came from deceased donors). However, SPK recipients were about two percent more likely to die during the first year after transplantation. There was also a ten to fifteen percent chance that the transplanted pancreas would fail during the first year. When this happened, the long-term survival rate dropped to 74 percent.

Patients with type 1 diabetes and advanced kidney disease face a difficult decision, according to Wiseman: "Should they try to get on the waiting list for SPK and assume the greater surgical risk, or should they accept a kidney from a living donor and live with continued diabetes?" If they opt for kidney transplant alone, they then must decide whether to undergo a separate pancreas transplant later on. In Wiseman's study, even this option did not lead to better survival than successful SPK transplantation.

The new findings help to guide this decision by comparing the benefits and risks of the various transplant options. "Overall, the chances for better long-term success favor the SPK option, particularly if the waiting time for an SPK is not long—this varies with regions of the United States."

MORE

The study is limited by a lack of information on why the SPK recipients lived longer—one theory is that improved diabetes control helped avoid cardiovascular disease. In addition, although the study provides important new evidence that survival rate is higher after successful SPK transplantation, it does not help in predicting which patients will have a successful SPK transplant.

The authors reported no financial disclosures.

The study will appear online at <http://cjasn.asnjournals.org/> on April 30, 2009, doi 10.2215/CJN.04940908.

Founded in 1966, the American Society of Nephrology (ASN) is the world's largest professional society devoted to the study of kidney disease. Comprised of 11,000 physicians and scientists, ASN continues to promote expert patient care, to advance medical research, and to educate the renal community. ASN also informs policymakers about issues of importance to kidney doctors and their patients. ASN funds research, and through its world-renowned meetings and first-class publications, disseminates information and educational tools that empower physicians.

###