

*To the Editor:*

We read with great interest the results of Dr Davison's survey of pregnancy outcomes in dialysis and transplantation patients (February 1991, pp 127-132). Information regarding the safety of pregnancy for both the transplanted organ and the baby are of paramount importance in pre-pregnancy counseling, and longer follow-up data may be helpful for the management of these patients. We applaud the efforts of Dr Davison and we agree with him that "more work is needed to improve pre-pregnancy assessment criteria, to understand the mechanisms of gestational renal dysfunction and proteinuria, to assess the side effects and implications of immunosuppression in pregnancy, and to elucidate the remote effects of pregnancy on both renal prognosis and the offspring."

In January of this year we established a national registry of pregnancy outcome in transplant recipients. At present this is a national (US) database, although it could expand internationally. In the current initial phase of the project, we are seeking the cooperation of transplant physicians and coordinators to enlist all of their patients who have become preg-

nant (or fathered a pregnancy) to complete a brief questionnaire and to consent to release of records regarding pregnancy outcome.

Inquiries concerning participation in this national database may be directed to (215) 955-2840. Although we may not answer all of Dr Davison's questions, we believe with time and cooperation we can create an invaluable resource from which to provide more comprehensive and reliable information to physicians treating these patients.

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