Infection complication rate in kidney transplanted patient in Mongolia in last 3 years

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Background: Infection remains a significant cause of morbidity and mortality in renal transplant recipients. In Mongolia, mean cause of kidney graft dysfunction is infection.

Methods: We studied a total of 72 patients who underwent a kidney transplant from 2017 to 2019. Demographic data was investigated as follows: age, sex, region from transplant center, body mass index, bacteriology culture post-kidney transplantation of early period (1–6 months) and late period (more than 6 months), epidermal growth factor receptor, induction and maintenance immunosuppressive medication, number of hospitalization, surgical complication, vaccination, etc.

Results: Overall mean age of subjects was 34.6 ± 3.5 years; females were 14 (19.4%) and males were 58 (80.6%). With living donor recipients were 59 (81.9%), deceased donor recipients were 13 (18.1%). Region location from transplantation center was 40 patients (55.6%) living in Ulaanbaatar City and 32 patients (44.4%) living so far from Ulaanbaatar in region. The number of early-period infection complications was 81 bacterial (98.8%) and one virus (1.2%). From bacterial infections, urine tract infections were 26 (32.1%), respiratory infections were 52 (64.2%), and tuberculosis, pyodermitis, pneumonia, and cytomegalovirus infection were one (1.2%), respectively. From late-period 67 infections, 64 (95.5%) were bacterial, three (4.5%) were virus infections, and from all this 23 (35.9%) were urine tract, 32 (50.0%) were respiratory, four (6.3%) were pyodermitis, and H1N3 virus etiology pneumonia, herpes zoster, varicella zoster were one (1.5%), respectively. From all of 72 infected patient, graft loss was one patient. Main bacterial etiology in both periods was *Escherichia coli*, *Klebsiella pneumoniae* extended-spectrum β -lactamases, etc. Number of hospitalization in infected 26 patients was 46.

Conclusions: Infection complications in Mongolia for post-kidney transplant are still common, particularly urinary tract infections.

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