

# Can I Be a Living Kidney Donor?

## How to Become a Living Kidney Donor



## Information to Living Kidney Donors

- You can live a normal healthy life with one kidney
- You must come forward voluntarily. That means you must not be under any pressure or forced to donate
- You must start the screening process yourself. Contact the Living Kidney Donation Program at Kingston Health Sciences Centre (KHSC)
- You must be in good physical and emotional health. You'll be screened carefully to see if you're medically suitable to donate
- You must be at least 18 years of age and give informed consent for the surgery
- There is no strict upper age limit for donors
- Female donors should talk about pregnancy post operatively with your Transplant Nephrologist. Getting pregnant isn't recommended within one year after kidney donation
- At any step in the process, you can choose not to proceed

## Are You Thinking of Becoming a Living Kidney Donor?

### What do your kidneys do?

Your kidneys clear toxins and fluids from your body. A toxin is a poison.

### What can we do for kidney failure?

The treatment choices are hemodialysis, peritoneal dialysis, or kidney transplant (deceased donor or living donor).

### What is a kidney transplant?

A kidney transplant is surgery. During this surgery, a donor kidney is placed into the lower abdomen of the recipient.

## What is the difference between a “Donor” and a “Recipient”?

You’re the “Donor” if you’re giving the kidney.

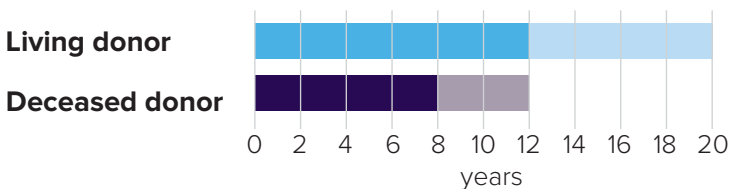
You’re the “Recipient” if you’re getting the kidney

\* More than one potential living kidney donor may need to be evaluated for each recipient.

## What are the advantages of living kidney transplantation/donation?

- Less time waiting. Your transplant could happen within 6-9 months of a living donor coming forward
- Surgery can be scheduled when both donor and recipient are in the best possible health
- There is little time between removal of the kidney and transplantation. This can improve how well the kidney works and survives
- With a kidney from a living donor and careful planning, sometimes a patient can avoid the need for dialysis and go straight to transplant

## Living donor transplant usually lasts longer (12 – 20 years compared to 8 – 12 years for deceased donor)



## Who can be a living donor?

- Most often, a living donor is a close family member such as a parent, child, brother or sister
- A donor can also be a more distant family member, a spouse, a friend, a co-worker, or a stranger
- A donor must be over 18 years of age and in good general health. That means the donor can not have any of the following:
  - Diabetes
  - Kidney disease
  - Cancer
  - Heart disease
  - Substance abuse (current or recent history)
- Consideration is given to donors with:
  - Body mass index (BMI) greater than 35 kg/m<sup>2</sup>
  - Smokers
  - People over the age of 70
  - High blood pressure
  - History of kidney stones
- Potential female donors should discuss getting pregnant with their Transplant Nephrologist. You will require more frequent monitoring

## Transplant recipient Robert

“I really feel good! I’m not sure why I didn’t get this done many years ago. No more machines!”



## Transplant donor Ben

“The surgery was a great success and has profoundly changed my father’s quality of life for the better. At every stage along the way, the team went out of their way to provide information, support, and guidance. I felt prepared and I developed a great trust in the doctors and the support team.”

## Getting Started

All potential live kidney donors will have a comprehensive assessment by the nephrology team. The living donor evaluation process is designed to make sure you're healthy and that it's safe for you to donate. It's important that you don't feel pressured by others to donate, and that you make a well-informed decision. At any point along the way, you may decide not to proceed.



