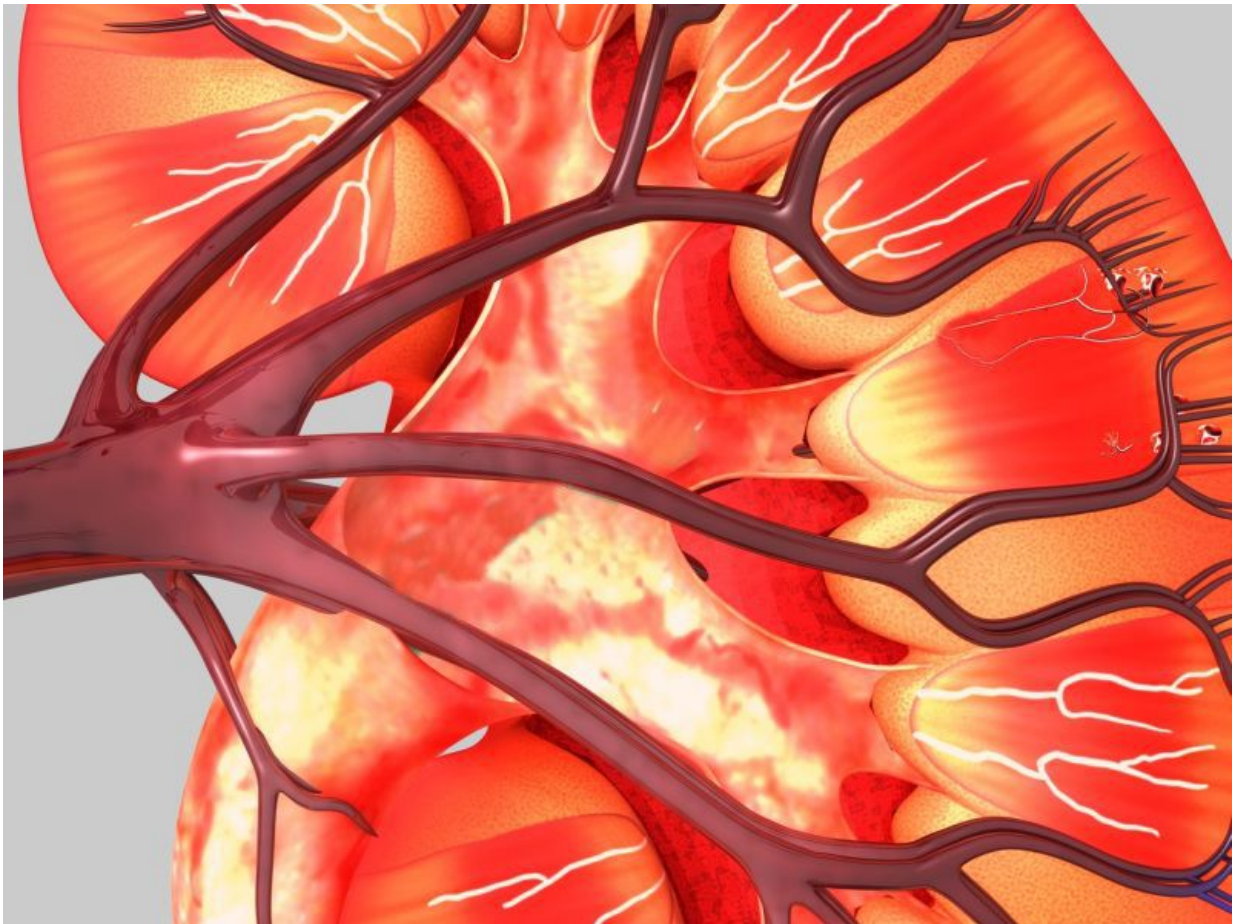


Antimicrobial treatment no benefit after kidney transplant

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(HealthDay)—For patients undergoing kidney transplantation (KT),

systematic antimicrobial treatment of asymptomatic bacteriuria (AB) beyond the second month post-transplant is not beneficial, according to a study published online April 18 in the *American Journal of Transplantation*.

Julia Origüen, M.D., from the Universidad Complutense in Madrid, and colleagues randomized 112 KT recipients who developed one or more episodes of AB beyond the second month post-transplantation to either [treatment](#) (systematic antimicrobial therapy for all AB episodes up to 24 months post-transplantation; 53 patients) or control (no antimicrobial therapy; 59 patients).

The researchers found that at 24 months follow-up there were no differences in the primary outcome of occurrence of acute pyelonephritis in the intention-to-treat (7.5 and 8.4 percent in the treatment and control groups, respectively; odds ratio, 0.88; 95 percent confidence interval, 0.22 to 3.47) or per-protocol populations (3.8 and 8.0 percent, respectively; odds ratio, 0.46; 95 percent confidence interval, 0.05 to 4.34). There were no differences in any secondary outcomes (lower [urinary tract infection](#), acute rejection, *Clostridium difficile* infection, colonization/infection by multidrug-resistant bacteria, graft function, and all-cause mortality).

"In conclusion, systematic screening and treatment of AB beyond the second month after transplantation provide no apparent benefit among KT recipients," the authors write.

More information: [Abstract](#)
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