



Impact of Renal Transplantation on Psychosocial Status of HIV Positive Patients

DR. Prof. D. K. AGARWAL
MD,DM,DNB,MAMS,FICP,FISN

Senior Consultant Nephrologist,
Indraprastha Apollo Hospitals,
New Delhi

Phone: Mobile: +91-98112 00113
e-mail: dmas100@gmail.com

Introduction

- Combined Antiretroviral Therapy (cART) has transformed human immunodeficiency virus (HIV) into a chronic manageable infective condition since late 90s
- In this era, end stage renal disease (ESRD) has become one of important causes of morbidity and mortality

Introduction

- Nearly 4-7% of HIV positive patients demonstrate ESRD¹
- Patients infected with HIV require RRT once they reach CKD stage V
- HIV patient with ESRD on maintenance hemodialysis (HD) has poor CD4 recovery on ART compared with those who received renal transplant²

1 - AIDS 2003;17:1803-9

2 -Am J Transplant 2008;8 Suppl S2:177-336. Abstract 1.

Introduction

- They receive Hemodialysis in isolation with single use dialyzer that adds significant cost to their treatment, increasing their stress substantially
- Various retrospective analyses, case reports and small prospective studies data showed good patient and graft survival in HIV infected renal transplant patients
- Now renal transplants are successfully being carried out in HIV positive patients, with results at par with those of non HIV patients

Introduction

- However, impact of renal transplantation on psychosocial status in HIV positive patients is not available

Aim

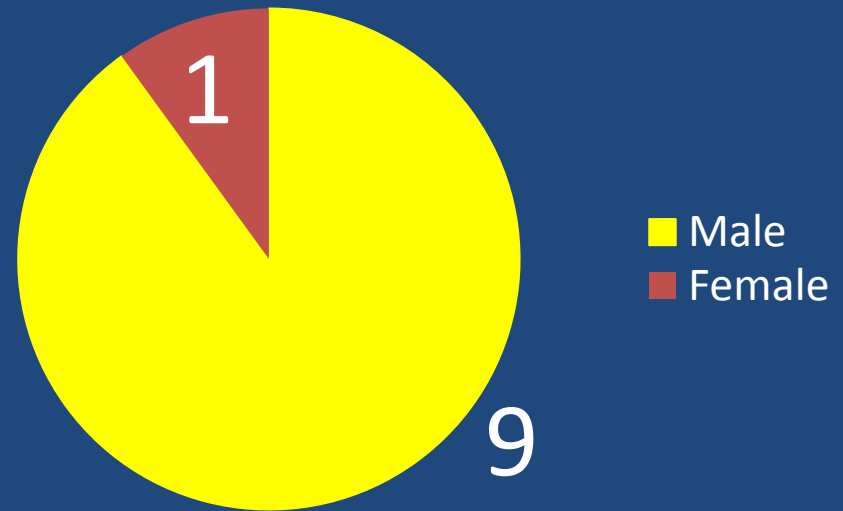
- To study the impact of renal transplant on psychosocial status in HIV positive patients

Materials and methods

- HIV positive patients undergone renal transplants at our center were included
- Questionnaire was used to evaluate impact of renal transplantation on their psychosocial status
 - Patients had to fill questionnaire
 - Impact on quality of life, relationship, psychological status, finances and overall outlook was evaluated

