



Reflections on a kidney transplant

Many patients suffering from chronic kidney disease (CKD) may sooner or later have to think about a kidney transplant as one of several treatment options. Contrary to popular assumption, receiving a new kidney is not a cure for kidney disease, but a treatment. In order to decide what is best for you, though, you will want to give it time and thought. Comprehensive information on this complex subject is key.

A kidney transplant is a surgical procedure to transfer a healthy kidney from a living or deceased donor to a person with chronic kidney disease. Many patients with chronic kidney disease are suitable candidates for transplantation, but not everyone is. So if you would like to look into transplantation as a treatment option, to discuss your personal situation with your nephrologist should be on top of your list. He or she will base a recommendation for you on a number of

aspects of your overall health and kidney condition.

If your nephrologist comes to a positive conclusion, you will need to go through a number of examinations and tests. On the basis of these results your doctor can place you on the national transplant list. It will now be a matter of time to find a compatible kidney from a deceased individual, or find a compatible live donor.







Preparing for a kidney transplant

For successful transplant, the recipient and the donor must be compatible with each other. To determine whether a kidney is suitable for you, several tests must be completed surrounding blood and tissue typing. A crossmatch of your and the donor's blood is performed, too. Other factors to be considered may be the matching of the age, organ size and the infection status.

For a kidney transplant, different types of donations are possible. If you are on the transplant list, you need to wait for a deceased donor. Waiting times vary from months to several years according to the country/region and availability of donors, compatibility with the donor, time on dialysis etc. The specific time can't be planned, as donor availability is the major factor.

Living donations can be arranged in advance, which is ideal for the patient, the donor and

the medical staff. The donor may be a family member or a friend with a high compatibility. This is essential for a successful transplantation. The higher the compatibility, the lower the risk of the recipient's body rejecting the donor kidney.

Deciding to donate a kidney requires careful thought and consideration. The donor should be aware of the risks associated with the operation to remove the healthy kidney and to know that monitoring is required post-operation to ensure that the remaining kidney is adequately filtering out the body's wastes.



While living donations can be planned, you should expect a call from the transplant team at any time, if you are on a waiting list. You will be given clear information on what to do. You should for example make sure the transplant team always has the latest information on how to reach you.



It is also indispensable to have a hospital bag packed beforehand with all necessary items. The most important prerequisite will be to always be prepared.

Getting a new kidney

During a kidney transplant, the new organ is placed in your lower abdomen, usually leaving your kidneys in place. Only in the case of a medical indication will the native kidneys be removed. The arteries and veins are then attached to the blood vessels in the lower abdomen and the ureter is connected to the bladder, or in some centres, to the native ureter.

The success rates for kidney transplants are very good and have improved in recent years. A donor kidney lasts an average of 10-15 years, as the function of a foreign kidney slowly decreases over time. Yet, there is always the option of going back on dialysis. Or you may opt for a second donor kidney, provided that you meet the required medical criteria. The process will then start all over again as described above.

After your transplant

New kidneys start making urine immediately, sometimes while you are still in the operating theatre, although this may also be delayed for several days. In any case, you will face frequent checkups during the first few weeks, including blood tests and regular drug adjustments. Anti-rejection medication has to be taken according to the physicians prescribed therapy. Immunosuppressants may increase the risk of some infections, which is why you are well-advised to discuss possible vaccinations and other precautions with your transplant physician.

A new organ always takes some getting used to. Actively collect information about your realistic recovery time after your operation, as this will help you to have realistic goals and expectations. Support groups can also help you to cope with common problems. You may also keep in touch with other transplant patients so as to exchange experiences. It is always a good idea to ask what kind of social support is on offer in your region and to try to get as much information about your transplant as possible.



Get also inspired by the experiences of Krystyna Murdzek, co-founder and President of the Polish Association for Sport after Transplant. She is currently waiting for her second donor kidney and shares her inspiring story with us. (See p. 20-23)

Whatever your questions or thoughts on kidney transplant are, know that you have the full support of your NephroCare team! We not only want to provide the best quality dialysis care, we also offer you assistance and advice related to transplantation.