

KIDNEY TRANSPLANTATION & LIVING DONATION



OVERVIEW OF PRESENTATION

Welcome & Introductions

Kidney Transplant Recipient Program

- Who is eligible? What are the transplant options?
- What is the process?
- Kidney Recipient's Experience

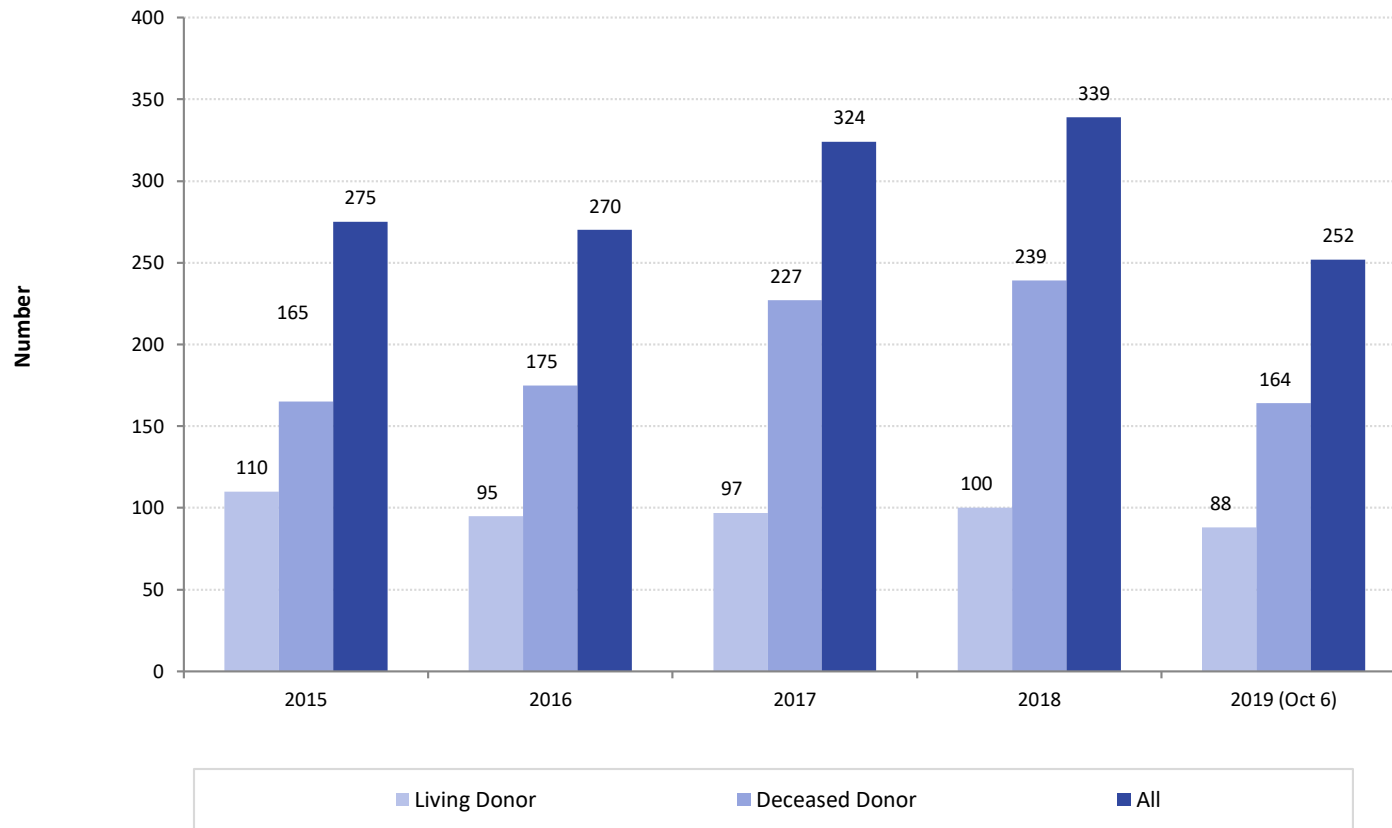
Living Kidney Donor Program

- How can someone donate?
- What is the donor assessment like?
- Living Kidney Donor's Experience

BC KIDNEY TRANSPLANT STATS

WWW.TRANSPLANT.BC.CA

Number of Kidney Transplants in BC by Donor Type



KIDNEY TRANSPLANTATION....