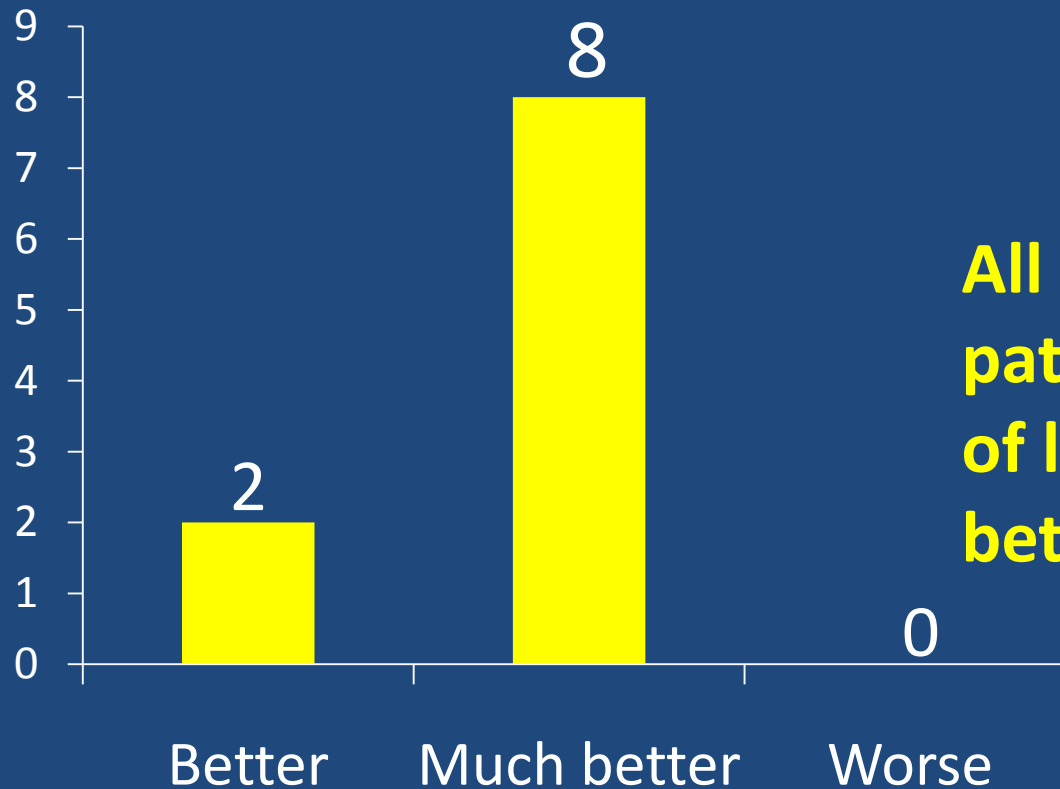
Results

- Ten (10) HIV positive patients had received renal transplantation at our center and were included/participated in study
- n = 10
- Male = 9 (90%)
- Female = 1 (10%)



Results

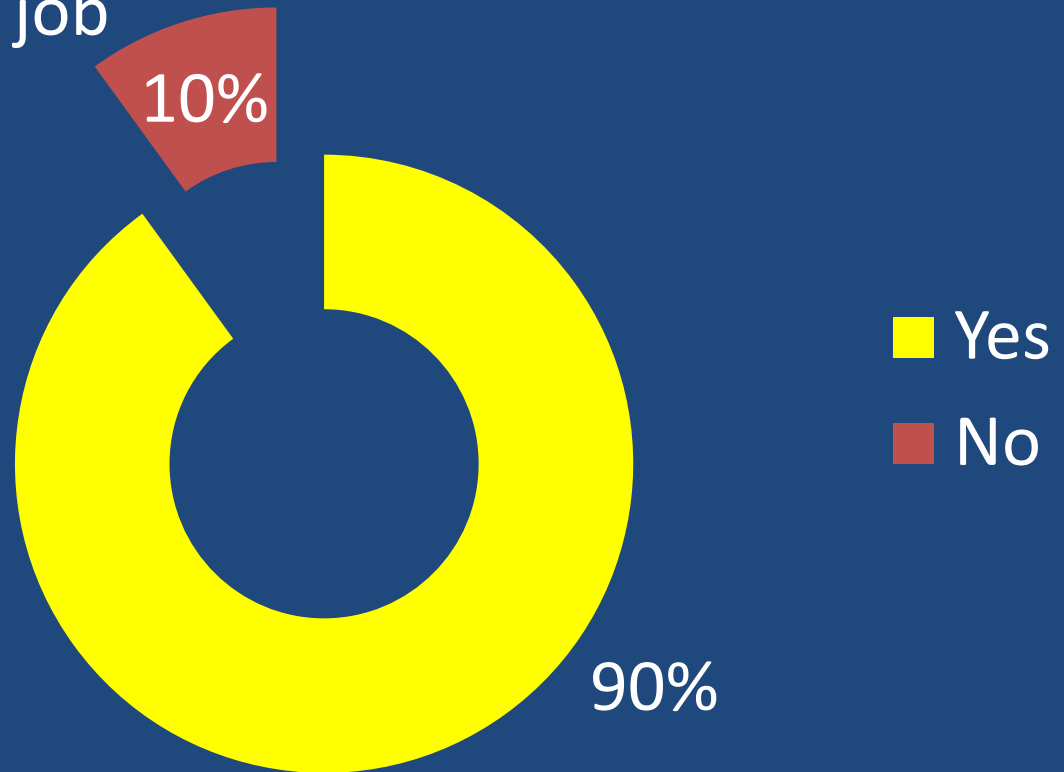
- Impact on quality of life
 - (A) Change of quality of life



