

The challenge of organ transplant rejection

November 15 2021, by Shivani Sharma



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Acute rejection of a transplanted organ by the recipient's immune system remains one of the leading causes of pediatric heart transplant failure. While there have been vast improvements in the practice over time, significant variation still exists between transplant centers in the methods used to diagnose acute rejection.

Justin Godown, MD, and colleagues analyzed rejection prevalence and diagnostic practices in pediatric heart [transplant centers](#). Reporting in the *Journal of Heart and Lung Transplantation*, they found that 22% of pediatric heart [transplant](#) patients experienced an episode of rejection in their first year after transplant, most frequently within the first three months.

Most of these episodes were diagnosed using surveillance biopsy. Despite significant differences in methods used to diagnose [acute rejection](#) between centers, overall graft survival and patient outcomes did not appear to be impacted by these differences.

Minimizing practice variation and creation of standardized surveillance protocols may help inform the identification of best practices in pediatric heart transplants, the researchers concluded.

More information: J. Godown et al, Practice variation in the diagnosis of acute rejection among pediatric heart transplant centers: An analysis of the pediatric heart transplant society (PHTS) registry, *The Journal of Heart and Lung Transplantation* (2021). [DOI: 10.1016/j.healun.2021.08.002](#)

Provided by Vanderbilt University

Citation: The challenge of organ transplant rejection (2021, November 15) retrieved 9 July 2023 from <https://medicalxpress.com/news/2021-11-transplant.html>

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