Is it the right treatment for me? Do the benefits outweigh the risks?

Benefits of transplant

- Feel better / have more energy
- Freedom from dialysis
- Greater independence / free to travel
- Increased life expectancy
- Regular diet

Risks of transplant

- Surgical Procedure
 - Eg: bleeding, infection, anesthesia
- Medications weaken your immune system
 - More prone to infections
 - More prone to some cancers

REFERRAL PROCESS

- Referred by primary nephrologist
 - Preferably when GFR is 20-25
- Primary Nephrologist and GP continue to act as primary caregivers
- Referral does not mean you are on the waitlist for a transplant. You must be assessed first

ASSESSMENT PROCESS

Initial workup and preliminary education is completed by referring center

Testing may include:

- **Bloodwork**
- **Heart diagnostics**
- **Chest x-ray**
- **Dental check up**
- **Baseline cancer screening (FIT/colonoscopy, Pap smear/ mammogram for females, prostate exam for males)**
- **Infectious disease screening and vaccinations**

ASSESSMENT PROCESS- CLINIC VISIT

When basic tests are completed, a patient can be booked for transplant clinic.

A clinic visit includes appointments with...

- The transplant physician
- The transplant surgeon
- Social Worker
- Nurse
- Additional staff as deemed necessary

ASSESSMENT PROCESS - CLINIC VISIT

Your waiting time for a clinic appointment will depend on...

- **Whether you have a potential live donor**
- **Blood type and the anticipated waiting time for your blood group**

THE APPROVAL PROCESS

- All investigations are reviewed by the entire team, you will be...
 - Approved
 - Declined
 - Asked to complete further testing
- Length of Process depends on medical conditions, tests required and availability of appointments
- Time to transplant will depend on donor options and blood type

APPROVED FOR TRANSPLANT. NOW WHAT?

Pre-Dialysis

- Live donor transplant when GFR <15
- Deceased donor waiting list when started on dialysis

On Dialysis

- Deceased donor waitlist
- Live donor transplant

WHY LIVING DONATION?

Benefits for Recipient:

- Kidney lasts longer with living donation
- Avoid the waiting list
- Potential for pre-dialysis transplant
- More opportunity to plan ahead for transplant
- Greater control over personal/professional life

DECEASED DONOR WAITLIST

Wait time for deceased donor transplant is affected by:

- Blood type

A	1-2 years
O	2-3 years
B	4-5 years
AB	1-2 years
- Dialysis start date
- Changes to a recipient's health status
 - Temporarily placed on hold for new medical issues or travel
- Level of sensitization if any

ARE YOU SENSITIZED

- A donor's blood type must be suitable for you
- Blood testing predicts whether a particular donor's kidney can be safely transplanted. This is checked before a living donor or deceased donor transplant is confirmed.
- You may be harder to match (more sensitized) because of a past:
 - Blood transfusion
 - Pregnancy
 - Transplant
 - Serious infection

WHAT IS YOUR ROLE/RESPONSIBILITY?

Manage lifestyle factors:

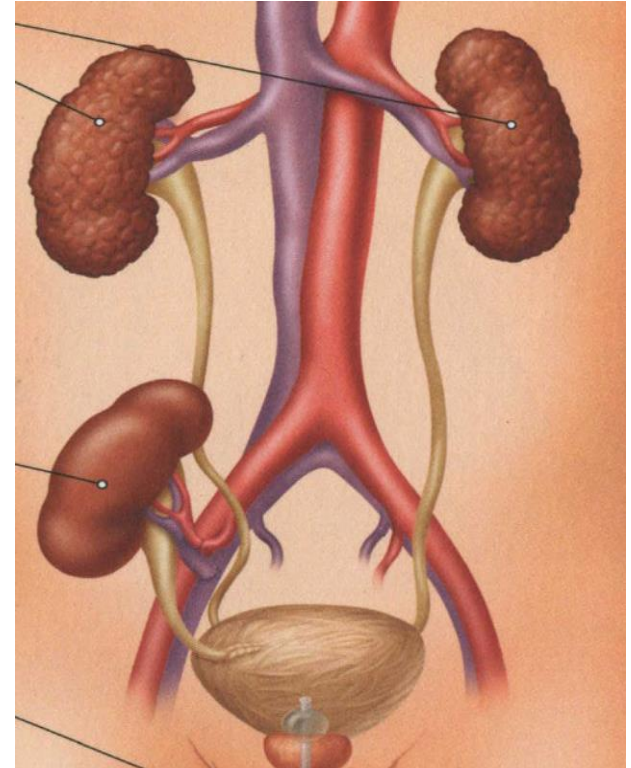
- Optimize your health so you are ready for transplant
- Maintain healthy, active lifestyle
 - Healthy weight
 - Optimal diabetic control
 - Smoking cessation

