

Retrospective
Comparative Analysis
of Short Term
Outcome of Induction
Agent: Thymoglobulin
vs Grafalon



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DISCLOSURES: NIL

INTRODUCTION



Anti-thymocyte immunoglobulin is the preferred induction agent in kidney transplantation.



Anti-thymocyte immunoglobulin derived from rabbit is most commonly used and available in two formulations.



Thymoglobulin is produced by immunizing rabbits with human lymphocytes and manufactured by Sanofi.



Grafalon is produced by immunizing rabbits with T cell leukaemia line Jurkat and manufactured by Neovii.



They have different antigen specificities. Grafalon has greater selectivity for activated T-cells and also depletes CD4+ CD28-.T-cells



Though both are rabbit antithymocyte globulin, there are differences in efficacy.



In few studies Grafalon has been shown to be associated with higher rejection rates.



This retrospective comparative analysis is done to determine the efficacy and adverse event of the the two agents.

STUDY DESIGN

- RETROSPECTIVE ANALYSIS
- ABO COMPATIBLE KIDNEY TRANSPLANTATION
- LIVING DONOR PROGRAM
- PERIOD- 2021-2022
- FOLLOW UP- 6 MONTHS
- THYMOGLOBULIN GP- 20 PTS
- GRAFALON GP- 10 PTS
- EXCLUSIONS:
 - AGE <18YRS
 - PRIOR H/O KIDNEY TRANSPLANTATION

IMMUNOSUPPRESSION PROTOCOL:

- INDUCTION
 - ATG TOTAL DOSE 3MG/KG (1MG/KG ON DAY 0, 1, 2)
 - GRAFALON DOSE 6MG/KG (2MG/KG ON DAY 0,1,2)
- TACROLIMUS :
 - 0.1MG/KG IN DIVIDED DOSE
 - TARGET C0 LEVEL- 8-10
- MYCOPHENOLATE SODIUM 360MG:
 - 2 TAB BD IF >60KG
 - 1 TAB TDS IF <60KG
- STEROIDS
 - PULSE METHYLPRED 125MG OD X 3 DAYS ON POD 0,1,2 + 500MG IN OT
 - FOLLOWED BY PREDNISOLONE 0.5MG/KG:

BASELINE CHARACTERISTICS

	THYMOGLOBULIN (n=20)	GRAFALON (n=10)
MEAN AGE	49.7yrs	44.1yrs
MALE	13 (65%)	5 (50%)
NATIVE KIDNEY DISEASE	DKD-6 IGAN-4 ADPKD-1 AAV-1 UNKNOWN-8	DKD-2 IGAN-1 FSGS-1 UNKNOWN-6
DIALYSIS VINTAGE	0.9yrs	0.7yrs
H/O MULTIPLE BLOOD TRANSFUSION	8 (40%)	2 (20%)
H/O MULTIPLE PREGNANCY	4 (20%)	3 (30%)
HLA MATCH		
LESS THAN 3	18 (90%)	9 (90%)
3 OR MORE	2 (10%)	1 (10%)
P/H/O IMMUNOSUPPRESSION	1 (5%)	1 (10%)
DESENSITISATION	2 (10%)	1 (10%)
DONOR MEAN AGE	34.1yrs	32 yrs
DONOR KIDNEY MEAN GFR	52.2	61.9
HCV POSITIVE	1	0

RESULTS AND CONCLUSION

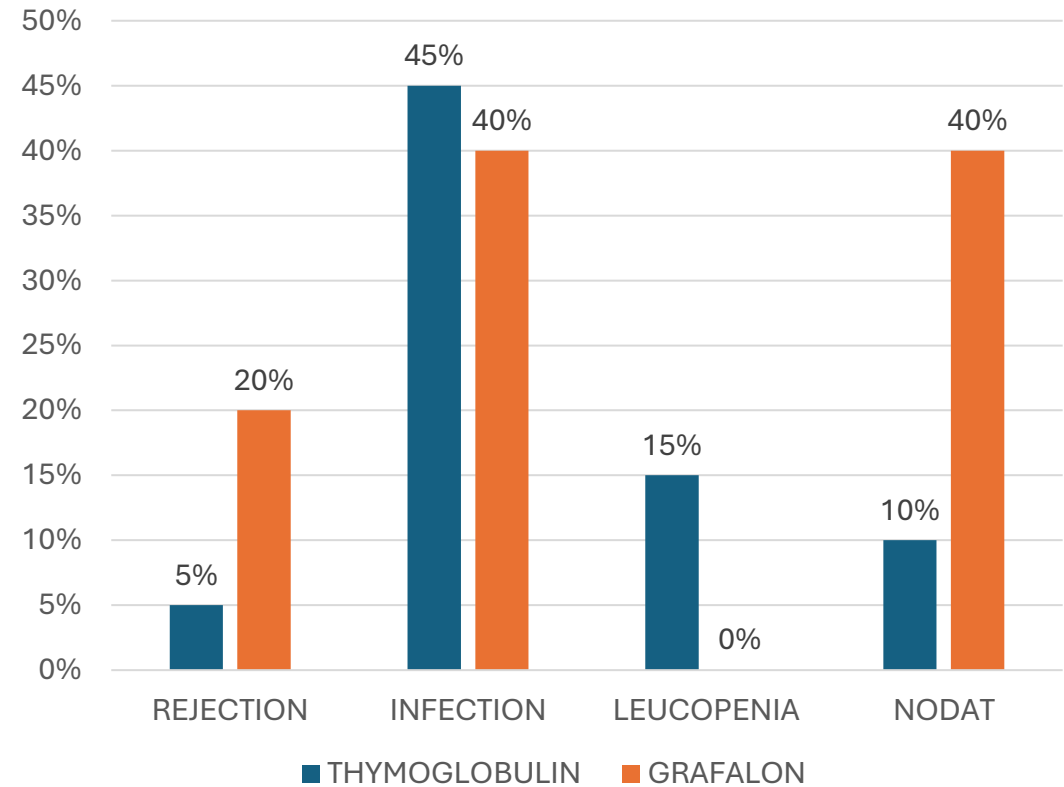
- Graft outcome and survival was similar in both group
- Acute rejection was more common in Grafalon group 2/10 (20%) as compared to Thymoglobulin group 1/20 (5%) which needs to be validated in larger cohort.
- Infection was similar in both groups. 4/10 (40%) in Grafalon cohort as compared to 9/20 (45%) in Thymoglobulin cohort.
- UTI was most common infection occurring in 9/30 pts (30%). Herpes Zoster occurred in 2/30 pts (6.6%).

