

Obesity after renal transplant: New dilemma for healthy subjects

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Renal transplantation (RT) is a standard treatment for end-stage renal disease, standing at more than 90% survival rate after one yr, and at over a 70% survival rate after five yr. The majority of transplanted patients enjoy an excellent quality of life but complications can occur in the long term, and can develop subclinically in otherwise well subjects; there are various underestimated nutritional and metabolic aspects, including the so-called post-transplant overweight and obesity. During the post-transplant period, the use of immunosuppressants, corticosteroids, calcineurin inhibitors, and the presence of risk factors, including non-alcoholic fatty liver disease and kidney and bone complications have been largely implicated in development of obesity. Strategies to reduce the progression to obesity and increased body mass index are mandatory. Follow up of RT patients should include careful screening for diabetes, and dyslipidemia and to support weight reduction with a carefully constructed program, particularly based on diet modification and exercise. With early identification and appropriate and aggressive management, excellent long-term health outcomes and acceptable survival can be achieved.

Biography

Amin R. Soliman is Chairman of Nephrology and Renal Transplantation, Head of 31st Department of Medicine, Chief of Clinical Nutrition Faculty of Medicine, Cairo University, Cairo, Egypt. He is Head of Nephrology and Renal Transplantation, French University Specialized hospital Cairo Egypt. He has completed his Ph.D. at the age of 31 from Cairo University and postdoctoral studies from USC University School of Medicine, Los Angeles, CA. He has published more than 75 papers in reputed journals and serving as an editorial board member of local, regional and international journals.

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