Once referred, keep transplant center informed of:

- New medical concerns
- Seeing a new Health Care Provider / Specialist
- Admission to hospital
- Change of address and contact numbers

RECIPIENT TRANSPLANT SURGERY

- Surgery takes about 3 hours
- Original kidneys left in place
- Transplanted kidney placed low in abdomen near bladder



WHAT TO EXPECT POST TRANSPLANT

- In hospital for 5-7 days
- Assessed frequently and anti-rejection drugs started
- Recipient stays in Vancouver for up to 3 months post-transplant
- Once stable: transferred to a Post-Transplant clinic closer to home

Note: Home Team and Transplant Team social workers will assist with planning for transplant

GRAFT FAILURE / REJECTION

Acute rejection

- When immune system attacks the kidney
- Occurs in 10-15% of patients in the 1st year
- Responds well to treatment
- Does not mean you will lose your kidney

Chronic Rejection

- Slow, progressive decrease in graft function
- Reasons are less understood

(average lifespan of a kidney transplant is 16 years)

TRANSPLANT RECIPIENT EXPERIENCE

QUESTIONS AND ANSWERS FOR RECIPIENT TEAM

LIVING KIDNEY DONOR PROGRAM

LIVING DONOR PROGRAM

- Provides education and testing for donors
- Commits to safe outcomes
- Supports a donors' decisions
- Maintains confidentiality

LIVING DONATION PRINCIPLES

- Voluntary decision
- Free from coercion
- Donor sets the pace of the assessment
- Informed consent is an ongoing process during workup
- Right to withdraw or stop testing at anytime

WHO CAN BE A KIDNEY DONOR?

- Family Members
- Friends, acquaintances, work colleagues

NOTE: By participating in the **Kidney Paired Donation Program**, you can help a loved one or friend get a kidney transplant even if you can not directly donate to them.

POSSIBLE REASONS FOR DECLINING A DONOR

- Inadequate kidney function to donate
- Diabetes or impaired glucose tolerance
- Obesity
- Cancer
- Active substance misuse
- Uncontrolled blood pressure
- Unsuitable anatomy (too many arteries or veins)
- Psychosocial issues, coercion, inability to give informed consent

LIVING DONOR ASSESSMENT PROCESS

Registration

- Each donor self registers by email or phone
- Receives an information package
- Chooses to complete a health questionnaire and registration information

Baseline Testing

- Laboratory and diagnostic tests
- Arranged close to home – collaborate with Family physician
- Compatibility testing

Donor Team Assessment

- Completed at SPH or VGH
- Donor Nephrologist, surgeon, social worker, RN
- Renogram and CT scan

