

Pregnancy outcomes similar for women with kidney transplants as child, adult

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Pregnancy outcomes appear to be similar for women who undergo kidney transplants as children or adults, according to an article published online by *JAMA Pediatrics*.

Previous studies have reported [pregnancy outcomes](#) for women with transplants, regardless of age at transplantation, and it is unclear whether their findings apply to women who received transplants as children, according to the study background.

Melanie L. Wyld, M.B.B.S., M.B.A., M.P.H., of Royal Prince Alfred Hospital, New South Wales, Australia, and coauthors compared pregnancy outcomes for women who had [kidney transplantation](#) in childhood (less than 18 years of age; child-tx mothers) with women who had kidney transplantation in adulthood (18 years or older; adult-tx mothers). The study included all [women](#) with a functioning [kidney transplant](#) included in the Australia and New Zealand dialysis and transplant registry who had at least one pregnancy reported between 1963 and 2012.

Authors identified a total of 101 pregnancies in 66 child-tx mothers and 626 pregnancies in 401 adult-tx mothers. At the time of pregnancy, the child-tx mothers were an average age of 25 and had a functioning transplant for 10 years, while adult-tx mothers were an average age of 31 with a functioning transplant for six years.

Study results show that live births resulted from 76 percent of

pregnancies in child-tx mothers and 77 percent of pregnancies in adult-tx mothers. The incidence of premature babies (less than 37 weeks gestation) also was similar for child-tx mothers (45 percent) and adult-tx mothers (53 percent). In addition, a similar proportion of preterm babies born to both sets of mothers were small for [gestational age](#) (22 percent for child-tx mothers and 10 percent for adult-tx mothers). Term babies born to child-tx and adult-tx mothers were frequently small for gestational age (57 percent vs. 38 percent, respectively), both significantly more frequently than babies born at term in the general population.

"This work has shown that outcomes for child-tx mothers are similar to outcomes for adult-tx mothers and should provide comfort to such [mothers](#) and their physicians that their early onset of kidney failure and longer period of posttransplant exposure to immunosuppression do not adversely affect their pregnancy outcomes," the study concludes.

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