**All (n=10)
patients quality
of life became
better**

Results

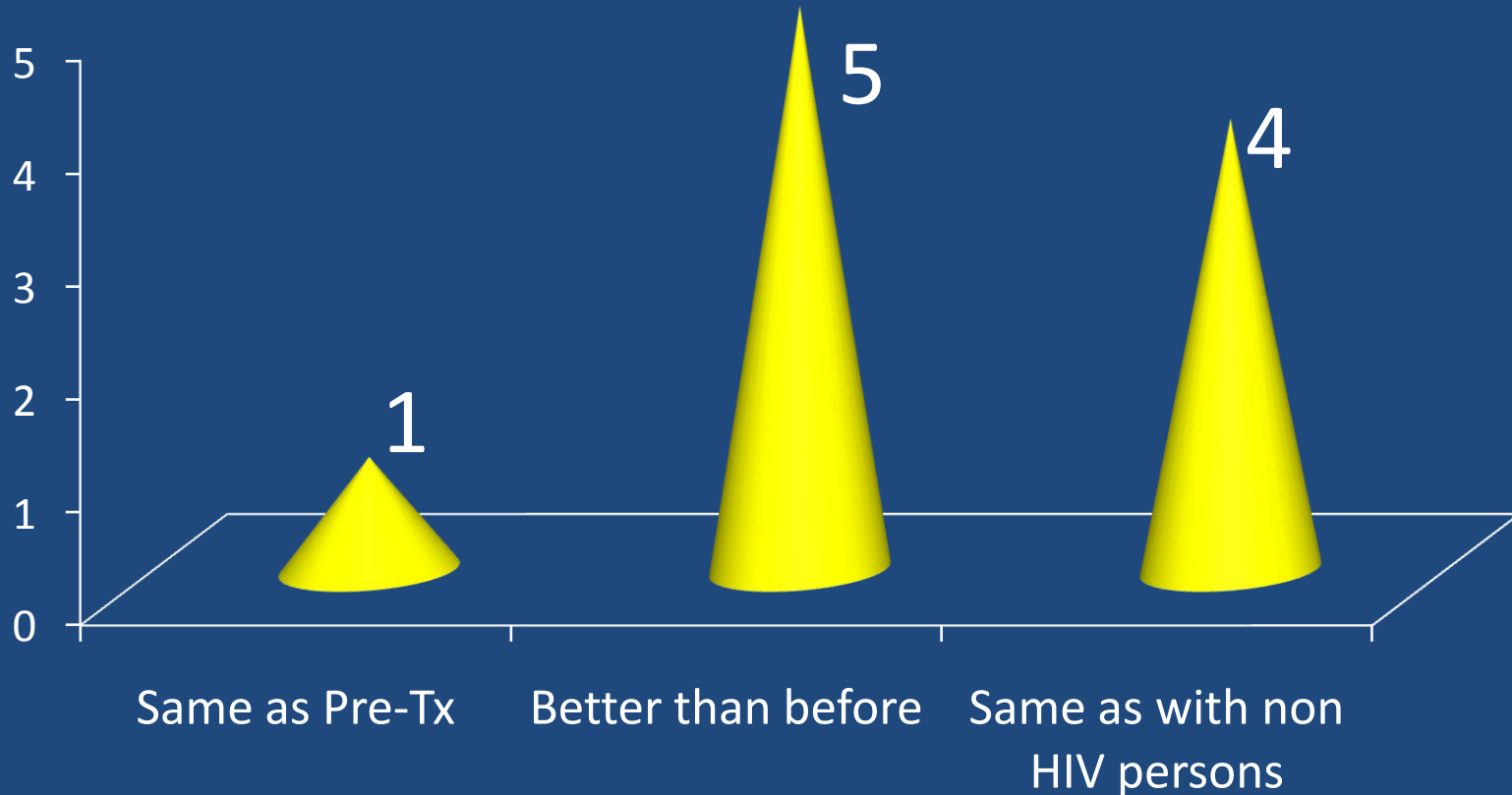
- Impact on quality of life
 - (B) Ability to do job



90% subjects were able to do jobs Post Transplant

Results

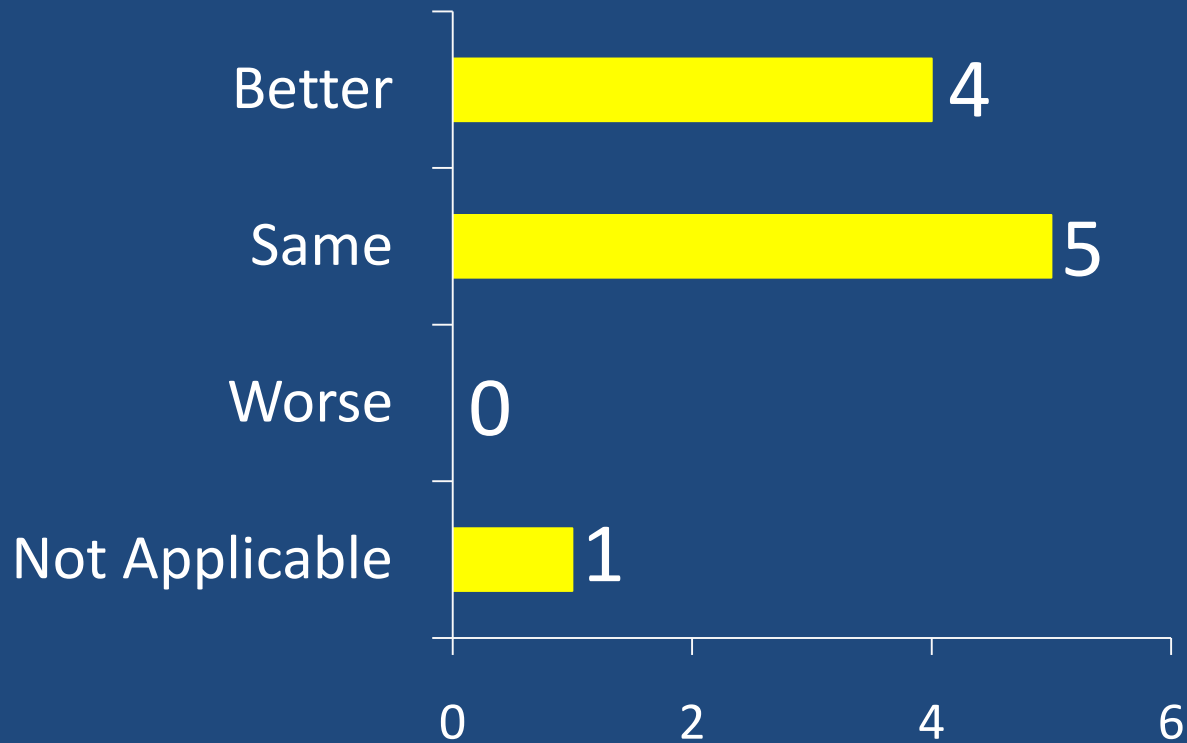
- Impact on relationship
 - (A) Behavior of Colleagues