CLINICAL OUTCOME

GRAFT OUTCOME

	THYMOGLOBULIN	GRAFALON
NADIR CREAT (mg/dl)	0.88	0.94
CREAT AT 1 MONTH (mg/dl)	1.01	1.12
CREAT AT 3 MONTH (mg/dl)	1.05	1.15
CREAT AT 6 MONTH (mg/dl)	1.12	1.21

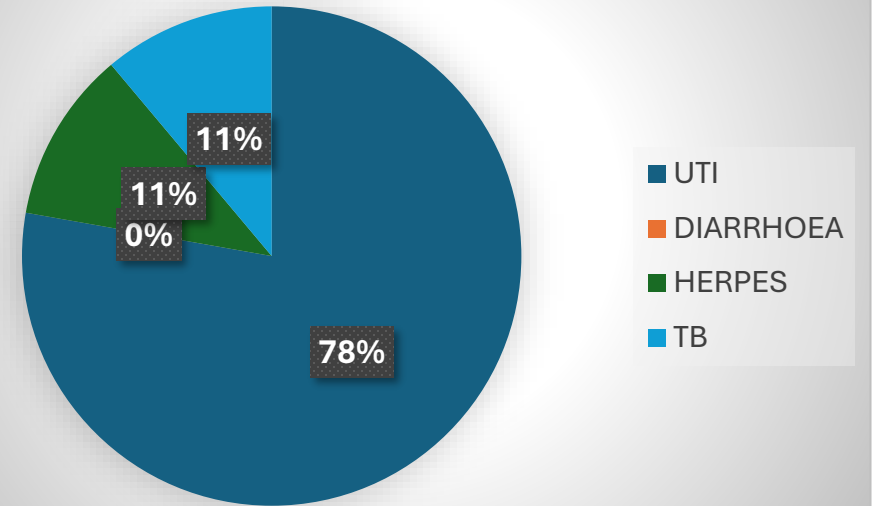
COMPLICATIONS



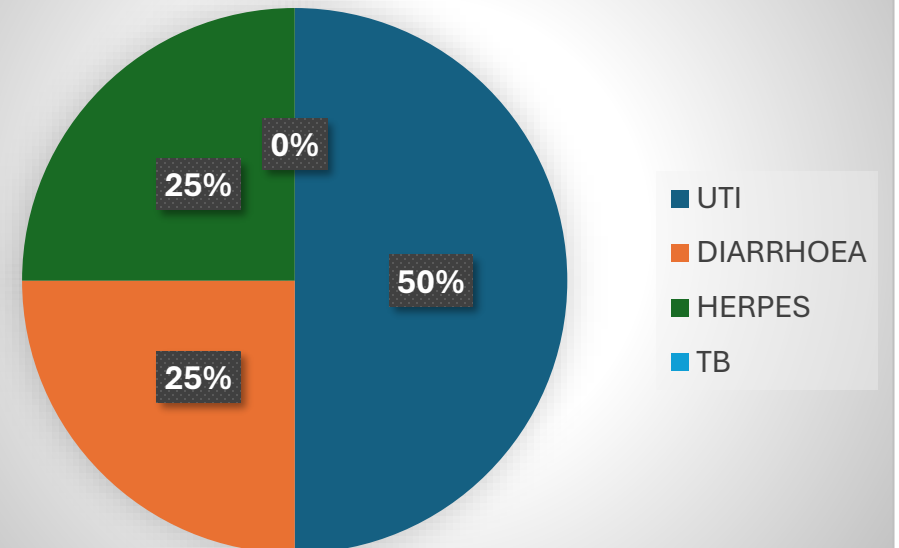
INFECTIONS

	THYMOGLOBULIN (N=20)	GRAFALON (N=10)
INFECTION INCIDENCE	9 (45%)	4 (40%)
UTI	7 (35%)	2 (20%)
DIARRHOEA	0 (0%)	1 (10%)
HERPES ZOSTER	1 (10%)	1 (10%)
TB	1 (5%)	0 (0%)

