Table 7.6h
Persistency of Discharge Regimen by Follow-up Period, 2000 to 2004
Recipients with Pancreas After Kidney (PAK) Transplants

	Year of Transplant				
	2000	2001	2002	2003	2004
Discharge Regimen (w/ or w/o Steroid Use)					
CyA+Aza					
At Discharge (N)	-	-	-	1	-
At Discharge (%)	-	-	-	100.0%	-
6 Months PostTx (%)	-	-	-	0.0%	-
1 Year PostTx (%)	-	-	-	0.0%	-
2 Years PostTx (%)	-	-	-	0.0%	-
3 Years PostTx (%)	-	-	-	0.0%	-
CyA+MMF					
At Discharge (N)	30	18	25	19	18
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	50.0%	70.8%	62.5%	68.4%	93.8%
1 Year PostTx (%)	29.1%	51.5%	62.5%	57.9%	76.2%
2 Years PostTx (%)	29.1%	25.8%	62.5%	46.1%	0.0%
3 Years PostTx (%)	21.8%	25.8%	62.5%	-	0.0%
CyA+Siro					
At Discharge (N)	5	4	7	4	7
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	53.3%	75.0%	100.0%	75.0%	71.4%
1 Year PostTx (%)	53.3%	50.0%	100.0%	50.0%	42.9%
2 Years PostTx (%)	53.3%	50.0%	55.6%	50.0%	0.0%
3 Years PostTx (%)	53.3%	50.0%	-	0.0%	0.0%
Siro+MMF					
At Discharge (N)	-	1	1	6	9
At Discharge (%)	-	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	-	0.0%	0.0%	83.3%	75.0%
1 Year PostTx (%)	-	0.0%	0.0%	83.3%	60.0%
2 Years PostTx (%)	-	0.0%	0.0%	83.3%	60.0%
3 Years PostTx (%)	-	0.0%	0.0%	-	-
Tac+Aza					
At Discharge (N)	5	2	1	1	1
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	20.0%	50.0%	0.0%	100.0%	100.0%
1 Year PostTx (%)	0.0%	0.0%	0.0%	0.0%	100.0%
2 Years PostTx (%)	0.0%	0.0%	0.0%	0.0%	-
3 Years PostTx (%)	0.0%	0.0%	0.0%	0.0%	-
Tac+MMF					
At Discharge (N)	186	180	207	209	238
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	78.8%	81.5%	79.4%	74.0%	78.9%

(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 7.6h (Continued)
Persistency of Discharge Regimen by Follow-up Period, 2000 to 2004
Recipients with Pancreas After Kidney (PAK) Transplants

	Year of Transplant				
	2000	2001	2002	2003	2004
Discharge Regimen (w/ or w/o Steroid Use)					
Tac+MMF					
1 Year PostTx (%)	65.2%	74.1%	63.6%	62.9%	69.2%
2 Years PostTx (%)	56.6%	61.1%	56.4%	54.2%	36.5%
3 Years PostTx (%)	47.3%	55.0%	52.1%	54.2%	-
Tac+Siro					
At Discharge (N)	15	47	46	26	33
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%
6 Months PostTx (%)	66.7%	83.0%	71.2%	65.4%	75.2%
1 Year PostTx (%)	60.0%	70.2%	53.4%	49.5%	60.9%
2 Years PostTx (%)	33.3%	63.4%	42.3%	28.3%	-
3 Years PostTx (%)	33.3%	58.9%	42.3%	-	-

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.