Overall behavior of colleagues was better after renal transplant

Results

- Impact on relationship
 - (B) Behavior of Spouse



Overall behavior of spouses were better after renal transplant

Results

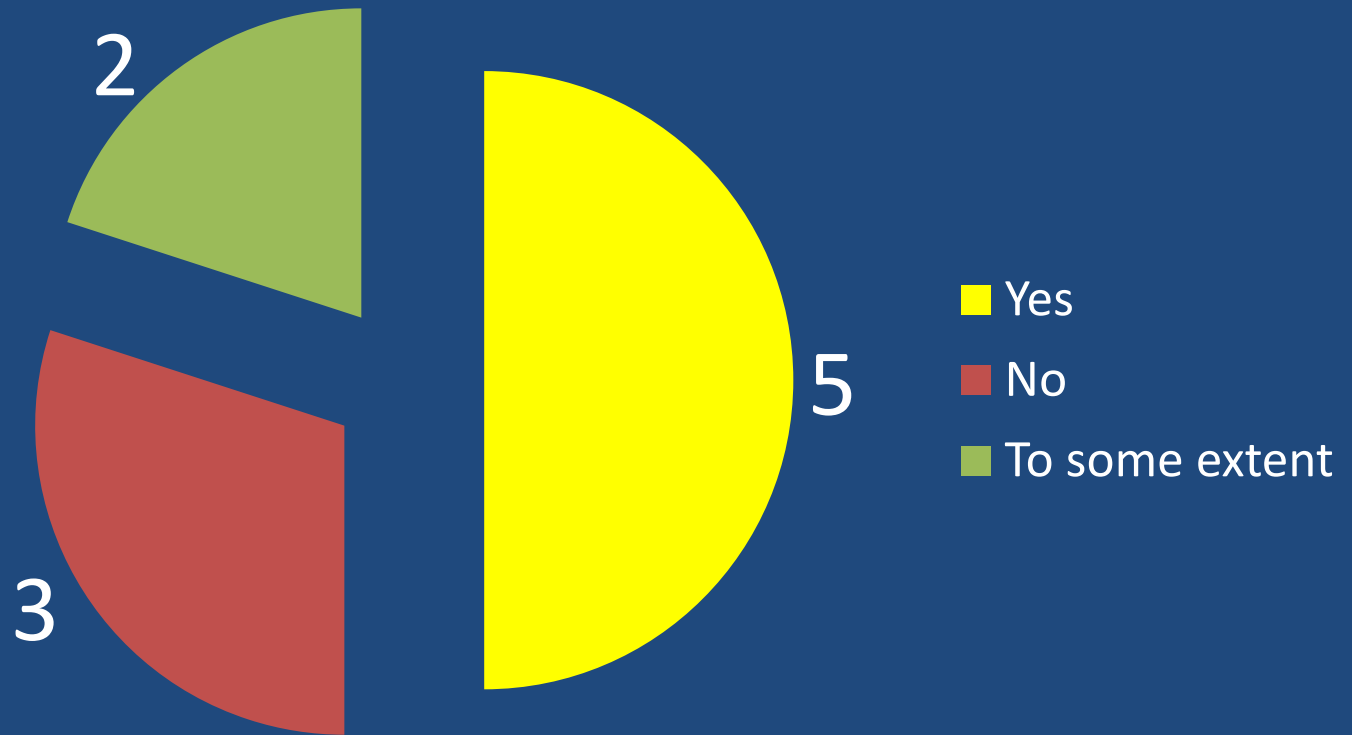
- Impact on relationship
 - (C) Sexual relationship



Sexual relationship improved in 7 out of 9 patients (77%) as one patient loses life before transplant

Results

- Impact on Psychological status
 - (A) Fear of unsuccessful Transplant



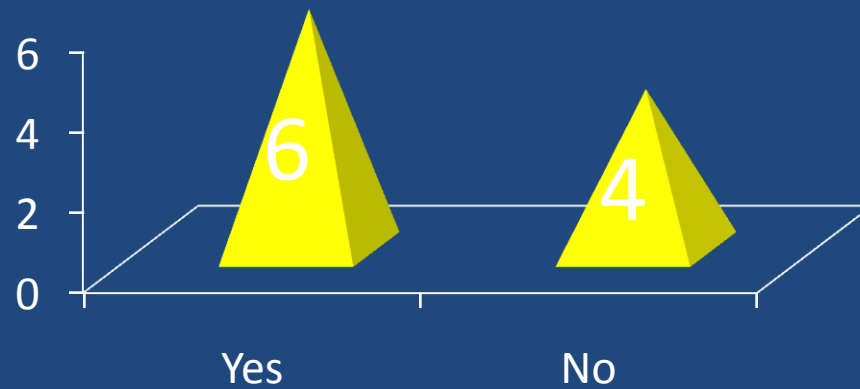
70% patients had fear concerning success of renal transplant at time of surgery

