



Kidney Transplantation, Ischemia Reperfusion, Organ Quality and Acute Kidney Injury

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Message from the Guest Editor

Kidney transplantation is the best therapy to treat chronic renal failure. However, it has become a victim of its success, as the number of kidney transplantations is far behind the number of patients on the waiting list, leading to drastic changes in donor demography, with a large proportion of organs now issued from marginal donors, much more sensible to the stresses of transplantation, chief among which ischemia-reperfusion injury (IRI). This syndrome is a key therapeutic target to improve organ quality and decrease transplantation-related acute kidney injury (AKI), a serious complication which without an efficient curative approach will shift toward chronic kidney injury.

The healthcare community is thus in need for novel approaches to better manage the transplantation process, from innovative organ preservation approaches, to better donor management, increased understanding of graft quality, and prognostic tools to anticipate complication.

I am pleased to invite all of you to participate to this Special Issue, “Kidney Transplantation, Ischemia Reperfusion, Organ Quality, and Acute Kidney Injury”, by presenting your most recent research or ideas on these issues.





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Message from the Editor-in-Chief

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