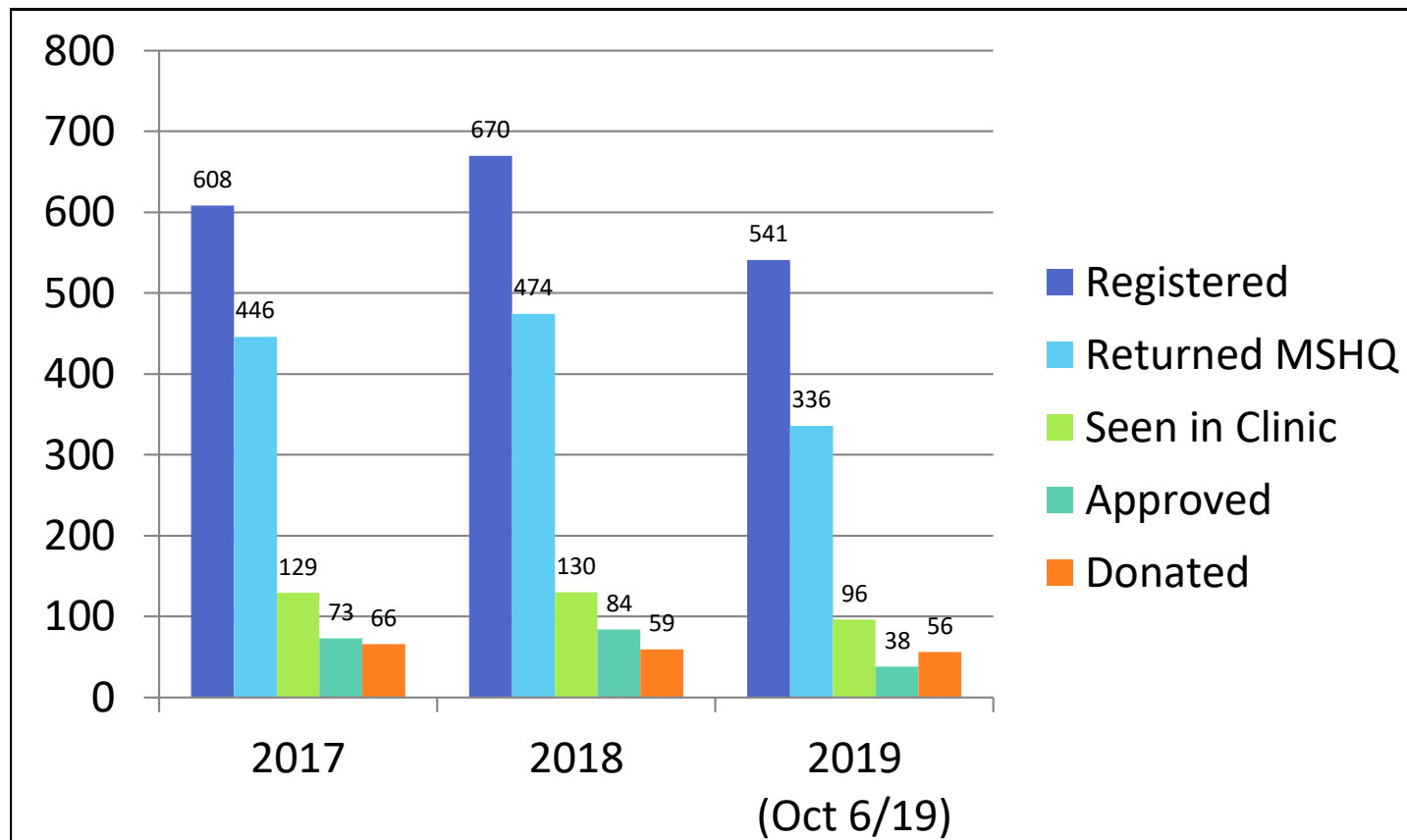
Donor Suitability

- Suitable to proceed – Direct donation, Kidney Paired Donation, or Anonymous Donation
- Declined – Risks are too great

Surgery Planning

- Recipient also suitable and timing appropriate
- Donor timing / preference
- OR and surgical team availability

DONOR STATS: ENROLLMENT TO DONATION (SPH EXPERIENCE OVER 3 YEARS)



KIDNEY PAIRED DONATION (KPD) PROGRAM

- Kidneys are shared Canada-wide
- Considered if a donor approved but is not a suitable match for their intended recipient
- Also suitable for anonymous donors
 - Not linked to any recipient

SOME FACTS ABOUT KIDNEY PAIRED DONATION

- Entering the paired donation cycle does not guarantee a match
- The donor
 - Must be approved by a centre in Canada
 - May have to travel
 - Remains anonymous to their matched pair