### Step 1: Initial Assessment

#### What is the first step once I say I'm interested in donating a kidney?

- Make an appointment with your family doctor and find out your blood type.  
If you are a blood donor, your blood donor card is acceptable.
- Talk to your potential recipient if known to see if they're willing to consider you as a donor.  
If you are an anonymous donor with no identified recipient, the transplant team will communicate with the recipient for you.
- Contact Kingston Health Sciences Centre (KHSC) Living Kidney Donation Program at 613-549-6666 extension 7838 to speak to the Living Donor Coordinator.  
They will help you find out more information about whether you are a suitable match. If you are, they will refer you to a Nephrologist.
- Complete a medical, social and travel questionnaire and return it to the Living Donor Coordinator.

## Is it better to be related to the donor?

Not necessarily. Being genetically related can be beneficial, but it is not required. Anti-rejection medications have improved, making non-related donation a good option.

## Who can I donate to?

If you have this blood type:	You can donate to someone with these blood types:
O	O, A, B, AB
A	A or AB
B	B or AB
AB	AB

## After I see the Nephrologist, what do I need to do?

You'll need a visit to your family doctor for a 2 step TB test and fecal occult blood test if you are 50 years of age or older. Also, women will need a PAP (pelvic exam), breast exam and a mammogram if over the age of 40.

Men will need a digital rectal exam (prostate exam), if over the age of 40.

You'll need to book these tests and have the results sent to your Living Donor Transplant Coordinator.

## When all the tests are done and I have seen the specialists, what then?

As you complete each test, the transplant team will review all the results. If you need any more tests, we will call you.

When all your tests are done, you will get a call from the Living Donor Transplant Coordinator to let you know if you are suitable for kidney donation.

# Complications of Living Kidney Donation

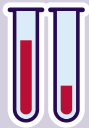
## What are the risks of donating a kidney?

Short term risks are related to the surgery and may include:

- Allergic reaction to anesthesia (less than 2%)
- Blood clots (less than 2%)
- Infection (less than 10%)
- As with any surgery, there may even be a very small risk of death (less than 3 people in every 10,000 donors)

Long term risks may include:

- Hypertension (high blood pressure) – 5mm Hg rise in blood pressure above the natural increase that occurs with aging (less than 10%)
- Increased protein in your urine (the significance of this remains unknown)
- Rare cases of kidney failure after donation. Generally, the risk after donation is the same as the general public (1 in 1000)



## Step 2: Laboratory and Diagnostic Testing

There are a number of other laboratory tests to make sure you are in excellent health. These are listed at the end of this document. Some tests can be done close to your home or work place. This can be helpful if you live far away. A cross-match test to check compatibility between you and your intended recipient will be arranged and take place at KHSC.

### What if I am not a match for my recipient?

If you and your recipient do not directly match this means you are incompatible. You can think about a paired exchange. The Kidney Paired Donation Program means incompatible donor and recipient pairs can still go ahead with the transplant. You can do this exchange of kidneys with another incompatible pair.

Donor pairs are referred to Ottawa or Toronto until this program is available at our site.

For more information, please visit [www.blood.ca](http://www.blood.ca) and search for “Live Kidney Donor”



## Step 3: Evaluation and Medical Imaging

### What is the purpose of the evaluation?

These appointments help us make sure kidney donation is safe for the donor. This is a chance to talk about the benefits and risks of donation. This will help you, as the potential donor make an informed decision.



## Step 4: The Decision to Donate

- The Living Donor Transplant Team determines if you are physically and emotionally fit to be a donor. However, you have the final decision to go ahead with the donation.
- It is important not to feel pressured by others to donate and to make a well-informed decision
- If you choose not to donate, the recipient team will only be told that you are not a suitable donor. Results regarding your assessment are kept confidential.



## Step 5: Surgery and Recovery

- The surgery date needs to work for the donor and the recipient, as well as the medical team.
- Closer to the surgery date, both you and the recipient will need a final assessment and blood work to prepare.
- Our transplant surgeon is able to use minimal invasive laparoscopic surgery in most cases.
- After a live donation, you will require post-operative follow ups with the medical team for routine monitoring at 1, 3, 6 and 12 months. After that, if there are no issues, your family doctor can follow up with you.



## **How long will it take for me to recover after surgery?**

Donors usually spend 1 to 3 nights in the hospital and require 4 to 6 weeks of additional recovery time.

