Journal of Clinical and Experimental Transplantation

Kidney transplantation: Indications and complications

Joseph F. Buell *

Department of Surgery, Tulane University USA

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 then 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 longterm 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. Citation: Buell JF (2021) Kidney transplantation: Indications and complications. J Clin Exp Transplant. 6: 135.

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