**Summary**

**Objective**

To assess systemic embolism risk factors in kidney transplant recipients, who manifested atrial fibrillation inlong-term post-operative period.

**Materials and methods**

A prospective cohort study of 175 kidney transplant recipients was carried out in the Republican Scientific andPractical Center of Organ and Tissue Transplantation of the healthcare institution «9 thmunicipal clinical hospital». The risk stratification of ischemic stroke and systemic embolism development was performed using theCHA2DS2VAScscore.

**Results**

It was found out that the occurrence of risk factors of thromboembolic complications was high in kidney transplantrecipients who had atrial fibrillation in long-term post-operative period; it required indirect anticoagulants prescription in addition to a combined immunosuppressive therapy in 62% of cases.

**Conclusion**

Warfarin prescription in this category of patients was not accompanied with increased frequency of severe hemorrhagic complications in comparison with general population during 3 years of observation.

**Key words**

Organ transplant recipients, systemic embolism, atrial fibrillation, anticoagulant therapy.