

Study finds kidney transplant donation rates vary widely across Europe

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A new Europe-wide survey shows significant country-to-country differences in rates of kidney transplant donors. The survey shows for example within the EU, there is a x5 variation in the number of kidney donors per country (per head of population). This variation is probably due to different legal and social standards across Europe.

Kidneys can fail for a variety of reasons, the most common being diabetes, [high blood pressure](#), [drug overdose](#), and physical injury. Kidney dialysis is often used as a treatment, but the best long-term solution is transplant, usually from a recently-deceased donor. Rates of Chronic Kidney Disease vary considerably across Europe, from 3% to 17% of the population, and are [increasing](#). Demand for kidneys almost always exceeds possible supply, and each country manages transplants differently. Now a new survey, being presented at the European Association of Urology congress in Munich, has shown significant differences in the number of donor kidneys available in each country.

Dr. Víctor Díez Nicolás (associated member, European Society for Transplantation in Urology, ESTU) will present the results of this ESTU-led survey on kidney donation [rates](#) and kidney transplantation rates across Europe for 2014. Comparing data from a range of registers, they found wide country to country variation. For example:

Russian Federation 3.3

Greece 4.2

Germany 10.4

Switzerland 14.3

Poland 15.5

The Netherlands 16.8

UK 20.6

Italy 22.7

France 25.3

Portugal 27.3

Croatia 35.1

Spain 35.7

All figures are 2014 figures. All figures are deceased donors per million population.

Dr Díez Nicolás said:

"The circumstances in country are very different, but basically it depends on two factors, social sensitivity, and legislation. Most organs for transplantation are come from brain dead donors. But each country manages organ availability differently. In Spain for example, each citizen is a potential donor unless they opt-out of the transplant scheme, whereas in Germany there is an 'opt-in' scheme. Some countries also allow donation from living donors, or from persons whose hearts have stopped. The number of organs from both these sources has been increasing".

As the technology becomes more mainstream, and rates of kidney failure are increasing, the demand for organs has increased quite significantly, and there is a general need to obtain more organs. At the moment, whether you can find a donor organ largely depends on where you live. If countries want to increase transplant rates, and so increase survival from kidney failure, they might consider changing the way they source donor organs".

Professor Arnaldo José Figueiredo (Coimbra, Portugal), chairman of the ESTU Said:

"Transplantation remains the most effective way of replacing [kidney](#) function. End stage renal failure incidence is increasing steadily in all European countries and, notwithstanding the fact that efforts should primarily be put on prevention, transplantation activity also needs be promoted, as demand clearly exceeds supply. There are significant discrepancies in transplant activity among European countries, and the ones with lower rates of transplant per capita should look at the examples of the leaders. At the same time, there are important differences where the transplanted organs come from, such as brain dead, non-heart beating and living donors, meaning there is scope for improvement in each program".

Provided by European Association of Urology

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