

Kidney transplantation: Indications and complications

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Abstract

Kidney transplant or renal transplant is that the transplant of a kidney into a patient with end-stage renal disorder (ESRD). Kidney transplant is usually classified as deceased-donor (formerly referred to as cadaveric) or living-donor transplantation counting on the source of the donor organ. Living-donor kidney transplants are further characterized as genetically related (living-related) or non-related (living-unrelated) transplants, counting on whether a biological relationship exists between the donor and recipient.

Introduction

People with ESRD who receive a kidney transplant generally live longer than people with ESRD who are on dialysis and should have a far better quality of life. However, kidney transplant recipients must remain on immunosuppressants (medications to suppress the immune system) to stop their body from rejecting the new kidney. This long-term immunosuppression puts them at higher risk for infections and cancer. It's important to regularly monitor the new kidney's function by measuring serum creatinine and other labs; this could be done a minimum of every three months for the remainder of the person's life.

In 2018, an estimated 95,479 kidney transplants were performed worldwide, 36% of which came from living donors. The primary successful kidney transplant was performed by Joseph Murray in 1954; Murray was awarded the Nobel prize in Physiology or Medicine in 1990 for his add organ transplantation.

and protozoan (1%). Of the viral illnesses, the foremost common agents are human cytomegalovirus (31.5%), herpes simplex s