

# **Surgical aspects of live donor kidney transplants in Kenya**

## **Abstract:**

Review of twenty cases of live-donor kidney transplants in Kenya for a period of 5 years (1985-1989) and the follow up study results revealed that there were both high graft losses, high morbidity and mortality due to various complications pertaining to surgery and immunosuppression. The most serious complications were intercurrent infections, acute or chronic rejection, pulmonary embolism, steroid induced diabetes, pneumonia, and myocardial infarction. At the end of the first year follow up, there were only twelve graft patients alive. Magnetic Resonance Imaging (MRI) was not available for assessing the anatomical and functional behaviour of the transplanted kidneys. This would have assisted in early diagnosis of the degree and onset of rejection for appropriate treatment before the death of the allografts. It would also assist in differentiating perfusional problems from rejection.