Early steroid withdrawal in pediatric renal transplant: Five years of follow-up

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This prospective, comparative trial investigated the impact on mean change in height standard deviation score (SDS), acute rejection rate, and renal function of early steroid withdrawal in 96 recipients with 5 years of follow-up. Recipients under basiliximab induction and steroid withdrawal (SW: TAC/MMF; n=55) were compared with a matched steroid control group (SC: TAC/MMF/STEROID, n=41). SW received steroids until Day 6, SC decreased to 10 mg/m 2 within 2 months post-transplant. Five years after SW, the longitudinal growth (SDS) gain was 1.4±0.4 vs. 1.1±0.3 for SC group ($p<0.02$). Height benefits in prepubertal and pubertal status in both groups were demonstrated in the delta growth trends (mixed model; $p<0.01$). Biopsy-proven acute rejection in SW was 11% and 17.5%, SC (p: ns). Mean eGFR (ml/min/1.73 m 2) at 5 years post-transplant was SW 80.6±27.8 vs. 82.6±25.1 for SC (p: ns). The death-censored graft survival rate at 1 and 5 years was 99 and 90% for SW; 98 and 96% for SC (p = ns). PT