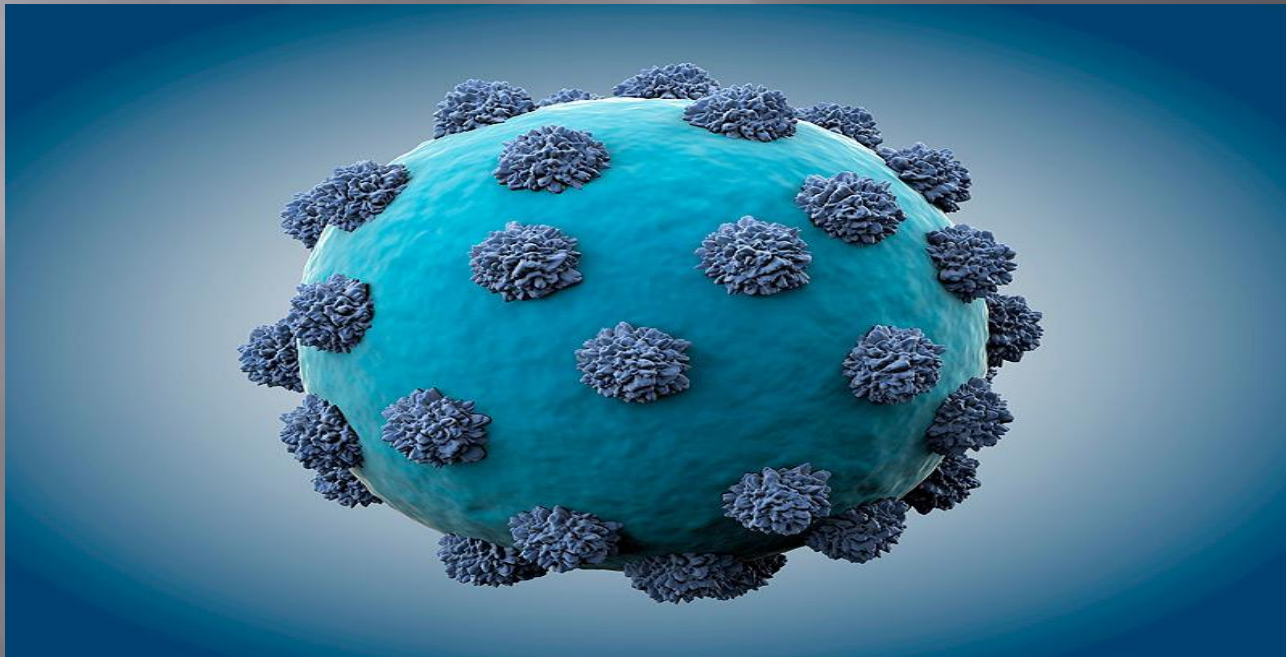


# CHALLENGES AND RISKS OF HCV INFECTION THERAPY IN KIDNEY TRANSPLANTATION

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- ▣ **Treatment options for chronic hepatitis C infection in patients with transplanted kidneys were reduced prior to the development of interferon free therapy**



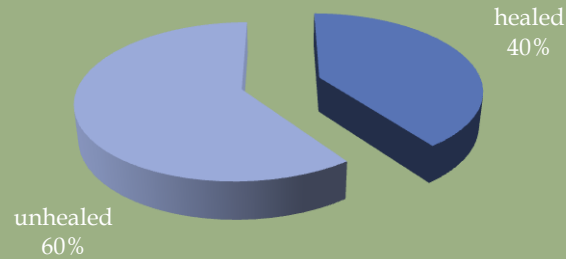
## **Research methods:**

**Recording** - clinical data  
- laboratory results

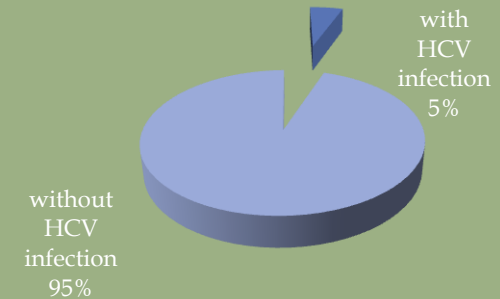
**Monitoring** - clinical course  
- complete blood count  
- liver  
- kidney function  
- HCV RNA levels