## **Financial Matters**

The surgery itself is covered by OHIP.

Other things for you to think about include time off work for:

- Tests and appointments
- Recovery from the surgery

Donors may qualify for short term disability or unemployment insurance.

The Program for Reimbursing Expenses of Living Organ Donors (PRELOD) may provide some financial help to living kidney donors. This could help to cover some costs related to travel, parking, meals and accommodation during your assessment and at the time of surgery. All receipts need to be saved for reimbursement.

PRELOD is administered through the Trillium Gift of Life Network. We will discuss your eligibility for PRELOD during your assessment.

Our social workers can answer your financial questions.

## **Is there any other education information available?**

We will give you the “Living Kidney Donation Program” handbook. This handbook will answer many of the questions you may have.

Below, we have provided you with a list of specialists you will need to see as well as tests and procedures you will need to have done.

You may use this list as a diary to help keep track of the dates and times of your appointments.

Your Living Donor Transplant Coordinator will review this with you and indicate which items pertain to you.

# List of pre-donation workup items

## Required specialist consults

- Psychiatry
- Social Worker
- Transplant Coordinator
- Transplant Surgeon

## Required family doctor consults

- 2 step TB test
- Fecal Occult blood (if over 50)
- Male – digital rectal exam (if over 40)
- Female – PAP test, breast exam and if you are over 40 a Mammogram is required

## Other consults (only if recommended by the Nephrologist)

- Dermatology
- Hematology
- Respiriology
- Diabetes consult
- Infectious Diseases
- Endocrinology
- Neurology
- Oncology
- Ophthalmology
- Gastroenterology
- Genetics
- Gynecology

## Blood/Urine Tests

Your transplant nephrologist will order blood work and urine tests. For some of the blood work, you will need to fast. Fasting means that you can not have anything to eat or drink before the test.

The Living Donor Transplant Coordinator will contact you to schedule these tests and give you instructions.

## Cardiology

These tests check to make sure your heart is healthy and working well.

### Required tests:

- ECG 12 lead
- Echocardiogram

### Tests required at recommendation of the Nephrologist

- Persantine MIBI stress test (if older than 40)
- Treadmill stress echo (if older than 40)

## Diagnostic Imaging

These tests check for abnormal images in the body and quality of blood:

### Required tests:

- Chest x-ray
- DTPA renal scan
- Ultrasound of abdomen & pelvis
- Triphasic CT angiography of renal blood vessels

### Required test at the recommendation of the Nephrologist

- CT of Abdomen & pelvis
- CT of chest

If you need other tests, the transplant team will arrange them for you.

This process to donate your kidney is **time consuming and takes a lot of tests and consults**. It is important that you really understand and agree to all the consults and tests that will need to be done.

## **Do you need more information?**

Check out the various websites listed below for additional information, or contact a member of your care team.

### **Trillium Gift of Life Network**

[www.giftoflife.on.ca](http://www.giftoflife.on.ca)

### **PRELOD**

[www.giftoflife.on.ca/resources/pdf/PRELOD FAQ.pdf](http://www.giftoflife.on.ca/resources/pdf/PRELOD%20FAQ.pdf)

### **Kidney Foundation of Canada**

[www.kidney.ca](http://www.kidney.ca)

### **Kidney Paired Donation Program**

#### **(Canadian Blood Services)**

<https://blood.ca/en/organs-tissues/becoming-live-kidney-donor>

### **Canadian Cancer Society Guidelines**

[www.cancer.ca/screening](http://www.cancer.ca/screening)

## **KHSC Living Donation Program**

Kingston Health Sciences Centre, KGH Site  
Burr 3, Room 21.3.025  
76 Stuart St., Kingston, ON K7L 2V7

## **Living Kidney Donor Coordinator**

Arlene Funnell, Registered Nurse  
Kidney Team Office  
Phone: 613-549-6666 ext. 7838 Fax: 613-548-1394

## **Transplant Nephrologists**

Dr. David Holland  
Dr. M. Khaled Shamseddin





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