



Factors That Condition the Attitude Toward Living Related Kidney Donation Among Santiago of Cuba's Population

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ABSTRACT

Introduction. Living kidney donation is currently the most important kidney donor source in Latin America, and it is necessary to further increase its rates.

Objective. To analyze the attitude toward living kidney donation among the Santiago de Cuba's population and to determine the sociopersonal factors with which it is associated.

Method. The population over 15 years old residing in Santiago de Cuba, stratified by sex and age, was screened. The "PCID-LKD Ríos" attitude questionnaire toward living kidney donation was administered to a random selection of the people surveyed according to the stratification and the census data. The completion was anonymized and self-administered. Verbal consent was obtained.

Results. The study was completed by 445 people, of whom the 86% (n = 389) were in favor of living related kidney donation. This attitude is associated with the level of education (P < .001); previous experience with organ donation (P = .006); attitude toward cadaveric organ donation (P < .001); carrying out of prosocial activities (P = .010); discussion of the issue with the family (P < .001) and the significant other (P < .001); concern about mutilation after donation (P = .001); religious beliefs (P = .001); and assessment of the risk of living kidney donation (P < .001). In the multivariate study, the following variables persisted: (1) level of education; (2) attitude of cadaveric donation; (3) carrying out of prosocial activities; and (4) risk assessment of living donation.

Conclusions. Living related donation is very well accepted among the Santiago de Cuba's population.

DIALYSIS played a key role in decreasing mortality among patients with chronic kidney failure, but kidney transplantation achieved an improvement in these patients' autonomy and quality of life [1]. Nowadays, cadaveric donation is insufficient to cover the actual kidney transplantation needs [2]. To defray this deficit, living kidney donation is increasingly being promoted, because it is a therapeutic and ethically acceptable option due to lower risk for the donor and because it obtains good clinical results [2]. Living kidney donation, connected or related, is currently

the most important donor source in Latin America. It is necessary to determine the factors that would bring about an increase in the rates of donation [3–8]. The objective of this study was to analyze the attitude toward living kidney

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SANTIAGO OF CUBA AND LKD 327

Variable	Correct Concept (n = 282; 31%)	Incorrect Concept (n = 638; 69%)	P
Sociopersonal variable			
Age (41 ± 14 y)	-	-	.726
Sex	Female	Male	.002
Civil status	-	-	.451
Social interaction and prosocial behavior variables			
Attitude toward donation of deceased donor organs	In favor	Against	<.001
Family comment on donation and transplant	Yes	No	<.001
Opinion of the significant other toward donation and transplant	In favor	Do not know	<.001
Religious variables			
Religion of respondent	Atheists-agnostics	Catholics	<.001

donation among the Santiago de Cuba's population and to determine the population's associated sociopersonal factors.

METHODS

Population Screened

The population over 15 years old residing in Santiago de Cuba was screened. To learn the characteristics of this population, the latest census was reviewed. A random representative sample was obtained and stratified according to the respondent's municipality of residence, sex, and age.

Appraisal Tool

Attitude was assessed using a validated questionnaire of attitude toward organ donation and transplant [3–8] ("PCID–LKD Rios": Questionnaire of Proyecto Colaborativo Internacional Donante about Living Kidney Donation [Donación de Vivo Renal in Spanish], developed by Dr Ríos). This questionnaire included items distributed in 3 subscales of factors, and it was validated in the Spanish population, submitting a total explained variance of 63.995% and a Cronbach alpha reliability coefficient of 0.778.

Analyzed Variables

The attitude toward living donor kidney donation was analyzed as a dependent variable, both related and unrelated, and with the following independent variables: (1) sociopersonal factors; (2) knowledge of organ donation and transplant; (3) social interaction; (4) prosocial behavior; (5) religion; and (6) attitude toward living donation.

Fieldwork Research

A random selection of the people surveyed according to the stratification and data census completed the anonymized and self-administered questionnaire. Verbal consent was obtained to collaborate in the study. For respondents under the age of 18, consent was obtained from of one of the parents or the legal guardian.

Statistics

A descriptive statistic was performed. Student t, χ^2 , and Fisher tests and a logistic regression analysis were used.

RESULTS

Attitude Toward Living Kidney Donation

A total of 455 people completed the study, among which 86% (n = 389) were in favor of the living kidney donation if it was related, 13% (n = 63) were not in favor of living donation of a kidney, and the remaining 1% (n = 3) were unsure.

Bivariate Analysis of the Factors That Determine the Attitude Toward Living Related Kidney Donation

Of the Cubans surveyed and living in the area of Santiago de Cuba, in all groups of variables analyzed, the relevant results are significant. Among the variables of sociopersonal type, the level of education is relevant; a more favorable attitude was shown among those with a university education compared with those without (93% vs 55%; P < .001; Table 1). Among the variables on knowledge and attitude toward organ donation and transplantation, those who had previous personal experience with the field of donation and transplantation had favorable attitudes to donation (92% vs 82%; P = .006), along with those who had a favorable attitude toward cadaveric organ donation (95% vs 65%; P < .001). In the variables of social character, those who had discussed donation and the transplantation with their families (94% vs 79%;P < .001) and those who knew of the favorable opinion of their significant others had a more favorable attitude toward living donor kidney donation (97% vs 70%; P < .001). In addition, acceptance of living donor kidney donation was greater among respondents who did not carry out a type of prosocial activities but nevertheless were against those who do not intend to initiate this type of altruistic actions (87% vs 67%; P = .010). In religious variables, the respondents who defined as atheistagnostic had a more favorable attitude toward living donor kidney donation compared with those who professed religions other than Catholic (94% vs 78%; P = .001). Among believers, knowledge of a favorable attitude in their religion influences them to have a favorable attitude toward the living donor kidney donation (96% vs 55%; P < .001). Finally, among the variables related to the body, those who were not worried about possible mutilation of the body after

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