Fludrocortisone - a treatment for tubulopathy post paediatric renal transplantation: A Scottish study
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BACKGROUND
Post renal transplantation, tubulopathies may occur due to transplantation itself or secondary to the use of immunosuppressive regimen. This often requires administration of large doses of sodium bicarbonate and sodium chloride, often resulting in poor compliance.

Adult studies have shown the advantages of fludrocortisone (fludro) in the treatment of severe tubulopathies post renal transplant. There is limited data in children. We report our experience from a Scottish tertiary paediatric centre.

OBJECTIVE
• To evaluate the efficacy of fludrocortisone as a treatment for tubulopathy post renal transplantation in children.
• To review the reduction in sodium supplementation in patients commenced on fludrocortisone.

METHOD
• Retrospective study using data collected from a Scottish renal database from December 2014 to January 2016.
• Data on patient demographics, medication, renal function and feeds obtained.

RESULTS
47 post-transplant patients reviewed between December 2014 and January 2016
23 patients commenced on Sodium supplements
9 patients commenced on Fludrocortisone
• Median patient age 8.3 (4.9-16.4) years
• Fludrocortisone given 22 (1-80) months after transplant
• Patients followed up for 9 (2-20) months
• All patients stopped sodium bicarbonate
• All patients had a reduction or no increase in the total daily dose of sodium chloride

CONCLUSIONS
• Fludrocortisone is an effective treatment for tubulopathies in children post renal transplantation.
• Fludrocortisone reduced the requirement for sodium bicarbonate and sodium chloride supplementation without a significant effect on renal function or blood pressure.
• The hypokalaemic properties of fludrocortisone are an added benefit as some patients in this cohort were on potassium restricted diets.
• This study adds to the limited evidence in the literature regarding the benefit of fludrocortisone.

REFERENCES

Disclosure of Interest: None