A 53-year-old patient submitted to a kidney transplant 5 years ago presented progressive asymptomatic renal transplant dysfunction (Creatinine 1.9 → 2.6mg/dL) and increased arterial resistive index (0.88). A transplant biopsy was performed revealing cellular rejection type IIA and thymoglobulin was initiated. After biopsy the patient presented macroscopic hematuria and Color-Doppler ultrasound revealed an arteriovenous fistula (AVF) in the kidney transplant parenchyma. Embolization was postponed due to fever and E. Faecalis isolation on hemocultures, treated with ampicillin, with clinical and laboratorial improvement. A new biopsy was performed and showed no signs of cellular rejection. Serum antibodies were also negative for alloimmunization. The patient remained clinically stable after 1 year of biopsy and showed progressive improvement of renal function, despite persistence of a high-debit fistula, therefore embolization was not performed and the patient remains in follow up. Core needle biopsy remains an important tool in evaluation of renal transplant dysfunction. AVF is a common complication following biopsy or percutaneous vascular procedures. AVF can be asymptomatic or manifest as hematuria, renal failure or hypertension. On Color–Doppler, AVF appears as a focal high-velocity flow showing aliasing, that communicates with a feeding artery, with accentuated diastolic flow and a draining vein, with an arterialized venous waveform. Most small AVFs resolve spontaneously and only larger and symptomatic AVFs may need transcatheter embolization.
Ethical disclosures / Divulgações Éticas
Conflicts of interest: The authors have no conflicts of interest to declare.
Conflitos de interesse: Os autores declaram não possuir conflitos de interesse.
Financing Support: This work has not received any contribution, grant or scholarship.
Suporte financeiro: O presente trabalho não foi suportado por nenhum subsídio ou bolsa.
Confidentiality of data: The authors declare that they have followed the protocols of their work center on the publication of data from patients.
Confidencialidade dos dados: Os autores declaram ter seguido os protocolos do seu centro de trabalho acerca da publicação dos dados de doentes.
Protection of human and animal subjects: The authors declare that the procedures followed were in accordance with the regulations of the relevant clinical research ethics committee and with those of the Code of Ethics of the World Medical Association (Declaration of Helsinki).

References