

RENAL TRANSPLANTATION

Basics

When our two kidneys start to fail our body accumulates toxic products. In such scenario renal transplantation is the treatment of choice. Other options are hemodialysis and peritoneal dialysis .

How many kidneys are transplanted ?

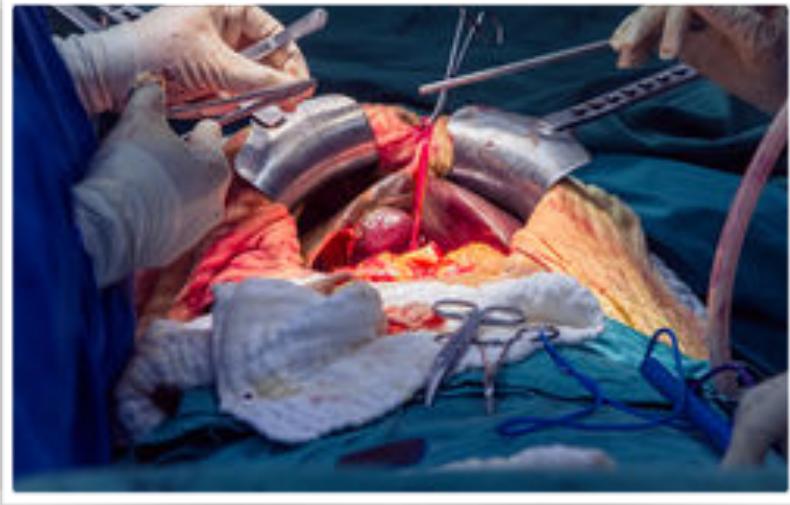
We can survive even with one functioning kidney. Hence only one kidney is transplanted into the abdomen.

What happens to my original kidneys ?

They are left alone in most of the scenarios.

What is the risk to donor ? (the person who donates the kidney)

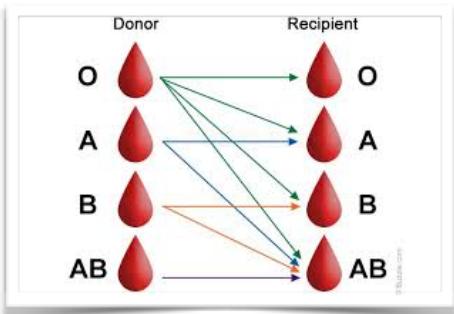
They are thoroughly screened to assess their fitness for donation (We look at their kidney sizes, relative function of each kidney, stone disease, diabetes, hypertension etc...). Only then the surgery is contemplated. Most often they have a normal life with a normal creatinine.



Basics of transplantation

This is the best form of renal replacement therapy. It will make your life better and enjoyable. Transplant is done when your doctor decides that your kidneys are damaged irreversibly and you are in ESRD (End stage renal disease). The new kidney is placed anteriorly in the abdomen and you have to take anti rejection medications through out your life. Once it is successful you will no longer require dialysis.



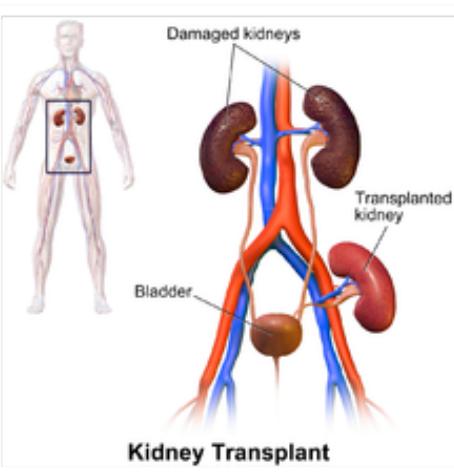


Who cannot be a donor?

Those with Diabetes, severe hypertension, cannot donate kidney, since they stand to develop kidney failure if they do so.

Others who cannot donate are

- With multiple kidney stones
- With single kidney/other congenital anomalies.
- Viral infections like HIV etc..



FAQ'S

Who can give me a kidney?

Concepts of blood transfusion do apply here also. O group is an universal donor and AB group is universal recipient.

Usually same blood group is preferred. In regard to who can give, in India unrelated renal transplants are illegal (One cannot buy a kidney from poor innocent and unrelated people, under the HOTA act.). Hence the donor should be from close family and blood related.

I do not have a blood group matched donor in my family.

In such scenarios you have two options regarding renal transplantation. First is to register under the cadaver/deceased donor program. Here you will be put on a wait list to receive kidneys from donors who are brain dead after an accident etc.

The present wait list is considerably long.

The second option is an across blood group renal transplantation (which is widely prevalent in Japan). Here additional therapy is required before the kidney is transplanted. This will incur a significant cost and risk but long term outcomes are similar to matched kidney transplants.

How long will I need to take medications after the transplant?

The medication you are required to take after transplant to prevent rejection are called immunosuppressive medications. Usually triple immunosuppression is used (Tacrolimus , MMF and prednisolone). They have to be continued life long, but usually doses are reduce by 6 months post transplant to the lowest possible dose by your nephrologist.

What will happen if I stop taking these or I miss some doses?

There will be a significant chance that the body will reject the kidney. Adherence to medications is an absolute requirement.

Where is the new kidney placed?

Your original kidneys are not touched. New kidney is placed anteriorly in the abdomen on the right or left side.

Can I lead a normal life post renal transplant?

Yes, you can carry out your normal activities, go on to finish your studies, do a job, set career goals, travel, do exercise, take a swim etc. Your diet restrictions, on which you were on during dialysis, can be completely removed and you can have a normal balanced diet.