# Results:

## Efficacy of treatment with pegylated interferon



## Kidney transplant patients



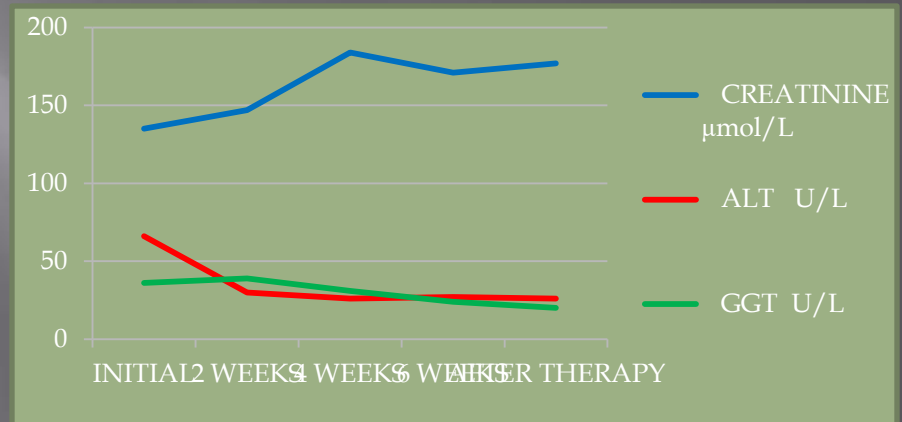
HCV – RNA No.			
	PATIENT 1	PATIENT 2	PATIENT 3
<b>INITIAL</b>	9.2 x 10 <sup>5</sup> IU/ml	8.4 x 10 <sup>5</sup> IU/ml	5,5 x 10 <sup>5</sup> IU/ml
<b>4 WEEKS</b>	undetectable	undetectable	undetectable
<b>12 WEEKS</b>	undetectable	undetectable	undetectable
<b>24 WEEKS</b>	undetectable	undetectable	undetectable
	SVR*	SVR*	SVR*

\* SVR – sustained virological response

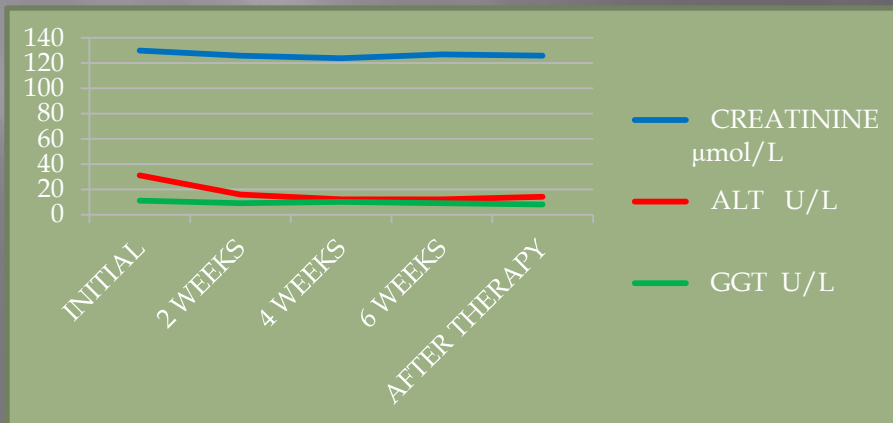


Patient 1

Patient 2



Patient 3



## ▣ Conclusion:

1. In the overall care of kidney transplant patients multidisciplinary team collaboration is needed
2. This includes intensive monitoring by transplant nephrologist during and after treatment
3. Nurses role in this team is to organize tests, educate patients, give psychological support and to recognize and prevent possible complications

**Thank  
you  
very  
much !!!**