Experience in diagnosis and treatment of severe pneumonitis following renal transplantation

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[Abstract] AIM: To explore the diagnosis and treatment of severe pneumonitis following renal transplantation. METHODS: A retrospective analysis was made on the clinical data of 32 renal transplant recipients with severe pneumonitis, which were diagnosed by the clinical symptoms, chest X-ray and CT. The treatments included withdrawal of immunosuppressive agents, administration of empirical anti-infective drugs and methylprednisolone, prevention and treatment of secondary infection, reinforcement of nutritional support and use of respirator if necessary. Simultaneously responsible pathway was detected by analyses of BAL (broncho-alveolar lavage), sputum and blood specimen, with regard to cell differential count, cytological examination and cultures for fungus and viruses. RESULTS: Seventy-six cases (8.7%) of pneumonitis were found in the 877 renal transplant recipients, which included 52 (68%) patients with severe pneumonitis. Fever and chest distress were the most common initial symptoms of severe pneumonitis (100%). However, obvious cough and expectoration were observed only in 10 patients (15%). Positive rate of BAL alone and of blood culture combined with plaxyc swab and sputum were 69% (31/45) and 38% (20/52), respectively. The treatments were effective in 39 with 34 being cured and 5 being improved; 13 of 52 finally died. The effective rate was 75%. CONCLUSION: Severe pneumonitis is a most common life-threatening complication in renal transplant recipient, which mostly occurs during 6 months after renal transplantation. BAL should be performed early for detection of responsible pathogen. The key points of successful treatment include...

Keywords: kidney transplantation; pneumonitis; Bronchoalveolar lavage fluid

[1]本文研究了肾移植术后重症肺炎的诊治经验。目的:探讨肾移植术后重症肺炎的诊断和治疗方法。方法:对52例肾移植术后并发重症肺炎患者临床资料进行回顾性分析。结果:胸片、胸部CT诊断后,给予撤除免疫抑制剂、经验性抗感染药物、甲强龙抗感染治疗,同时防治继发感染,加强营养支持,必要时配合使用呼吸机。结果:77例肾移植患者中有76例有肺部感染,占95%,其中重症肺炎32例。结论:肾移植术后重症肺炎的诊断和治疗难度大,应积极治疗,必要时配合使用呼吸机。