

This study describes OPAT outcomes within a UK teaching hospital renal transplant population” Harrison et al (2015).

Abstract:

Outpatient parenteral antimicrobial therapy (OPAT) is a well-established method in medical specialties. Its use in renal transplant recipients has not been thoroughly explored. No guidelines within this patient subset exist. This study describes OPAT outcomes within a UK teaching hospital renal transplant population.

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Renal function, mapped by estimated glomerular filtration rate (eGFR), and clinical response to infection were collected retrospectively. A total of 635 antimicrobial episodes were administered to nine renal transplant patients over 12 discrete OPAT courses during the study period. Eleven of 12 OPAT courses (91.67%) produced a clinical improvement in infection. One course was terminated due to immunosuppressive-related neutropenia. No patient required admission due to failure of OPAT or adverse events. There was no significant change in graft function throughout the OPAT courses compared with baseline renal function (ANOVA, $P = 0.06$). One minor line infection was reported. This was treated conservatively and did not interrupt the OPAT. OPAT is safe and clinically effective in our renal transplant recipients with no significant deterioration in eGFR. The incidence of adverse events, specifically line complications, was lower in our population than those reported in the literature. Future work should develop OPAT guidelines designed for transplant recipients to outline the degree of monitoring required.

Reference:

Harrison, J., Hossain, M.A., Morsy, M. and Ghazanfar, A. (2015) Outpatient parenteral antibiotic therapy in a renal transplant population: A single-center experience. Saudi Journal of Kidney Diseases and Transplantation. 26(6), p.1121-9.

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