

## ABSTRACT

Kidney transplantation is the best standard treatment for individuals with end-stage renal disease (ESRD) worldwide, because it offers the recipients normal or near-normal life. Low and middle-income countries are facing increasing difficulties in supporting resource for kidney transplants and providing equitable patient care. In Myanmar, kidney transplant met with many challenges on health care providers.

A cross-sectional descriptive study using both quantitative and qualitative methods was carried out to examine the current status and challenges of living donor kidney transplant among 40 pairs of kidney transplant at Yangon Specialty Hospital (YSH). Quantitative data was drawn from medical record of the hospital and descriptive finding was presented for background characteristic, outcome of the operation of living donor kidney transplant recipients and donors and challenges of health care provider on living donor kidney transplant at YSH. Seven respondents were participated in in-depth interview.

Majority of the recipients were age of 25-34 years (30%), not markedly gender distribution, from urban (77.5%), with underlying hypertension (90%) and diabetes (10%). Most of the donors were in the age group of 30-39 years, mainly from female donors (62.5%) from sister sibling. All transplant cases were alive without intra-op complication. Post-op complications (in ICU) were recipients (17.5%), donors (10%) and post-op complication (in ward) were recipients (60.5%), donor (20%). Graft nephrectomy was done in 2 out of 40 recipients (5%) due to acute rejection during first month after transplant. Among recipients, 5 out of 40 recipients (12.5%) were death during 1 year and 6 months after transplant including two graft nephrectomy patients. Causes of deaths were pulmonary embolism, chronic graft rejection, septicemia and renal failure after graft nephrectomy. All donors were still alive now.

The qualitative analysis revealed the five key themes: national support, staffing, limited budget on medicine and consumable supply, training and skill, tissue typing and cross matching. The results indicated that government support and budget were important role in living donor kidney transplant.