Results

- Impact on Psychological status
 - (B) Desire to live
 - 9 patients (out of 10) had desire for long life
 - 1 patient (out of 10) did not had desire for long life
 - (C) Depression
 - 7 patients (out of 10) did not experienced depression while 1 patient had experienced and other 2 patients had experienced same to some extent
 - * **90% patients wanted to live long, 70% did not experience depression at any point of time.**

Results

- Impact on treatment related problems:
 - (A) Fear of relapse of HIV after Transplant



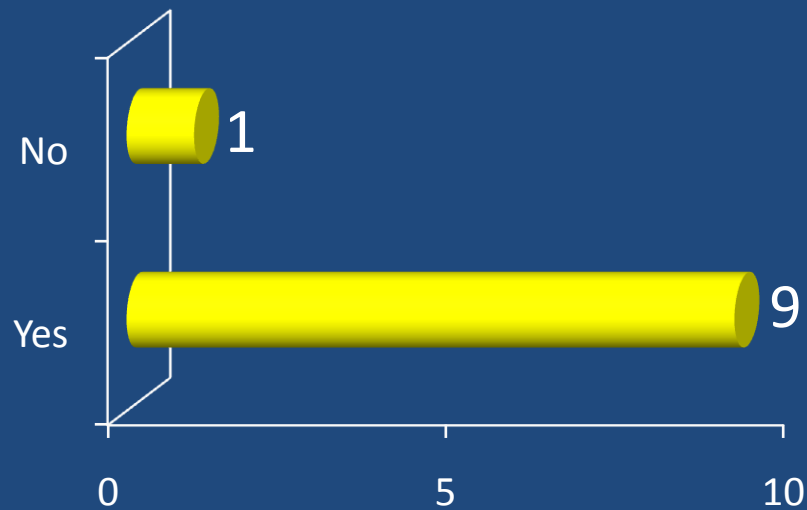
**Thus, 60% patients had fear of relapse after transfer,
Actually no patient (0/10) experienced relapse after transplant**

Results

- Impact on treatment related problems:
 - Immunosuppression drugs calibration
 - Frequently required in 7 (out of 10) patients while
 - Remaining 3 patients had not required frequently calibration
 - Change in HAART Protocol
 - One patient required change in HAART protocol while remaining 9 patients had not required change in HAART protocol

Results

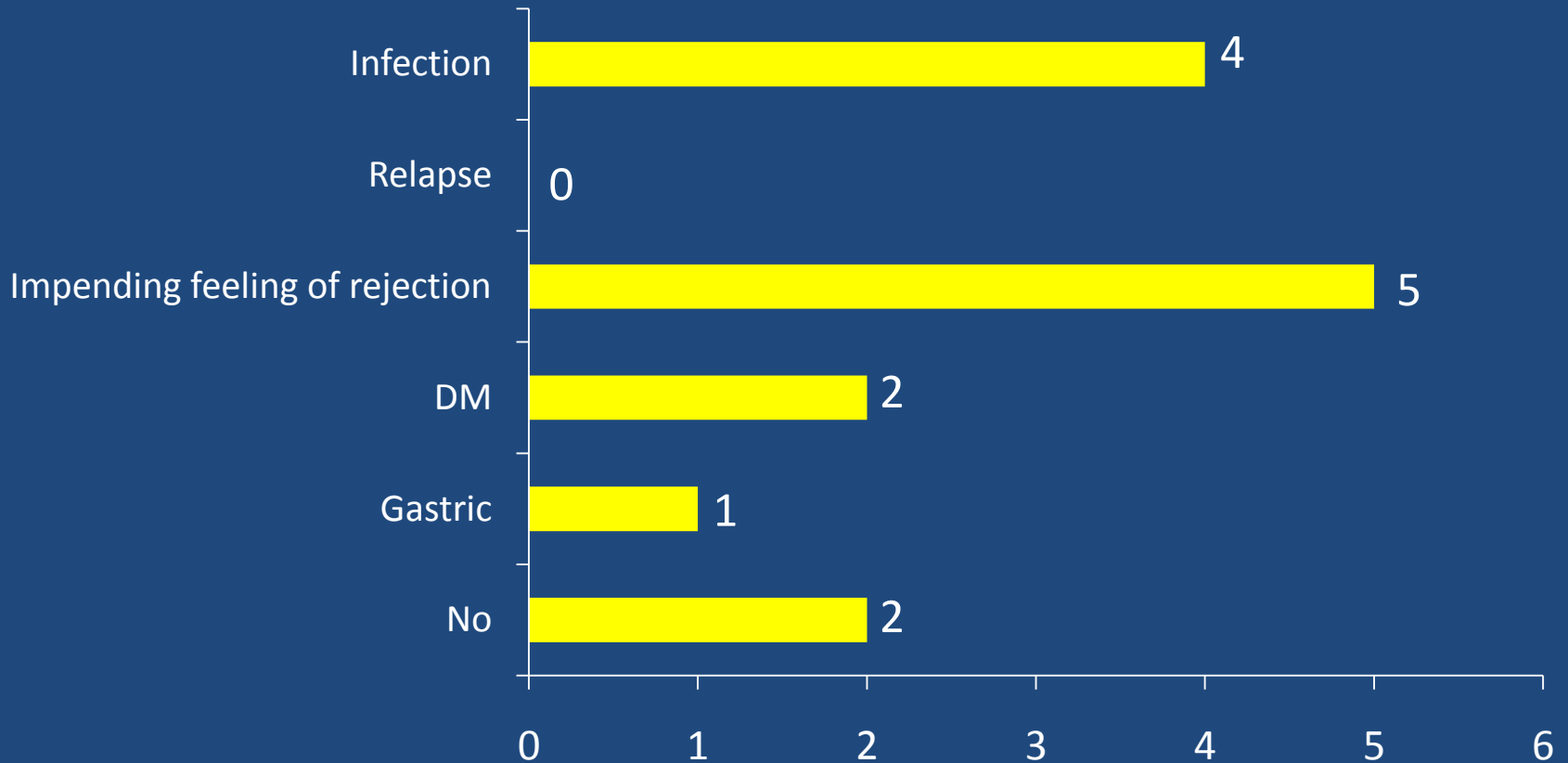
- Impact on treatment related problems:
 - Increase in pill burden



