

Education for kidney failure patients may improve chances living donor transplantation

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Patients with kidney failure who have greater transplant knowledge and motivation are ultimately more likely to receive a kidney transplant from a living donor, according to a study appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology (CJASN)*. The findings suggest that improving patient education may help reduce disparities in transplantation.

A [kidney transplant](#) is the best treatment for patients with [kidney](#) failure, offering patients a longer and healthier life than dialysis. Also, a kidney from a living donor offers patients a longer and healthier life than a kidney from a deceased donor. Add to this the fact that there is an enormous shortage of available kidneys from deceased donors and it becomes clear that patients should be encouraged to find living relatives or other individuals willing to donate kidneys to them.

"When we think about how to help more kidney patients receive transplants, we know that there are characteristics that can be modified—like how much information patients have about transplantation or their [transplant](#) knowledge—and characteristics that are more difficult to change or that cannot be changed at all, such as their race and socio-economic status," said Amy Waterman, PhD (Washington University School of Medicine).

To see which modifiable characteristics might be changed to increase transplantations from living kidney donors, Dr. Waterman and her colleagues studied 695 White and Black kidney failure patients who

underwent a transplant evaluation process at the Barnes-Jewish Hospital [Transplant Center](#). At the beginning of the process, patients were asked how knowledgeable they were about transplantation and how willing they were to receive a living donor transplant. Patients were followed for six years.

The researchers found that, compared with Whites, Black patients were less prepared when they started the evaluation process. Blacks were less likely to have received transplant education, were less knowledgeable about transplantation, and were less willing to pursue deceased or living donor transplantation. Six years later, the patients who ultimately received living donor transplants were those who started the process with greater transplant knowledge and greater motivation to receive living donor transplants.

"These findings suggest that we can do something to help. Preparing patients well for transplantation, especially patients of color, is a promising way to help more patients successfully get living donor transplants," said Dr. Waterman. "Educational interventions for [kidney patients](#) focused on helping improve [patients](#)' transplant knowledge and motivation to pursue transplant may reduce or overcome racial disparities in transplantation," she added.

More information: The article, entitled "Modifiable Patient Characteristics and Racial Disparities in Evaluation Completion and Living Donor Transplant," will appear online on March 21, 2013, [doi: 10.2215/CJN.08880812](https://doi.org/10.2215/CJN.08880812)

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