THYMOGLOBULIN



GRAFALON



STUDY COMPARISION

STUDIES	FU	REJECTION		INFECTION		LEUCOPENIA		NODAT	
		THYMO	GRAF	THYMO	GRAF	THYMO	GRAF	THYMO	GRAF
STYRC et al	12 mth	25.3%	10.1%	32.9%	42.3%	81.2%	41.5%	NA	NA
THUKRAL et al	12 mth	6.45%	9.67%	22.58%	19.35%	NA	NA	7.4%	10.7%
JHA et al	18 mth	5.1%	12.8%	20.7%	12.8%	NA	NA	6.7%	5.1%
BURKHALTER et al	24 mth	17.6%	11.1%	NA	NA	NA	NA	NA	NA
OUR STUDY	6 mth	5%	20%	45%	40%	15%	0%	10%	40%

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ORIGINAL ARTICLE



WILEY

Effectiveness and safety of two different antithymocyte globulins used in induction therapy in kidney transplant recipients: A single-center experience

Beata Styrac¹ | Michał Sobolewski¹ | Jerzy Chudek² | Aureliusz Kolonko¹ | Andrzej Więcek¹

Grafalon® vs. Thymoglobulin® as an Induction Agent in Renal Transplantation - A Retrospective Study

Pranaw Kumar Jha¹, Abhyudaysingh Rana¹, Ajay Kher², Shyam Bihari Bansal¹, Sidharth Sethi¹, Ashish Nandwani¹, Manish Jain¹, Dinesh Bansal¹, Dinesh Kumar Yadav¹, Ashwini Gadde¹, Amit Kumar Mahapatra¹, Puneet Sodhi¹, Vijay Kher¹

Comparison of Thymoglobulin and Grafalon as Induction Agents in Renal Transplantation: A Prospective Study

Sharmila Thukral^a, Ratnesh Rokde^b, Deepak Shankar Ray^b

DISCUSSION

- Grafalon has been in use worldwide for a longtime. It was introduced in India in 2016. It is used commonly now.
- Jha et al reported increased risk of acute rejection in Grafalon group but infection risk was increased in Thymoglobulin group. These findings were similar to our results.
- Thukral et al which included low risk cases did not report increased risk of rejection in Grafalon group.
- Bayesian network metanalysis revealed less acute rejection episodes in thymoglobulin group but increased graft loss, infection and death.

TABLE 3 | Results of network meta-analyses and surface under the cumulative ranking curve (SUCRA) values.

Outcomes	Study number	Model	ATG (vs. ATG-F) OR (95%CI)	SUCRA (THG/ATG-F)
DGF	18	Consistency	1.27 (0.53–2.89)	0.58/0.78
		Inconsistency	1.67 (0.48–7.71)	
BPAR	22	Consistency	0.59 (0.27–1.40)	0.78/0.39
		Inconsistency	0.83 (0.22–4.85)	
Steroid-resistant BPAR	5	Consistency	0.61 (0.08–4.62)	0.76/0.49
		Inconsistency	0.54 (0.08–4.41)	
Patient survival	18	Consistency	2.78 (0.78–11.82)	0.34/0.83
		Inconsistency	2.41 (0.36–11.86)	
Graft survival	21	Consistency	1.40 (0.59–5.98)	0.59/0.83
		Inconsistency	1.12 (0.23–4.69)	
Infection	14	Consistency	1.49 (0.43–5.23)	0.54/0.79
		Inconsistency	1.32 (0.25–6.32)	
CMV infection	10	Consistency	0.96 (0.22–4.22)	0.37/0.40
		Inconsistency	1.15 (0.19–7.41)	
<i>De novo</i> diabetes	4	Consistency	2.95 (0.57–21.33)	0.30/0.90
		Inconsistency	3.12 (0.59–25.03)	
Malignancies	5	Consistency	8.33 (0.48–332.79)	0.06/0.89
		Inconsistency	7.84 (0.55–319.32)	

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Sec. Alloimmunity and Transplantation

Volume 11 - 2020 | <https://doi.org/10.3389/fimmu.2020.00457>

Thymoglobulin vs. ATG-Fresenius as Induction Therapy in Kidney Transplantation: A Bayesian Network Meta-Analysis of Randomized Controlled Trials



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Limitations

- Small study
- Retrospective design
- Follow up only 6 months
- DSA and protocol biopsy not done
- CMV and BKV protocol screening not done