90% patients had experienced increase in pill burden

Results

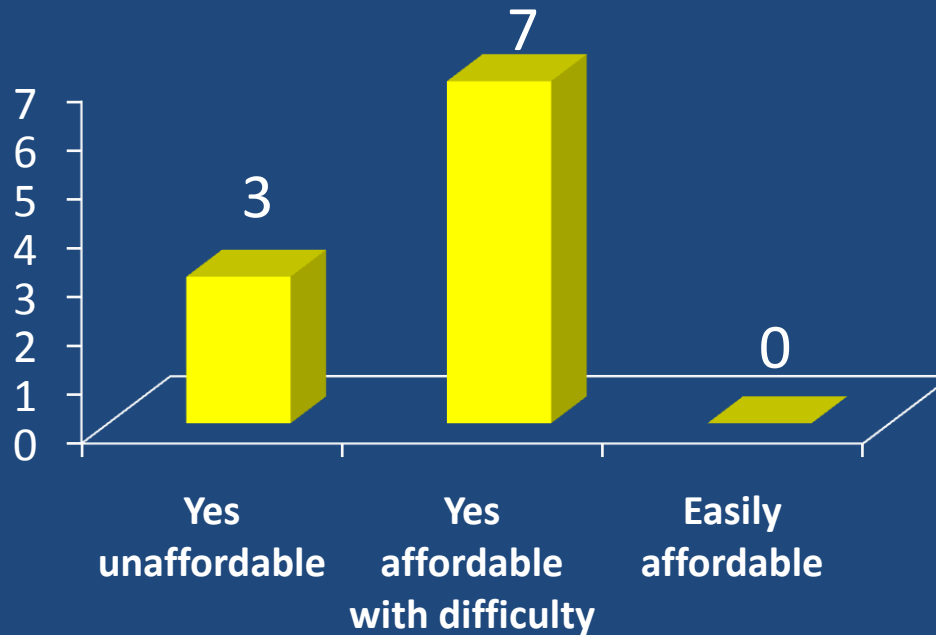
– Complications after transplantation



*** 50% patients expressed fear of graft rejection and 40% patient had infections.**

Results

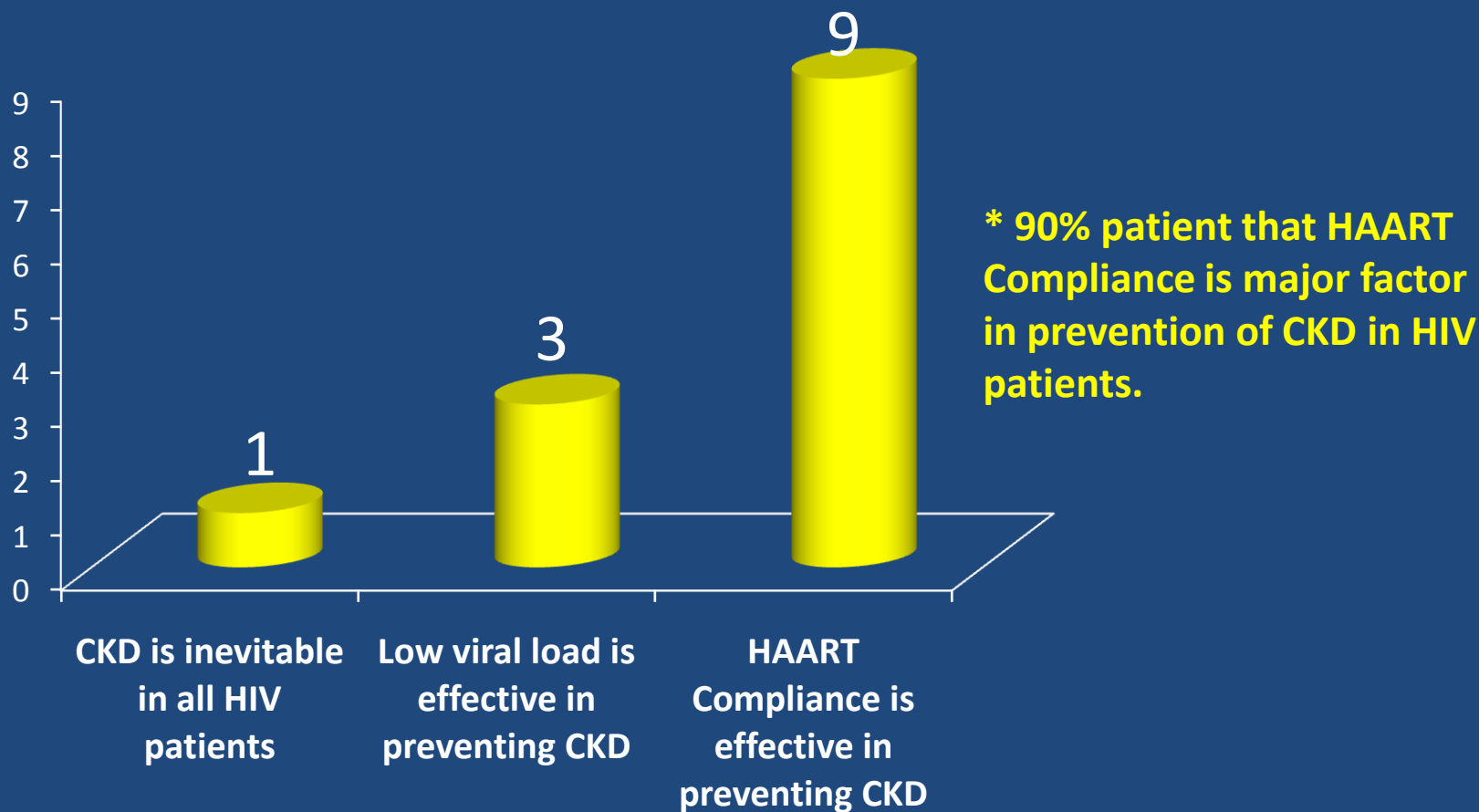
- Financial Impact
 - Cost factor



* **All patients, 100% Considered cost as a major issue.**

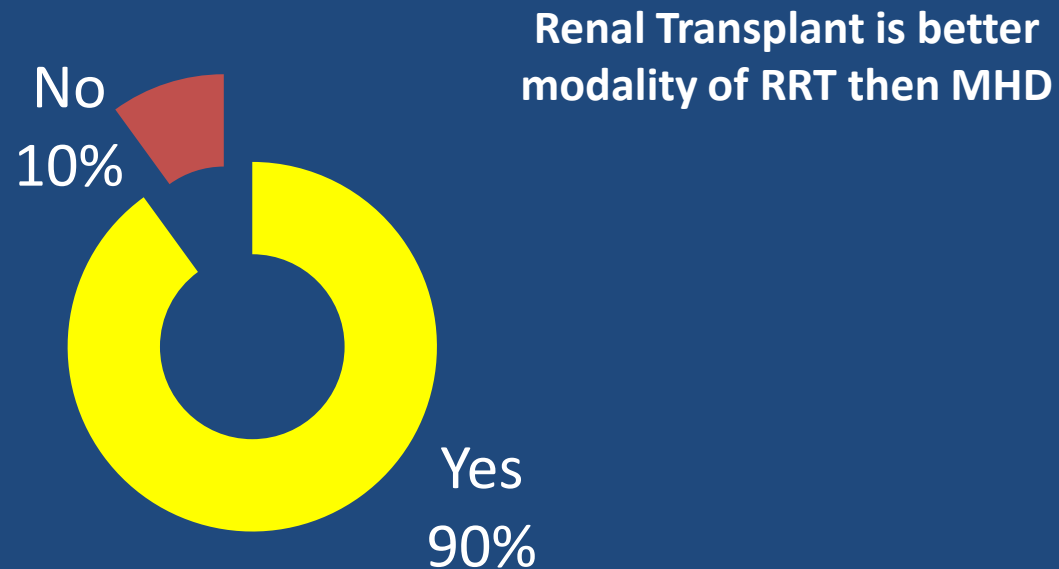
Results

- Impact on preventive aspects
 - Measure to prevent CKD in HIV patient



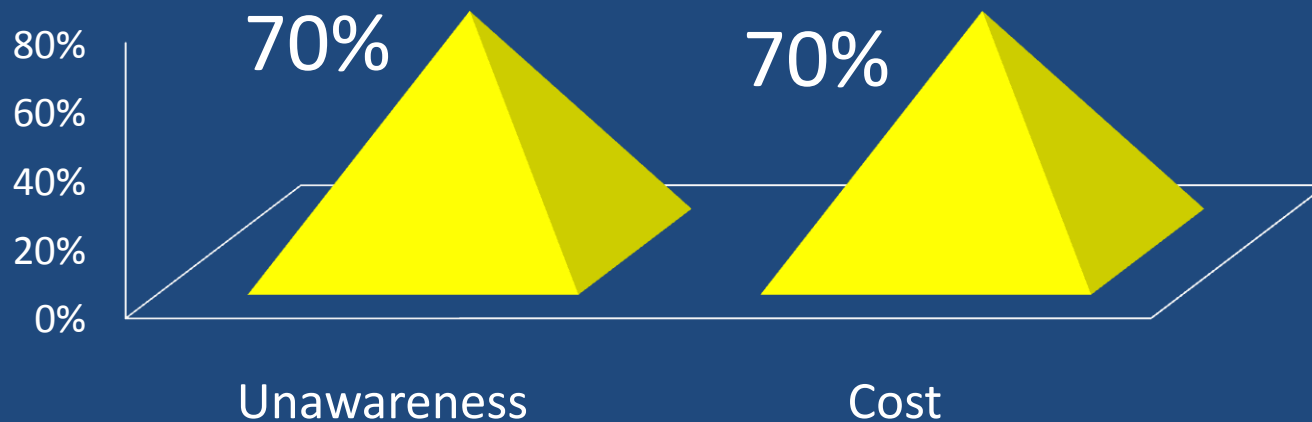
Results

- Impact on outlook towards renal transplant as the modality of renal replacement therapy in HIV patients



Results

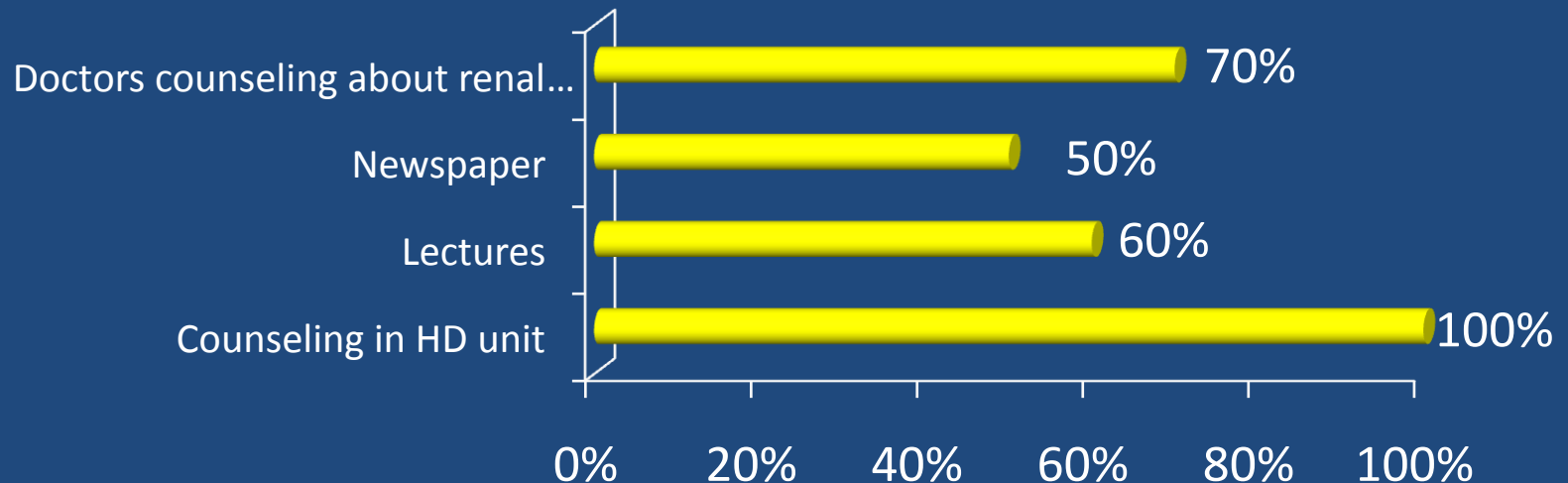
Factor limiting renal transplant in CKD stage-V



70% each thought that high cost and unawareness are limiting factor

Results

