

Kidney transplantation: recent medical experiences from the Kenyatta National Hospital, Nairobi.

Abstract:

Renal transplantation is not readily available in the majority of countries in Africa. It is expensive and difficult to sustain on the meagre funds allocated to health. We report our short experience with fifteen living donor recipients followed in our unit for at least 24 months, range 26 - 48 (mean 35 months) post-transplantation. The donors and recipients were mostly young adults with mean ages of 36.7 years and 32.6 years respectively. The majority of the donors and recipients were males. The donors in most cases were siblings. Within this time, one graft has been lost at one year and the patient restarted on haemodialysis. Three patients died, two within the first year, the third at 23 months after transplantation, all with functioning grafts. The one year graft and patient survival rates were 93% and 86.6% respectively. The second year graft survival rates remained at 93% and the patients survival rate 80%. The nature and frequency of complications seen in these patients is comparable to those in other centres. Of all medical complications, bacterial infections contributed 69.4% of all infections. Cardiovascular complications comprised 31.25% of the complications. Hypertension seen in 85.5% of the patients accounted for 65% of the cardiovascular complications. Acute rejections were common and occurred in seven patients. Transplantation is a viable mode of renal replacement therapy (RRT) in our environment. The practice should be supported to make it more readily available to the many young end stage renal failure (ESRF) patients.