Table 8.6h
Persistency of Discharge Regimen by Follow-up Period, 2000 to 2004
Recipients with Kidney-Pancreas Transplants

	Year of Transplant				
	2000	2001	2002	2003	2004
Discharge Regimen (w/ or w/o Steroid Use)					
CyA+Aza					
At Discharge (N)	3	1	-	-	1
At Discharge (%)	100.0%	100.0%	-	-	100.0%
6 Months PostTx (%)	33.3%	0.0%	-	-	100.0%
1 Year PostTx (%)	33.3%	0.0%	-	-	-
2 Years PostTx (%)	33.3%	0.0%	-	-	-
3 Years PostTx (%)	33.3%	0.0%	-	-	-
CyA+MMF					
At Discharge (N)	106	73	61	45	14
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	75.5%	80.8%	78.4%	79.5%	57.1%
1 Year PostTx (%)	69.7%	72.6%	75.0%	63.6%	50.0%
2 Years PostTx (%)	59.2%	62.8%	70.0%	61.4%	-
3 Years PostTx (%)	52.3%	58.6%	63.5%	61.4%	-
CyA+Siro					
At Discharge (N)	22	14	5	26	32
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	72.7%	85.7%	60.0%	84.6%	78.1%
1 Year PostTx (%)	68.2%	85.7%	20.0%	69.2%	50.0%
2 Years PostTx (%)	59.1%	78.6%	0.0%	60.4%	-
3 Years PostTx (%)	50.0%	70.7%	0.0%	-	-
Siro+MMF					
At Discharge (N)	2	10	5	30	40
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	100.0%	70.0%	0.0%	63.3%	80.0%
1 Year PostTx (%)	100.0%	60.0%	0.0%	56.7%	59.2%
2 Years PostTx (%)	100.0%	60.0%	0.0%	47.2%	-
3 Years PostTx (%)	0.0%	37.5%	0.0%	47.2%	-
Tac+Aza					
At Discharge (N)	10	1	5	6	2
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	30.0%	100.0%	60.0%	50.0%	100.0%
1 Year PostTx (%)	20.0%	100.0%	60.0%	33.3%	-
2 Years PostTx (%)	20.0%	-	60.0%	33.3%	-
3 Years PostTx (%)	10.0%	-	60.0%	-	-
Tac+MMF					
At Discharge (N)	574	530	579	562	609
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	84.7%	83.8%	82.7%	80.3%	86.6%

(Continued)

Source: OPTN/SRTR Data as of May 1, 2006.
Notes:
Regimen change is defined as being on different drug combination at follow-up comparing to discharge, or indication of conflicting regimen (CyA vs. Tac; MMF/MPA vs. Aza; Siro vs. Evero) during follow-up peroid, or graft failure/death. Addition or deletion of steroids is not considered a regimen change.
Rates are calculated for the most common discharge regimens.
CyA: Cyclosporine; Tac: Tacrolimus; MMF: Include MMF(Mycophenolate Mofetil) and MPA(Mycophenolate Sodium); Aza: Azathioprine; Siro: Sirolimus.
See Technical Notes for further details.

Table 8.6h (Continued)
Persistency of Discharge Regimen by Follow-up Period, 2000 to 2004
Recipients with Kidney-Pancreas Transplants

	Year of Transplant				
	2000	2001	2002	2003	2004
Discharge Regimen (w/ or w/o Steroid Use)					
Tac+MMF					
1 Year PostTx (%)	77.5%	75.7%	71.7%	73.3%	78.4%
2 Years PostTx (%)	67.7%	65.8%	65.4%	67.3%	74.0%
3 Years PostTx (%)	60.2%	59.3%	61.4%	64.8%	-
Tac+Siro					
At Discharge (N)	63	110	105	71	51
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	74.2%	83.4%	77.1%	81.4%	78.9%
1 Year PostTx (%)	69.1%	75.7%	70.5%	65.7%	74.0%
2 Years PostTx (%)	55.5%	67.8%	60.8%	63.9%	74.0%
3 Years PostTx (%)	41.2%	49.6%	54.3%	63.9%	-

Source: OPTN/SRTR Data as of May 1, 2006.
Notes:
Regimen change is defined as being on different drug combination at follow-up comparing to discharge, or indication of conflicting regimen (CyA vs. Tac; MMF/MPA vs. Aza; Siro vs. Evero) during follow-up peroid, or graft failure/death. Addition or deletion of steroids is not considered a regimen change.
Rates are calculated for the most common discharge regimens.
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