

Becoming a kidney donor



This booklet should give you the information you need to be fully informed of the whole process, and answer any of the questions you may have.



Frequently asked questions

Why does my loved one need a new kidney?

The kidneys perform many vital functions in the body, and without these we would die. When a person loses more than 90% of their kidney function due to disease they are considered to have end stage renal failure and need life saving treatment to survive. Treatment choices are dialysis, where the work of the kidneys is taken over by a machine outside the body, and transplantation, where a healthy kidney is surgically placed in the recipient (person receiving the kidney) to take over the function of the diseased kidneys. Dialysis can keep a person alive for a number of years, but it is no life. The person needs to be hooked up to a machine, either at hospital or at home, for a number of hours a day, many days a week. 'Normal' life becomes no longer normal.

Who can be a donor?

Anyone over the age of 18 years can be a donor. The donor needs to have the same blood and tissue type as the person needing the kidney. This is confirmed by taking a blood test from the recipient and potential donor. Close relatives such as siblings and parents are usually the best match.

Are there any risks?

You should not notice any difference to your overall health with having only one kidney. In fact, many people are born with only one kidney and suffer no health problems. Your life span will not be affected, and you should not need to make any changes to your lifestyle. Your fertility will not be affected.

Your doctor will talk to you about the risks of the operation.

What happens next?

Once it has been confirmed that you and the recipient are a suitable match you will need to undergo a series of tests, investigations and assessments. These include physical tests such as blood pressure checks, blood and urine tests, and a variety of scans and x-rays to check your kidney, heart and lung function. These will diagnose any underlying conditions which may prevent you from donating your kidney, as well as confirming that you and your kidney are fully healthy.

Some of the scans help with planning the surgery and allow the surgeons to decide which the best kidney to remove is.

Both you and the person receiving your kidney will undergo full psychological assessments. You will meet with the doctors to discuss the process and ensure you both fully understand the implications involved.

Coming into hospital

Preparing for surgery

If you are a smoker you should give up a month before the surgery. If you take any medications containing aspirin these should be stopped three days before. Women taking birth control pills should stop them a month before.

You will also be given instructions on how to prepare for the surgery, such as when you will be admitted, what personal belongings to bring with you and when you will last be able to eat and drink before your surgery.

Before the operation

The doctor and anaesthetist will see you to answer any remaining questions you may have and ask you to sign the consent form.

During the operation

You will need to have a bath and dress in a gown before being taken down to theatre. The anaesthetist will give you drugs to send you to sleep via a cannula (needle) which is usually placed in the back of your hand. The surgery is done by making 3 or 4 small incisions in the abdomen for surgical instruments and a small camera which is used as a guide. A three to four inch incision is made in the lower abdomen to remove the kidney. It should take around two and a half hours to remove the kidney. The recipient will be brought into an adjacent theatre as your surgery is being completed to have their new kidney inserted. Their operation should take a similar length of time.

After the operation

You will wake up in the recovery room and your nurse will come and collect you to take you back to the ward. You will have a large dressing on your abdomen where your kidney was removed and a number of smaller dressings over the incisions for the instruments. You will also have:

- a wound drain to collect any build up of fluid around the site of the operation

- IV fluids administered via your cannula to prevent dehydration

- a urine catheter to monitor the function of your remaining kidney

You will also be attached to machines to closely monitor your heart rate, blood pressure and breathing.

Pain

It is normal to feel some pain following surgery. You will have been given strong pain killers during your operation but it is important that you tell your nurse if you have any pain. You can do this by scoring your pain on a scale of 1 to 10, with 1 being no pain at all and 10 the worst pain imaginable. This will allow your nurse to give you the appropriate pain relief.

The days after the operation

You should be able to eat and drink normally the day after your operation, although you should start by taking sips of fluid so you are not sick. The following day you will be encouraged to sit out of bed. Your IV fluids, urine catheter and wound drain will gradually be removed and this will make it easier for you to get up and walk around. If the person receiving your kidney is not in the same room or ward as you, you will be able to go and visit them. This may be all the motivation you need to get out of bed as soon as you can!

Most donors are well enough to go home a few days later.

Going home

Medication

You will be discharge home with pain killers which you will need to take regularly. You may also be prescribed antibiotics to take for a short time. You will not need to take any long term medication as a result of kidney donation.

Your wound

Your wound may remain sensitive for some time after the operation. Try to wear loose fitting clothing which will not restrict the area. The wound will be checked before you leave the hospital and if it is clean and dry you will not require any further checks or dressings once you are at home.

Follow up

You will be seen by the transplant team between 2 and 6 weeks after donation, where your blood pressure will be checked and kidney function tested with blood and urine tests. It is recommended that you have annual checks after this.

Recovery period

You may feel tired the first few weeks you are at home. Take plenty of rest when you need to but you should also try to remain as active as possible as this will aid recovery. You should avoid lifting anything heavy for the first few weeks, and avoid contact sports which may injure your remaining kidney. You should be able to return to work after a couple of weeks when you feel well enough.

People live completely normal unrestricted lives with only one kidney, and you should expect to be back to your usual routine within three months.