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Getting A New Kidney

Facts About Kidney Transplants



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Getting a New Kidney

Facts About Kidney Transplants

When you have a kidney transplant, there is much to do before and after the operation. Before the operation, you will work with the transplant team to complete an evaluation. After the operation, you will need to see your transplant team to make sure your kidney keeps working well and you stay in good health. How long a new kidney lasts depends on many factors. Some of these factors you can control. Some you cannot control.

You and the transplant team will work together to keep you and your kidney healthy.

What is Kidney Failure and What Causes it?

Kidney failure happens when your kidneys are not working the way they should. Many different diseases can harm your kidneys and cause poor function. Some of these diseases can cause harm in just a few days or weeks. Other diseases can take years to cause harm. If your kidneys fail, both usually fail at the same time.

What are Signs of Kidney Failure?

When you start to have kidney problems, you may feel fine at first. As your kidneys get worse, however, you may begin to:

- tire easily
- have trouble sleeping
- feel itchy
- feel sick to your stomach
- be short of breath

How is Kidney Failure Treated?

When your kidneys fail, you will need to have one or both of the following treatments:

Dialysis. Dialysis (dy-al-i-sis) is a technique that removes waste products, because your kidney can no longer do it. With dialysis, either a machine or a flexible tube, called a catheter, does the work that your kidney used to do. There are two forms of dialysis: hemodialysis and peritoneal dialysis. Using a machine is called hemodialysis (hee-mo-dy-al-i-sis). Using a tube (catheter) is called peritoneal dialysis (pare-i-to-nee-al dy-al-i-sis).

Kidney Transplant. A kidney transplant is when a new kidney is put into the lower part of the abdomen in front of the hip bone.

Together, you and your doctors will decide which treatment is best for you. It depends on your medical history, health status, and personal situation. Some patients have a

kidney transplant after starting dialysis. Others get a kidney transplant without ever having dialysis.

What Happens When You Get a Kidney Transplant?

There are four steps to getting a kidney transplant. Your transplant team will:

1. Decide if you are healthy enough to receive a new kidney.
2. Prepare you for your operation. This can take a long time, and there is no guarantee a kidney will be found.
3. Perform a kidney transplant operation.
4. Help you stay healthy after the operation.

Step 1. Find Out if You are Healthy Enough to Receive a New Kidney

Before you can have a kidney transplant, a team of health care professionals will talk with you about what may happen if you get a new kidney. This can depend on your physical health, your mental health, and how easy it will be for you to get the transplant medicines you will need.

There are four parts to this phase.

First, you will visit a transplant center.

You, your doctor, a nurse, or a social worker can schedule this visit. Your doctor's office will send your medical records to the transplant center before your appointment. Your records should show that you are taking your medicine properly and are on a restricted diet. Your records will also confirm that you have no medical conditions that can keep you from receiving a transplant.

During this visit, your physical health will be evaluated.

The transplant team will do a complete evaluation of your physical health. You may need to have tests to evaluate your:

- heart and lungs
- non-functioning kidneys and gallbladder
- intestines
- bladder
- teeth and gums
- prostate, if you are a man
- breasts and cervix, if you are a woman

The transplant team may order other tests as well.

Then your mental health will be evaluated.

You may need to see a social worker or psychologist to make sure you are not addicted to alcohol or drugs. It is also important to make sure you have no emotional problems that can interfere with your health.

Finally, you will see an insurance specialist.

An insurance specialist will review your insurance to make sure your policy covers the medicines you will need after your transplant.

If the transplant team decides you are a good candidate for the operation, they will work with you to find a new kidney.

Step 2. Prepare You for Your Operation

This step involves finding a kidney for you. Sometimes this can take a long time. How long it takes depends on the type of kidney transplant.

There are two main types of kidney transplants: the living donor transplant and the deceased donor transplant.

Living Donor Transplant

This is when a kidney is donated by a living person.

Some quick facts:

- Living related or living unrelated kidney donation are the best options. They offer the best quality kidney in the shortest possible time.
- The living donor must have a complete evaluation to make sure their health will not be harmed by removing the kidney. This evaluation process is different for each transplant center.
- When a person donates a kidney, it does not put them at risk for future health problems.
- Even though someone wants to donate a kidney, they may not be able to because of health, emotional, or social reasons.

Deceased Donor Transplant

Getting a kidney from a living donor is not always possible. In this case, your name would be placed on the national waiting list for a deceased donor kidney. This is a kidney that is taken from a person who has just died or has suffered brain death. The family donates that person's kidney.

