Kidney Transplantation

Kidney failure causes waste products and fluid to eventually build to dangerous levels in the body – different treatments help to remove these and to reduce symptoms of kidney failure.

What is kidney transplantation?

A kidney transplant is an operation to transfer a kidney from one person (donor) to another person whose kidneys are failing (recipient).

A kidney can be donated by a living donor or a deceased donor. On average, a kidney transplant from a living donor lasts for 20-25 years, while a kidney from a deceased donor lasts 15-20 years. Some patients with type 1 diabetes may be suitable for a pancreas transplant too.

Health benefits and survival

- Better long-term health compared to receiving dialysis.
- Longer life for most people who are well enough to have a transplant.
- Improved energy levels and improved fertility.

Quality of life benefits

- Improved quality of life compared to receiving dialysis.
- Freedom from dialysis and freedom from dietary and fluid restrictions.
- Ability to work full-time and to travel more freely including foreign holidays.

Am I suitable for transplantation?

- You will be considered suitable if the benefits of a transplant outweigh the risks to your health.
- Age in itself is not a barrier to transplantation.

- You must be well enough to withstand the effects of a major operation.
- The transplant should have a relatively good chance of success.
- You must be willing to take the recommended regular medications after a transplant and come to regular transplant clinic appointments.
- · You must be free from infection and cancer.
- You may have to lose weight if you are overweight and quitting smoking is strongly recommended.

Are there any risks associated with kidney transplantation?

Most people who have a kidney transplant do very well and the risks are generally lower than staying on dialysis. However, not everyone feels better after a transplant. Some of the risks and complications include:

- A few days' delay in the transplant kidney working.
- Bleeding; blood clots in the kidney blood vessels.
- Lowered immune system from medications given to prevent rejection of the kidney.
- Infections.
- Rejection of the transplant kidney leading to lowering of its function.
- Sometimes the disease that affected your own kidneys can return in the transplant kidney.

What happens next if I am interested in transplantation?

- Your kidney doctor will arrange tests to assess your health (chest X-ray, ECG – tracing of your heart rhythm, Echocardiogram – scan of your heart).
- You may also require other tests. For example, detailed heart (cardiac) tests, scans etc.
- Once these tests are done (usually takes 4-6 months) and your kidney doctor thinks that you may be suitable for a transplant, they will refer you to be seen by a transplant surgeon at the University Hospital of Wales in Cardiff.
- A transplant surgeon will assess you in clinic to see if transplantation is a good option for you.
- If you are considered suitable to receive a transplant, a transplant recipient nurse will then see you to give you more detailed information.
- If you have a family member or a friend who is a suitable living donor, the transplant operation will be scheduled in advance. Otherwise, you will be placed on the transplant waiting list to wait for a suitable kidney from a deceased donor.
- The living donor team will support you and your relative or friend in the living donor transplant process.

Comments	

Important Telephone Numbers

Chronic Kidney Disease Team: 029 218 45854 (Mon to Fri 8-4pm)

Chronic Kidney Disease CNS