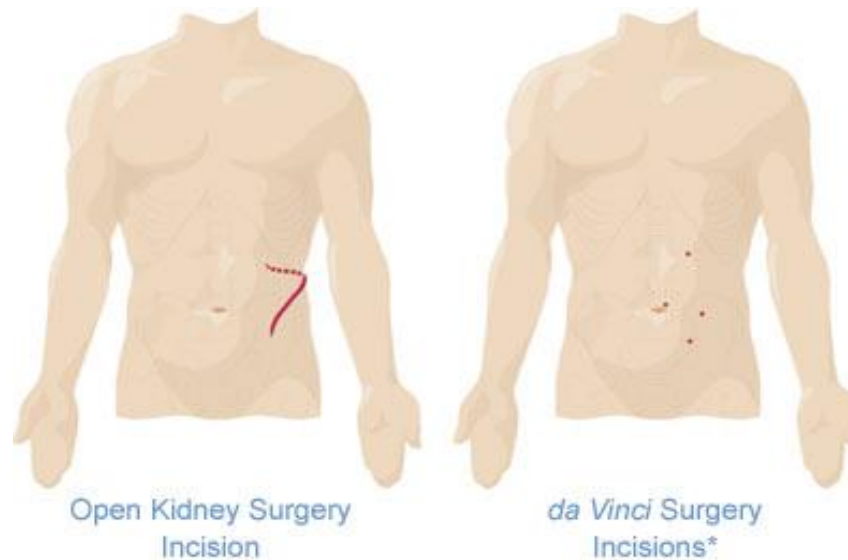
OUT OF COUNTRY DONORS

- Must be known to the recipient
- Must be blood type compatible
- Must have access to health care
- Visitor's Visa may be required (but not granted)
- Donor testing repeated once in Canada (covered by MSP)
- Still may be found unsuitable

THE DONOR SURGERY

Two types of donor incision:

1. Laparoscopic (minimally invasive surgery)
2. Open nephrectomy



DONOR'S SURGICAL RISKS

- Living donation is major surgery
 - Length of hospital stay typically 3-4 days
- Complication rates are low
- Most common concerns after surgery:
 - Incision pain for 1-2 weeks
 - Nausea for 24-48 hours
 - Constipation for 1-2 weeks
- Risk of a serious complication is 1 – 2%
- The risk of dying as a result of the operation is 0.03%

WHAT TO EXPECT LONG TERM

- Life expectancy not reduced
- Long term kidney function about 70% of pre-donation
- Risk of kidney failure later in life very low (<1%)
- Pregnancy considerations
 - Closer follow-up recommended during pregnancy
- Long term risk of proteinuria, higher blood pressure

DONOR LONG-TERM FOLLOW UP

- Life long follow up required
- Annual medical exams with family physician
 - Lab work, Blood Pressure
 - Results are copied to Transplant centre and reviewed
- Transplant team consults as needed

SOCIAL WORKER ROLES

RECIPIENT SOCIAL WORKER ROLES

Home Team Social Worker (KCC/Dialysis)

- Ongoing support before transplant
- Assistance with donor outreach
- Works with you and the transplant team to plan for transplant

Transplant Social Worker

- Conducts transplant assessment
- Provides counselling and emotional support
- Additional donor outreach support and strategies
- Assists with transplant planning (accommodation, support plan, additional resources)
- Support during surgery and recovery while in Vancouver

WHAT IS DONOR OUT REACH?

- Most people benefit from a living donor transplant
- It can be hard to talk about living donation and your need for a transplant
- It is important you are comfortable with doing outreach
- Your home and transplant teams know what has helped others and can offer you information, tools and support
- Support can increase the effectiveness of your outreach efforts

INFORMATION FOR RECIPIENTS

- Donors often offer to donate once they understand the need
- Donors are equally concerned about their relationship with you
- Donation is not the right emotional fit for everyone
- Donors are never obligated to donate and no pressure is placed on them
- Donors obligations/responsibilities are considered and planned for

AFTER DOING OUTREACH

- Finding a donor can take a while
- Receive ongoing emotional support
- Trust the process and talk to your home and transplant teams as it unfolds
- Focus on the positives of your efforts, outreach is a way to be active in your medical treatment plan
- Provide regular updates to your friends and family

ADDITIONAL RECIPIENT SUPPORT

Kidney Foundation Peer Connect Program (for Recipients)

- Home or Transplant SW can help you connect with a recipient
- For more information: The Kidney Foundation
www.kidney.ca/bc or **1-800-567-8112**

DONOR SOCIAL WORKER

- Meets with donors during assessment for donation
- Assists donor to explore whether donation is the right decision
- Provides supportive counselling around donation and any related concerns
- Assists with practical tasks and planning for donation
- Provides support and assistance through surgery and recovery

DONOR'S PERSPECTIVE

- See donation as a gift
- Often report it was an “automatic” decision
- Don't want attention or any “fuss” about donation
- Report it was a rewarding experience for them
- Lead normal, healthy life with one kidney

DONOR SOCIAL WORK ROLE AFTER DONATION

- Provides ongoing support during recovery
- Liaises with medical team regarding any concerns
- Assists with practical concerns related to recovery
- Provides counselling support regarding recovery and expectations

