
Kidney donation

Summary

- A kidney transplant can offer people with kidney failure a longer and more active life.
 - Kidneys are often donated after death, but more people are choosing to donate one of their two kidneys while still alive (living kidney donation).
 - People who choose to donate after death must first be declared dead according to strict guidelines.
 - A donated kidney from a living person is likely to remain healthy for longer than one from a donor who is dead, but there is some risk to the donor.
 - Donating a kidney while you are alive is not likely to cause any health problems unless your remaining kidney becomes injured or diseased.
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Kidney transplant is the most common type of transplant performed in Australia. Kidney transplants have a high success rate, with 95 per cent of kidneys surviving for at least one year and 80 per cent surviving at least five years.

People who need kidney transplants may have any number of conditions that lead to kidney failure, which means their own kidneys no longer adequately remove waste and fluid from their blood. People can survive with kidney failure using dialysis but a kidney transplant, if suitable, can offer a longer and more active life, and reduces the need for dietary and fluid restrictions.

Kidneys are often donated after death. Unfortunately, there are more people waiting for a kidney than there are available kidney donors. Thanks to the success of the **Australian Paired Kidney Exchange Programme**, more people are now receiving a donated kidney from a living donor.

Not everyone is medically suitable to receive a donated kidney and some people may not want to have a kidney transplant. For these patients, dialysis is the main treatment option.

Kidney donation after death

You can register your decision to donate your organs after death through the **Australian Organ Donor Register**. Kidney transplants have a high success rate and by donating after death, you will be giving someone the potential to have a longer and more active life than they would have had on dialysis treatment.

A transplant from a deceased donor can be used for medically suitable people who have been stabilised on dialysis.

You must be declared dead before your organs and body tissues can be used. The two legal definitions of death in Australia are:

- brain death – when a person's brain permanently stops functioning
- circulatory death – when a person's heart permanently stops functioning in their body.

The type of death and the health of the organs and tissues of the potential donor dictate how the organ and tissue donation process will occur, and which organs and tissues can be donated.

Living donation

Living donations can occur only for specific tissues or organs. For liver and bone marrow, a living donation is possible because in both, the tissue or cells can regenerate. This means the donor will not have any loss of function after a successful donation.

Kidneys cannot regenerate, but because we have two, healthy people can donate one of their kidneys and function

well with the remaining kidney.

Becoming a living kidney donor

To be a living kidney donor, you must be of good physical and mental health. You would typically be between the ages of 18 and 60 years, and you must be free of any diseases that could affect the health of the person receiving the kidney. A specialist medical team will test to make sure you are a matching blood and tissue type. A close match is more likely with genetically related donors.

Directed kidney donation

A living donation from a relative or friend or is called a directed donation.

Most living kidney donors are biological relatives, such as a parent, brother or sister with a close blood and tissue match that reduces the risk of rejection of the organ. Biologically unrelated people such as partners or close friends can also donate, if compatible.

Non-directed kidney donation

Non-directed kidney donation is a reasonably new form of living donation that has been introduced in Australia. A non-directed donation is when someone altruistically donates their kidney to be given to the next suitable person on the waiting list. The privacy of the donor and identity of the recipient will be protected.

Paired kidney exchange

Paired kidney exchange is another form of living donation that helps to increase the number of living donors and recipients. The **Australian Paired Kidney Exchange (AKX) Programme** is run by the Australian Organ and Tissue Authority.

Sometimes, a person who is eligible for a transplant has a relative or friend who would like to donate their kidney, but they have an incompatible blood or tissue type. In these instances, the AKX Programme will search the database of donor/recipient pairs to find donor/recipient combinations where the donor in an incompatible pair can be matched to a recipient in another pair. In this way, two or more simultaneous living kidney donations can take place. In late 2015, a record seven-way kidney swap took place across Australia, kick-started by an altruistic Victorian living donor.

Risks for the living kidney donor

A donated kidney from a living person is likely to remain healthy for longer than one from a deceased donor. However, there is some risk to the donor. The surgery lasts for about three hours and will be followed by a hospital stay of four or five days. The surgery can have complications, but people can usually resume their everyday lives after six to eight weeks.

Donating a kidney is not likely to cause any long-term health problems, unless the remaining kidney becomes injured or diseased.

Where to get help

- Your doctor
- **NURSE-ON-CALL** Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
- **DonateLife Victoria** Tel. 1300 133 050
- **Kidney Health Australia Information Service** Tel. 1800 454 363
- The **Australian Organ Donor Register** Tel. 1800 777 203

This page has been produced in consultation with and approved by:

Donatelife Victoria

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