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STUDY EXAMINES CONCERNS OF LIVING KIDNEY DONORS

Highlights

- Among living kidney donors, the post-donation concern that was considered most important was kidney health, followed by the surgical, lifestyle, functional, and psychosocial impacts of donation.
- The hypothetical long-term risks associated with kidney removal—including mortality and cardiovascular disease—were of relatively lower importance.

Living kidney donor transplants comprise nearly one-quarter of kidney transplants performed worldwide.

Washington, DC (May 31, 2018) — In a new study that examined living kidney donors' concerns about their decision to undergo kidney removal, long-term kidney health, aspects of surgery and recovery, and impacts on life satisfaction were among those that donors felt were most important. The findings appear in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN).

Increasing living kidney donations is critical to address the global shortage of organs. Donor candidates must accept a range of risks and benefits when they decide to have a kidney removed, and it is important to determine which of these they consider most important.

To identify which impacts of kidney donation are deemed important by living kidney donors, Camilla Hanson, BPsych(Hons), PhD (University of Sydney, in Australia) and her colleagues recruited previous donors from 3 transplant units in Australia and Canada to participate in focus groups. Participants had a range of demographic (gender and age), and donation characteristics (time since donation, relationship with the recipient, and complications).

Across 14 focus groups that included 123 donors, the post-donation outcome that was most important to kidney donors was kidney health, followed by the surgical, lifestyle, functional, and psychosocial impacts of donation. The hypothetical long-term risks associated with kidney removal—including mortality and cardiovascular disease—were of relatively lower importance.

Specifically, the 10 highest ranked outcomes were kidney function, time to recovery, surgical complications, impact on family, donor-recipient relationship, life satisfaction, lifestyle restrictions, kidney failure, mortality, and acute pain/discomfort.

Some differences were observed in the importance of outcomes between donors recruited from Australia and Canada. Canadian donors ranked kidney function and failure higher than Australian participants, who ranked time to recovery, physical function, impact on family, donor-recipient relationship, and financial impact higher.

“Our results may help to ensure that the outcomes most relevant to donors are consistently included in research, education, assessment, and follow-up care,” said Dr. Hanson.

In an accompanying editorial, Milda Saunders, MD, MPH and Michelle Josephson, MD (University of Chicago) note that the study illustrates that past donors care about both medical and non-medical outcomes. “More than anything, this work demonstrates that we cannot simply assume we know what donors care and worry about. We must talk with them about their priorities and concerns both before and after surgery,” they wrote.

An accompanying Patient Voice article reflects the impact that pediatric-onset end-stage renal disease has on patients and their families and the personal perspective of a donor-recipient team.

Study co-authors include Jeremy Chapman FRACP, John Gill MD, John Kanellis, PhD, Germaine Wong PhD, Jonathan Craig, PhD, Armando Teixeira-Pinto, Steve Chadban, PhD, Amit Garg, PhD, Angelique Ralph, BPsych(Hons), Jule Pinter, MD, Joshua Lewis, PhD, and Allison Tong, PhD.

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The article, entitled “Identifying Outcomes that Are Important to Living Kidney Donors,” will appear online at <http://cjasn.asnjournals.org/> on May 31, 2018, doi: 10.2215/CJN.13441217.

The editorial, entitled “Donor Outcomes: We Need to Listen,” will appear online at <http://cjasn.asnjournals.org/> on May 31, 2018.

The Patient Voice article, entitled “Living Donation: The Donors and Recipient Perspectives,” will appear online at <http://cjasn.asnjournals.org/> on May 31, 2018.

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