WHEN CAN A LIVE DONOR KIDNEY TRANSPLANT BE DONE?
A live kidney transplant can be done even before starting dialysis. This is known as a pre-emptive transplant. The transplant can also be done after starting dialysis.

WHAT IS THE SUCCESS RATE FOR LIVE DONOR KIDNEY TRANSPLANT?
The success rate for live donor kidney transplant is over 99%, although over 20 years or so, some kidney transplants are lost to rejection or other causes.

While living donation is indeed a sacrifice, it is the noblest gift an individual can make to someone he or she cares for: all that is required is a willing and suitable donor.

GIVE A GIFT OF LIFE.

AND A NEW LEASE OF LIFE.

FOR MORE INFORMATION
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Information is correct at time of printing (March 2015).
A kidney transplant is an operation in which a patient with kidney failure (the recipient) receives a kidney from another person (the donor). Immunosuppressive medicines prevent rejection of the kidney transplant and allow it to function just like a normal kidney, cleansing the recipient’s body of toxins, removing excess salt and water and producing hormones needed to maintain health. A kidney for transplant can be obtained from individuals who are alive (Live donor) or those who have died in a hospital ICU (Deceased donor).

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WHO CAN BE A LIVE KIDNEY DONOR?

A live donor can be:

• Biologically related to the recipient, such as a parent, sibling, offspring or more distant relative such as an aunt, uncle, cousin, nephew or niece;
• Emotionally related to the recipient, such as a spouse, friend or even in-laws;
• Occasionally, even a stranger who wishes to donate a kidney to someone in need of a transplant (altruistic donor).

WHAT IF THE BLOOD GROUPS BETWEEN THE LIVE DONOR AND RECIPIENT ARE DIFFERENT?

A kidney transplant can be performed across different blood groups as long as they are compatible as shown below:

<table>
<thead>
<tr>
<th>Recipient Blood Group</th>
<th>Compatible Donor Blood Group</th>
<th>Incompatible Donor Blood Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>O</td>
<td>O</td>
<td>A, B, AB</td>
</tr>
<tr>
<td>A</td>
<td>A, O</td>
<td>B, AB</td>
</tr>
<tr>
<td>B</td>
<td>B, O</td>
<td>A, AB</td>
</tr>
<tr>
<td>AB</td>
<td>A, B, AB, O</td>
<td>NIL</td>
</tr>
</tbody>
</table>

If the blood groups are incompatible, a live donor kidney transplant can be still done, although this type of transplant carries a slightly higher risk of rejection.

ARE THERE ANY RISKS TO THE LIVE KIDNEY DONOR?

A live donor must be:

• At least 21 years of age; donors older than 65 years can be considered on a case by case basis.
• Free from the following conditions:  
  - Cancer  - Diabetes  
  - Heart disease  - Hepatitis B or C  
  - HIV infection or AIDS  - Kidney disease.

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A healthy individual only requires one kidney to live normally.

Kidney donation will not affect the health, life span or energy level of the donor, as long as the donor was carefully and thoroughly evaluated prior to the operation, as in our centre.

Nevertheless, donors will be monitored lifelong, as some kidney donors may be at slightly higher risk for:
- Protein in the urine
- Reduced kidney function.

In comparison to dialysis, kidney transplant recipients:

• Live longer as their kidney function is restored,  
• Have better health,  
• Have less restriction on diet and water,  
• Have more time and energy,  
• Have better quality of life.

In comparison to a deceased donor kidney transplant, live donor kidney transplant:

• Has less rejection and better kidney function as a kidney from a live donor is healthier,  
• Has a higher success rate,  
• Eliminates the long dialysis waiting time.

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