



Living Kidney Donation Fact Sheet

This brochure has information about donating a kidney to a family member or friend. In addition, to this information, you should talk with family members and the doctors and nurses you will see in the Transplant Center.

WHEN IS IT TIME TO THINK ABOUT THE CHOICE OF DONATION?

- Usually someone must lose 90% or more of their kidney function before they need to have replacement therapy.
- Kidney replacement therapy is dialysis or a kidney transplant.
- Kidney failure can happen suddenly or slowly over many years.
- The patient and their doctor will discuss the best options for them – dialysis alone, dialysis and wait for a transplant, or a transplant before dialysis is needed.

WHO CAN BE A LIVING DONOR AT DUKE?

- Living kidney donors must be over 21 years old. Donors may be as old as 60 or early 70's, depending on their health.
- Commonly, donors are living-related or blood relatives (usually parents, children, brothers or sisters of the person needing a transplant). Other family members considered for donation includes grandparents, cousins, aunts or uncles.
- A husband, wife, in-law or long-time friend may be considered as a donor. They are less likely to be as close a genetic match as a blood relative. However, with the current medicines a close match is not necessary.
- Donors must have a compatible blood type, which is checked by a blood test.
- Often blood relatives will genetically match the recipient to some extent. This increases the chances that the kidney will work for a long time after the transplant. Checking for this type of genetic matching is part of the blood testing done at the transplant center.

HOW WILL I KNOW IF I CAN BE A DONOR?

- First, you must decide if you want to donate one of your kidneys.
- Blood typing is done to see if you are a match. Then we talk with you in more detail about being a donor.
- Several of the tests, done in the clinic, take two separate days to finish. They are done to make sure you are healthy and that it is safe for you to donate a kidney.
- The tests on day one includes: having blood samples drawn, X-rays, electrocardiogram (EKG), and urine specimens. You will also see a psychologist or a social worker.
- You will see one of the nephrologists (a kidney specialist). They will do a physical exam and talk with you about your medical history and kidney donation.
- If all these tests and evaluations show it is safe for you to continue, you will come back for another visit. You will then see one of the surgeons who will do the donor surgery, you will then have a computerized tomography (CT) or computerized axial tomography (CAT) scans.
- The CT scan is a special kind of x-ray to look at the blood vessels to the kidneys and the ureters (the tubes from the kidneys to the bladder). For the test, an intravenous catheter (IV) is put in your arm and contrast (dye) is injected through it to see things better. This test takes about an hour to do.



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- If everything is okay after these tests then the transplant can be set up.
- Sometimes, additional tests may need to be set up.

WHAT ARE MY RISKS IF I DONATE A KIDNEY?

- With any surgery there are risks of bleeding or infections. There is also risk that goes with being put to sleep.
- For healthy people, the surgery has no greater risk than other elective surgery.
- A lot of tests are done on possible donors to make sure that they are healthy, and that it is safe for them to donate a kidney. We want to make sure that donating a kidney will not cause harm in the future.
- We cannot predict health problems that might happen in the future because of an accident or illness. It is also possible that health problems may be found that you did not know about. These could affect your future health.

HOW IS THIS SURGERY DONE?

- You will meet with the surgeon who will talk with you about how the surgery will be done.
- The surgery is a laparoscopic procedure.
- During the surgery five small incisions (about 1/2 inch each) are made. One is near your navel (belly button), one just below your breastbone, and three on the side just below the bottom rib.
- Instruments and video cameras are put through the incisions to free up the kidney. One of the incisions is then enlarged to about 2 inches to bring the kidney out.
- Even though the incisions are smaller, you may still have pain.
- You may experience abdominal bloating (a feeling of fullness).
- Rarely is the surgery done with an open incision. But if it is, the hospital stay is longer and you would likely be out of work at least 6 to 8 weeks. This happens about 2 times in every 100 patients done.

HOW LONG WILL I BE IN THE HOSPITAL AND OUT OF WORK?

- The hospital stay starts the morning of the surgery. Most people go home 1 to 2 days after the laparoscopic surgery. People tend to be very bloated and uncomfortable for the first 3 to 5 days. Also, there is pain from the incisions.
- Some people can go back to work as early as 2 to 3 weeks after the laparoscopic surgery. How quickly you go back to work also depends on your job. If your job is very physical, you may need longer, as much as 4 to 6 weeks. If your job is deskwork, you may feel like going to work much sooner.
- You will need to come back for a clinic visit to see the surgeon - 1 to 2 weeks after surgery.

HOW MUCH WILL DONATION COST ME?

- The tests, the surgery, the hospital stay, and your return visit will not cost you directly. They are charged to the recipient's insurance or Medicare.
- The recipient's insurance or Medicare may not cover your time away from work, travel, meals, parking or hotels. You will need to pay for these expenses.
- Also you will need to pay for your discharge medicines – pain medicine and stool



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softeners. The cost is usually less than \$50.00. If you have prescription coverage they may cost less.

HOW WILL DONATING A KIDNEY AFFECT MY LIFESTYLE?

- Your remaining healthy kidney can remove the wastes and excess fluid to keep your body healthy.
- After your recovery from surgery you can work, drive, and do most activities as usual.
- Donating a kidney does not interfere with a woman's ability to have children. It is recommended that women do not get pregnant for at least one year after donation.
- Donation does not change your life expectancy or increase your chances of getting kidney failure.
- Donating a kidney should not affect your ability to continue your job or start a new job, with a few exceptions:
 - The military services and some police or fire departments may not accept people who have only one kidney.
 - Before donating there are usually special approval processes that active duty military people will need to go through.
- Insurance companies have different policies about providing health or life insurance to people with only one kidney. Usually it should not keep you from getting or continuing coverage. The transplant social worker can help you find out about your insurance coverage.
- We are part of a registry that collects data about donors after donation surgery. You will receive information about this at the time of surgery. This helps us understand better how donors do after kidney donation.

ARE THERE BENEFITS TO ME AS A DONOR?

- Many people feel donating a kidney to a family member or friend is rewarding and satisfying.
- It is normal to have some concerns over donating a kidney. Talking over your feelings and concerns with your family members and the medical staff can ease some concerns and worries. You may find it helpful to talk with someone who has donated a kidney to a family member. Ask the transplant nurse if that is possible.

WHAT IF I DECIDE NOT TO DONATE MY KIDNEY

- Deciding to donate your kidney is a voluntary decision for you. You must decide if donating a kidney is right for you. You need to think about the facts, risks, and benefits.
- Also the person with kidney failure has a right to decide that they do not want a transplant or they do not want to ask you to donate a kidney.

Interested in being a donor?

Please call the Kidney Transplant Office (919) 684-5859

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