



# Multivariate Analysis of Factors That Influence the Attitude of the Ecuadorian Population Resident in Spain Toward Living-Related Kidney Donation

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# **ABSTRACT**

Background. The Ecuadorian population is the largest Latin-American immigrant group in Spain. Currently, several Ecuadorians have received transplants or are awaiting transplants in Spain. The aim of this work was to analyze the attitude toward living kidney donation among the Ecuadorian population residing in Spain.

Methods. The population screened were born in Ecuador, residing in Spain, and >15 years old, stratified by gender and age, and appraised with the use of the questionnaire on attitude toward organ donation for transplantation "PCID-DVR-Ríos." Support from immigration associations in Spain was used to advise on the location of potential respondents. The completion was anonymous and self-administered. Verbal consent was obtained. Statistics included Student t test,  $\chi^2$ , Fisher exact test, and logistic regression analysis.

Results. A total of 461 respondents were included: 80% (n=367) were in favor of living-related kidney donation (for a relative or close friend). This attitude was associated with psychosocial variables that persisted in the multivariate study: 1) female gender (odds ratio [OR], 3.086; P=.001); 2) considering oneself a potential kidney receptor in the future (OR, 16.949; P=.002); 3) economic incentive in the donation (OR, 100; P=.004); and 4) knowing the attitude of their religion toward transplantation (OR, 32.258; P<.001).

Conclusions. Living-related donation is accepted among the Ecuadorian population residing in Spain and is associated with sociopersonal and religious factors.

THE ECUADORIAN population is the most numerous Latin American immigrant group in Spain. Currently, several Ecuadorians have received transplants or are awaiting transplantation in Spain. Therefore, their involvement in donation is important, and thus the importance of knowing their predisposition to donate. Even in Spain, for example, where there is one of the highest rates of deceased donation, this type of donation is insufficient [1]. To reduce

the deficit, living donation is being encouraged, given that it is an ethically acceptable therapeutic option owing to the low level of risk for the donor and the good clinical results

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achieved. However, despite an ongoing living donor program in most Spanish transplant centers and most health care professionals being in favor, currently this type of donation is very limited [1]. In addition, it has been seen that Spanish patients on the transplant wait list are unwilling to accept an organ from a family member because they believe that they will be able to obtain a deceased organ and thus avoid the mutilation of a loved one [2]. The objective of the present study was to analyze the attitude of the population of Ecuador immigrants in Spain toward living kidney donation (LKD) for transplantation.

#### **METHODS**

# Population Screened

The screened population were born in Ecuador and reside in Spain. To find out about the population with these characteristics, the last census of inhabitants from our community was used as a reference where there is a record of the legal population. In addition, there is a percentage of population of these nationalities that are not legal, and to estimate this number, several immigration associations were consulted to estimate the size of this group. Therefore, to the 216,474 Ecuadorian residents with legal documentation in Spain, we added those estimated by the associations, resulting in a total of 513,000 Ecuadorians living in Spain. The sample population was >15 years old and stratified by age and gender.

#### Appraisal Tool

Attitude was assessed with the use of a validated questionnaire of attitude toward living kidney donation, the PCID-DVR-Ríos (Proyecto Colaborativo Internacional Donante sobre Donación de Vivo Renal developed by Dr Ríos) [2–8]. This questionnaire included items distributed in 3 subscales of factors, and it was validated in the Spanish population, showing a total of explained variance of 63.203% and a Cronbach alpha reliability coefficient of 0.834.

# Fieldwork Research

A random selection of people to survey was based on stratification. Immigration associations in Spain advised on the location of potential respondents. The completion was anonymous and self-administered. Verbal consent was requested to assist in the study.

### Statistics

Student t test,  $\chi^2$ , Fisher exact test, and logistic regression analysis were applied.

# **RESULTS**

# Attitude Toward Living Kidney Donation

A total of 461 respondents were included in the study: 80% (n = 367) were in favor of living-related kidney donation (for a family member or close friend). This attitude was associated with different psychosocial variables.

In the different groups of analyzed variables, statistically relevant results were observed. Among the sociopersonal variables, gender and marital status were significant, with women (84% vs 74%; P = .007) and those who are married (84% vs 68%; P = .021) having a more favorable attitude

toward LKD. Among the variables in knowledge and attitude toward organ donation and transplantation, the relationship between attitude toward LKD and attitude toward cadaveric organ donation (84% vs 73%; P = .004) and having considered the possibility of needing a transplant compared with those who have not considered this option (92% vs 54%; P < .001) stood out. Regarding social variables, the favorable opinion of one's partner toward donation and organ transplantation influenced attitudes toward LKD of the respondents compared with those who did not know the position of their partners (95% vs 80%; P = .003). In religious variables, the fact that the respondent knew of the attitude in favor of their religion influenced the favorable attitude toward LKD (91% vs 58%; P < .001). Finally, among the body-related variables, those who were not concerned about the possible mutilation of the body after donation had a more favorable attitude toward LKD than those who were concerned about such treatment of the body (84% vs 72%; P = .047) (Table 1).

# Multivariate Analysis

Persisting as independent variables were being female (OR, 2.427; P = .006), favorable opinion of partner toward donation and transplantation (OR, 4.524; P = .007), having considered the possibility of needing a transplant in the future (OR, 8.064; P = .006), and knowing the favorable opinion of the religion one professes (OR, 16.666; P = .001) (Table 1).

## DISCUSSION

There is currently a growing tendency toward LKD [1]. However, in Spain, owing to several factors, but mainly because of the great development in deceased donation, living donation is minimal. The persistently high number of kidney patients awaiting kidney transplants is making living donation a necessity, especially if we take into account the low risk from surgery in healthy donors and that the results are better than in deceased donation [9]. This situation is different from the position in countries where the organ donation rates are lower than the Spanish ones [1]. For instance, in most Latin American countries, the kidney transplant rate is sustained by living donation [10]. This complex situation is forcing us to search for those recipients who could be most in favor of living kidney donation [2]. Among these are patients who were not born in Spain [6–8]. Our data show that this is a population group with a favorable attitude toward living-related donation, with 80% in favor.

Analysis of the factors affecting attitude toward LKD revealed a notable relationship with family influence: those respondents who had discussed the subject of organ donation with their partners were more in favor [3–8]. That is why it is important to discuss the subject of organ donation within the family, a fundamental fact in deceased donation, and, as we can see, important in living donation as well [11,12]. Another important factor is that the respondents' religious activity did not affect attitude, but being aware of

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