

FIGURE 16-42

Data from the United States Renal Data Source regarding distribution of causes of death in children aged 0 to 19, 1993 to 1995. (From United States Renal Data System [3]; with permission.)

Cause of death	Recipient age			
	0-1	2-5	6-12	13-17
	n (%)	n (%)	n (%)	n (%)
All causes	27(100.0)	33(100.0)	33(100.0)	43(100.0)
Viral infection	5(18.5)	1(3.0)	6(18.2)	8(18.6)
Bacterial infection	3(11.1)	6(18.1)	5(15.2)	6(14.0)
Other infections	4(14.8)	5(15.2)	3(9.1)	3(7.0)
Malignancy	1(3.7)	2(6.1)	2(6.1)	4(9.3)
Cardiopulmonary	5(18.5)	7(21.2)	10(30.3)	6(14.0)
Hemorrhage	3(11.1)	4(12.1)	3(9.1)	6(14.0)
Recurrence of original disease	1(3.7)	1(3.0)	0(0.0)	1(2.3)
Dialysis-related complications	1(3.7)	0(0.0)	0(0.0)	3(7.0)
Other	4(14.8)	5(15.2)	3(9.1)	5(11.6)
Unknown	0(0.0)	2(6.1)	1(3.0)	1(2.3)

FIGURE 16-43

Data from the North American Pediatric Renal Transplant Cooperative Study on causes of death by age group. This study revealed a high rate of attrition among pediatric transplantation recipients under the age of 5 years. It is unclear whether this high rate is due to a higher rate of infection. (From Tejani and coworkers [39]; with permission.)

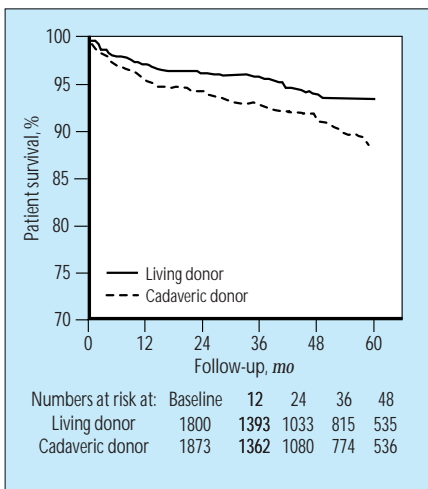


FIGURE 16-44

Data from the 1995 North American Pediatric Renal Transplant Cooperative Study showing a total of 214 deaths. Infection was the leading cause of death, occurring in 74 patients. This graph depicts the survival distribution estimates by donor source. Infants aged under 2 years at the time of transplantation have a mortality rate of 14%. This rate is significantly higher ($P < 0.001$) than in other age groups, with a mortality rate between 4.7% and 8.0%. (From Warady and coworkers [5]; with permission.)

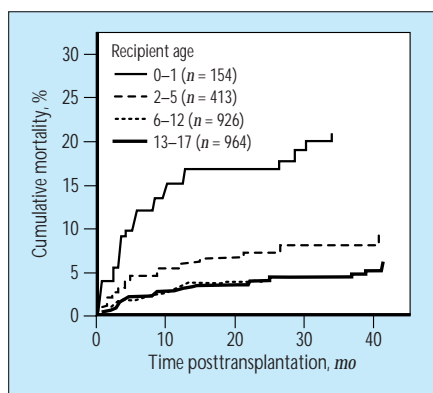


FIGURE 16-45

Data from the North American Pediatric Renal Transplant Cooperative Study of patient mortality by recipient age. A significant difference ($P < 0.001$) in 1-year mortality rates by age groups occurred: 13.6% (21 of 154) for 0- to 1-year-old recipients; 8.0% (33 of 413) for 2- to 5-year-old recipients; 3.6% (33 of 926) for 6- to 12-year-old recipients; and 4.5% (43 of 964) for 13- to 17-year-old recipients. Mortality also is increased for recipients of kidneys from young cadaveric donors. A dramatic increase in cumulative mortality is seen, with increasing concordance between young donor and recipient ages. (From Tejani and coworkers [39]; with permission.)

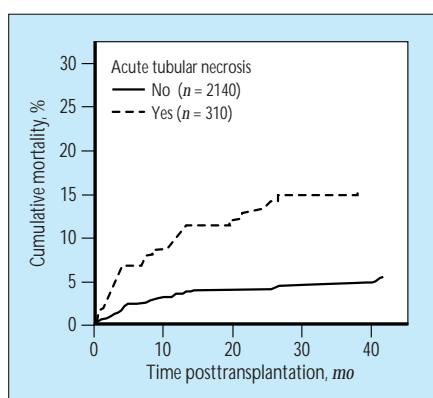


FIGURE 16-46

The effect of acute tubular necrosis (ATN) on patient survival. The development of ATN leads to a significantly higher ($P = 0.0001$) mortality rate of 13.2% (risk ratio of 3.1) for the 310 patients reported on in the registry. A 25% mortality rate and 6.4 risk ratio were noted for the 188 patients who developed graft failure within 30 days after transplantation ($P < 0.001$). (From Tejani and coworkers [39]; with permission.)

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