Pneumonia in Organ Transplant Recipients

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Abstract

Solid organ transplant and hematopoietic stem cell transplant is an established treatment for many malignant and non-malignant end stage diseases. With advances in understanding of immunology of transplantation, the graft survival has improved but immunosuppression is still an issue. Immunosuppression puts these patients at risk of opportunistic infections. Pneumonia is amongst one of the most common infections in this population. Microorganisms causing pneumonia vary from bacterial, mycobacterial, fungal to viral depending upon the level of immunosuppression. Therefore, management of pneumonia in this group of patients is challenging. Most of the times, isolation of the causative organism is not possible at the time of presentation making selection of antimicrobials difficult. Empirical treatment is usually guided by various factors like, age of the graft, level of immunosuppression, radiological features, prevalent local pathogens and initial response to therapy. Recently, with better understanding of immunology and antimicrobial therapy, mortality and morbidity have reduced significantly.

Key words: Solid organ transplantation, hematopoietic stem cell transplantation, immunosuppression, pneumonia.