Protocol biopsies after kidney transplantation

Stellingen behorende bij het proefschrift

PROTOCOL BIOPSIES AFTER KIDNEY TRANSPLANTATION

emphasis on interstitial fibrosis/ tubular atrophy and peritubular capillary loss in relation to clinical parameters

Anke Keijbeck, 14 februari 2023

1. Assessment of macroscopic atherosclerosis in the ostium of the potential donor kidney is neither related to microscopic vascular injury nor to graft outcome (this thesis).
2. The interstitial fibrosis and tubular atrophy (IF/TA) score of a reperfusion biopsy might guide immunosuppressive therapy (this thesis).
3. Histological indicators of ischemia/reperfusion injury in reperfusion kidney biopsies are related to delayed graft function after renal transplantation (this thesis).
4. Decrease in peritubular capillary density is an early marker for renal damage after renal transplantation and precedes development of interstitial fibrosis and tubular atrophy (this thesis).
5. The decrease in peritubular capillary density in the first month after transplantation is related to clinical outcome parameters such as delayed graft function and creatinine increase, and does not occur after an uncomplicated transplantation (this thesis).
6. Visual assessment of interstitial fibrosis on a continuous scale can be used in addition to categorical scoring of interstitial fibrosis of protocol renal transplant biopsies according to Banff (impact).
7. Despite cumulating evidence that acute injury is clinically relevant, there is a lack of validated parameters to assess acute injury after renal transplantation.
8. General pathologists should be trained to read and interpret donor biopsies in a consistent manner and using consistent criteria (Liapis et al Am J Transplant 2017).
9. Not only randomised controlled trials, but also (retrospective) cohort studies could benefit from systematic data monitoring.
10. Finished projects do not exist, only abandoned ones.