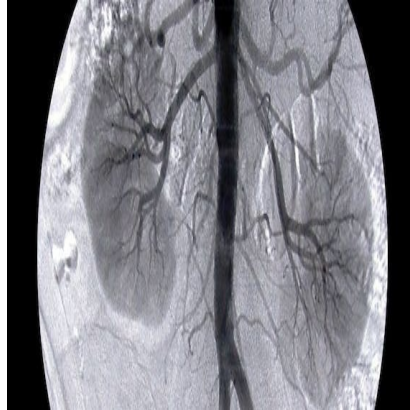




Study: Kidney Donors Exposed to Minor Increased Risk of Kidney Disease



A recent study analysing close to 100,000 kidney donors has concluded that, in comparison to healthy non-donors, there exists a small increased lifetime risk of developing end-stage renal disease following kidney donation. The study, published in the February 12 issue of JAMA, describes this risk as still being significantly lower than in the general population.

Annually in the US, about 6,000 healthy adults accept the risks of kidney donation to help family members, friends, or even strangers. According to details in the article, in due diligence to donors it is vital for the transplant community to comprehend the risk of donation to the fullest extent and to communicate them clearly to those considering donation.

Along with his team of colleagues, Abimereki D. Muzaale, MD, M.P.H., of the Johns Hopkins University School of Medicine in Baltimore, conducted the comparison study of end-stage renal disease (ESRD) incidence in donors and healthy non-donors to better understand the risk of ESRD.

The study looked at donations between 1994 and 2011, and included over 96,000 kidney donors in the United States. It also analysed a group of more than 20,000 participants of the Third National Health and Nutrition Examination Survey (NHANES III), who were linked to Centers for Medicare & Medicaid Services data to ascertain development of ESRD (defined as the initiation of maintenance dialysis, placement on the transplant waiting list, or receipt of a living or deceased donor kidney transplant).

The estimated cumulative incidence of ESRD at 15 years after donation was 30.8 per 10,000 in donors, and 3.9 per 10,000 in healthy non-donors. The observation of higher incidence among donors was in both black and white donors; whereas the absolute risk of ESRD was highest among blacks, regardless of their donor status.

By age 80 years, the estimated lifetime risk of ESRD was 90 per 10,000 in donors versus 14 per 10,000 in healthy non-donors. Live donors had much lower estimated lifetime risk of ESRD than did the general population (unscreened non-donors; 326 per 10,000).

The authors' findings reiterate the established belief of lifetime risk of ESRD in live donors being no higher than that in the general demographics-matched US population.

In conclusion the researchers state that, compared with a matched cohort of healthy non-donors, kidney donors had an increased risk of ESRD. The magnitude of the absolute risk increase however, was small, and it is hoped that these findings may help inform discussions with persons considering live kidney donation.

Source: JAMA <http://www.jamanetwork.com>

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