Kidneys from a deceased donor are a precious national resource. A nationwide system for donating kidneys balances two things: the needs of patients who have waited a long time for a kidney, and the goal of transplanting a kidney that is well matched with the patient.

In general, the wait for a deceased donor kidney is longer than the wait for a living donor kidney. Either way, there is no guarantee you will receive a kidney.

You might get the kidney not only from a standard donor but also an ECD (expanded-criteria donor) or DCD (donation after cardiac death) donor.

Step 3. Perform a Kidney Transplant Operation

During surgery, the transplanted kidney is put in a different place than your diseased kidney. The new kidney will be put in the right or left side of the lower abdomen just above the front of your hip bone. The operation will take three to five hours. Afterwards, you will be taken to a recovery room. You will stay in the hospital until your doctor feels you are ready to go home. How long you stay will depend on your health and how well the new kidney is working. It will also depend on your ability to take care of your new kidney.

The Medicines

After your operation, you will take strong medicines to keep your body from rejecting the new kidney. Your immune system protects you from foreign invaders, and your body will think the new kidney is a foreign invader. So your system will try to reject your new kidney. This can damage it. Because of this, you will take immunosuppressants (im-u-no-su-pres-ants), also called anti-rejection medicines. These drugs suppress the immune system enough to keep your transplant kidney healthy.

You will get an organ that is a good match for your body, but it will not be a perfect match because it is not your own kidney. This is OK. It is why you take immunosuppressive drugs. Your body will remember that the kidney once belonged to someone else, so you will need to take these drugs for as long as you have the transplant.

For more information on transplant medications, please visit:

<http://www.myast.org/content/patient-information>.

Step 4. Help You Stay Healthy After the Operation

It is very important that you keep yourself healthy after your transplant. Here are a few important reminders:

- After you leave the hospital, make sure you go to the transplant center often. Also be sure you go to all your doctor appointments. **This is very important!** This may remind you of what it was like going to the dialysis unit, but you will only have to do this for a few months.
- Take your medicines properly. **This is extremely important!**

- Be sure to tell the staff at the transplant center if you have problems keeping your appointments or taking your medicines.

Your Appointments

If your body begins to reject your new kidney, you may not know it. Some patients may have the signs, but most do not recognize them. If your body is rejecting the new kidney, your doctors and nurses will know it. **This is why it is so important to go to all your medical appointments.** Your health care providers watch closely for signs of rejection and side effects from the medications. But, they must examine you and test your blood to know for sure.

Your doctor and transplant staff will watch for these signs:

1. Rejection

The risk of rejection never goes away. You will always need anti-rejection drugs. Your doctor may lower the dosage, but you should never skip or stop taking the drugs.

2. Infections

Immunosuppressant drugs can increase the chance of getting infections. These infections can be treated. However, you need to tell your doctor if you have a fever, unusual pain, or any other new feelings. The risk of infection will go down when your doctor lowers the dosage.

3. High blood pressure

High blood pressure is a common problem after transplant. It can damage your new kidney and cause strokes and heart attacks. If you have high blood pressure, your doctor will put you on medication.

4. Diabetes Mellitus

Anti-rejection medications can cause diabetes. If you had diabetes before your transplant, you may find it harder to control your blood sugar level after your transplant.

5. High cholesterol

Your anti-rejection medication can also cause high cholesterol.

6. Kidney disease

Some forms of kidney disease can come back in the transplanted kidney. Your doctor and transplant staff will monitor your blood and urine for signs of this problem.

7. Cancer

Patients with kidney failure are at higher risk for certain types of cancer. Anti-rejection drugs can raise the risk of getting cancer.

8. Bone disease

Transplant patients taking steroids are at risk for osteoporosis (os-tee-o-por-osis), which is a condition that causes your bones to thin. Your doctor may order a bone density test and put you on medication to help prevent this condition. Transplant patients on steroids may also get osteonecrosis (os-tee-o-nek-ro-sis), which causes pain in the hips or other joints.

9. Pregnancy

A woman should not plan to get pregnant for at least one year after her transplant, so it is important that she talk to her doctor about birth control. Some transplant medications can harm an unborn baby. If you want to get pregnant, you and your transplant doctor should talk about it before your transplant. This is because there are things you should consider about pregnancy when you have a transplant. To make sure you, your new kidney, and your baby all do well during and after your pregnancy, it is very important to plan ahead with your doctor and transplant team.