DONOR PROGRAMS

Living Organ Donor Expense Reimbursement Program (LODERP)

- Assists donors with some out of pocket expenses

Living Donor Mentorship Program

- Trained volunteer kidney donors can connect with people considering donation
- Matches kidney donors and potential donors with similar backgrounds, lifestyles

For more information: **The Kidney Foundation**
www.kidney.ca/bc or **1-800-567-8112**

LIVING KIDNEY DONOR EXPERIENCE

QUESTIONS & ANSWERS FOR THE DONOR TEAM

CONSIDER YOUR TRANSPLANT OPTIONS

- Learn about Transplant and Living Donation
- Bring family & friends to education sessions and appointments
- Get support from your Home and Transplant Teams
 - Use Donor outreach tools and sample letters
- Living Donor Transplant gives the best results and is the only way to get a transplant before starting dialysis

INFORMATION & RESOURCES

BC Provincial Renal Agency:

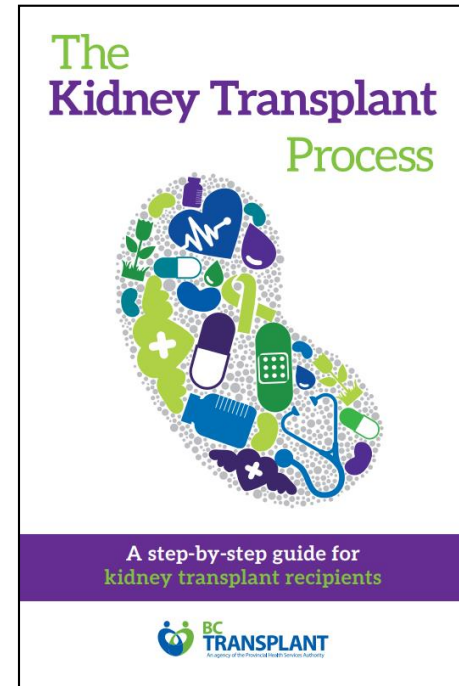
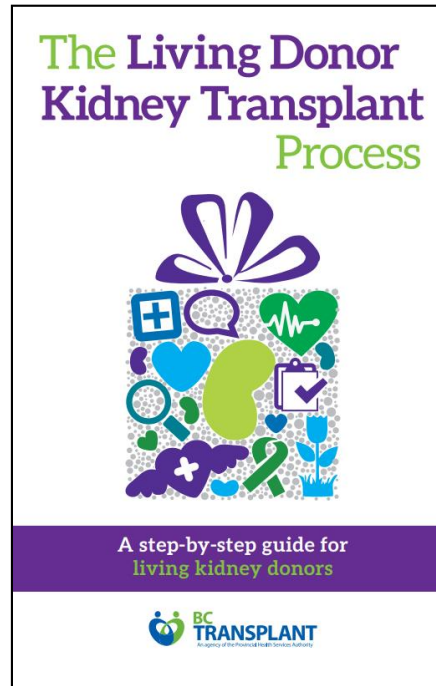
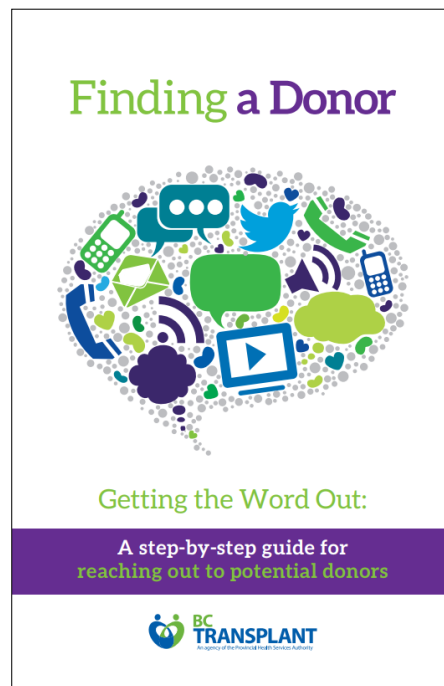
www.bcrenalagency.ca

BC Transplant:

www.transplant.bc.ca

Kidney Foundation:

www.kidney.ca/bc



**THANK YOU FOR YOUR
PARTICIPATION!
PLEASE COMPLETE YOUR
EVALUATION**