- Measures to improve awareness for renal transplant in HIV positive patients in CKD stage-V



Counseling of patients at dialysis centers (100%) and counseling of treating physician about RRT and renal transplant are best modalities to make transplant programme successful to common man

Important results

- All the patients experienced better quality of life post transplant
- 9 out of 10 were able to do their job normally
- Overall behavior of their colleagues and spouse was better after the transplant
- Sexual relationship improved dramatically in 7 out of 9 patients

Important results

- Impact of Renal transplant on psychological status was positive
- However fear concerning the success of the transplant was there in 70% patients at the time of surgery
- 60% patients had fear of relapse HIV infection due to immunosuppressive drugs
 - Although none had relapse of the infection post transplantation

Important results

- By this time most patients understood the disease fairly well and 90% felt that compliance of cART could prevent / delay CKD in HIV patients
- 90% patients thought that renal transplant is the best modality of RRT
- However the huge cost involved and lack of awareness were important limiting factors

Important results

- Counseling of patients at dialysis centers as well as of physicians treating HIV patients about Renal Transplantation along with increasing awareness in Public by Newspapers and Lectures, were found to be the best way to make transplant programme successful to common man

Conclusions

- Renal transplantation has positive impact on psychosocial assessment in HIV positive patients
- Renal transplantation should be encouraged as treatment option whenever feasible in HIV positive ESRD patients

Thank You!

