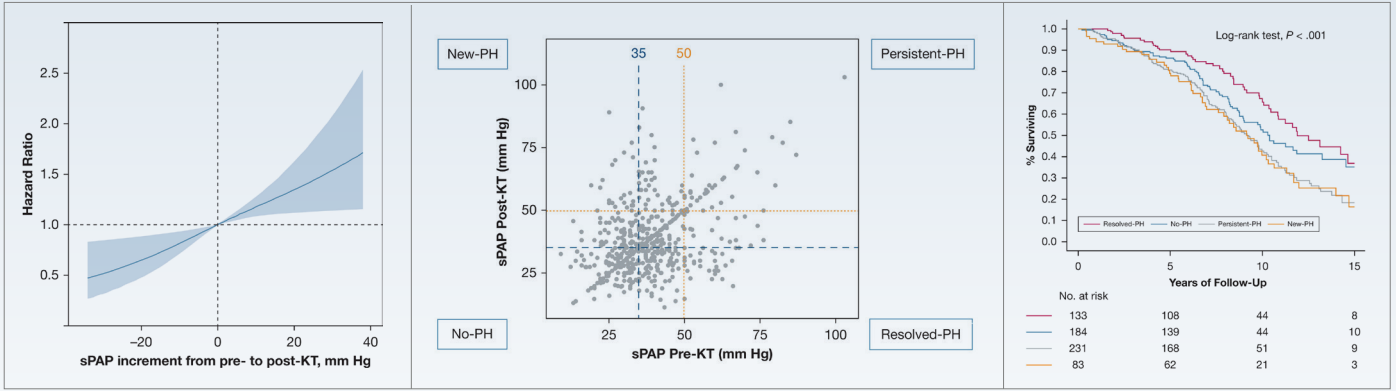
# What Is the Relationship Between Pulmonary Artery Pressure Trajectories From Pre-KT to Post-KT and the Role of PH Post-KT?

## STUDY DESIGN

- Retrospective cohort study of patients undergoing kidney transplantation (KT)
- Included only those who had echocardiograms pre-KT and post-KT
- Primary outcome: All-cause mortality stratified by No-Pulmonary Hypertension (PH), New-PH, Resolved-PH, and Persistent-PH

## RESULTS




- Mortality risk increased continuously with a ≥ 1 mm Hg pulmonary artery pressure (PAP) increase from pre-KT to post-KT adjusted for age, sex, and baseline PAP.
- PH post-KT was independently associated with increased risk of mortality, particularly in patients who newly developed PH post-KT.
- Patients in whom PH resolved post-KT had favorable survival.

**In this study, in patients referred for KT, outcome was strongly associated with PAP trajectory, suggesting that PAP may be a novel biomarker for risk stratifying KT candidacy and supporting prospective end-stage kidney disease studies investigating the role of PH in clinical decision-making.**

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