

17<sup>th</sup> International Conference on

# NEPHROLOGY & UROLOGY

March 12-13, 2018 London, UK

## Peri-operative modifications and post-operative events after nephrectomy in kidney donation

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**Introduction:** Living-donor kidney transplantation is a well-established treatment of choice for the ever-increasing number of patients with ESRD, offering longer survival and a better quality of life at a lower cost than dialysis. The harmlessness of kidney donation seems to be questioned, especially in Arabic Muslim developing country like Tunisia, where lack of cadaveric donors is continuously leading to an increase in living donors' numbers. The aim of this study is to evaluate the surgical, clinical and biological outcomes of nephrectomies in the early post-operative period and factors related to the hospital stay length.

**Materials & Methods:** This is a longitudinal mono-centric study, involving a cohort of 106 living kidney donors where nephrectomies were performed during November 2007-April 2015. In April 2016, the data of followed up donors were collected. Criterion of exclusion was lack of complete data at time of donation. The IBM SPSS 20 was used to analyze data and Chi-2 Test was used to compare variables.

**Results:** 106 donors (66 female and 40 male) were assessed before nephrectomy. The mean age was  $42.8 \pm 10.6$  years (range 21–68 years). In 93% of cases, nephrectomy was performed on the left kidney. The operation procedure was subcostal lobotomy in 102 donors (96%) and laparoscopic nephrectomy in 4 donors. Complications during the operation were encountered in few cases: 1 case of cardiovascular collapses due to hemorrhagic incident, 3 cases of ventilation trouble and 7 cases of pleural wound without pneumothorax. No cases of anaphylactic reaction, bronchospasm or death were noted. The median length of hospital stay after nephrectomy was 9 days (6.13). Mean hospital stay was correlated with age  $\geq 40$  years ( $p=0.04$ ) and baseline  $BMI > 30$   $kg/m^2$  ( $p=0.05$ ). This duration was independent of the surgical approach ( $p=0.36$ ). Modifications in biological parameters of donors are detailed in the Table1. In the post-operative period, some clinical events were encountered in 44% of cases (detailed in Table 2). No death was noted during eight years of kidney sampling.

**Conclusion:** Age greater than 40 years and obesity  $BMI > 30$   $kg/m^2$  are the main factors associated with prolonged duration of postoperative hospitalization but do not increase the risk of per-operative complications that seem rare in kidney donation.

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