



# Myths & Misconceptions Demystified

In the United States most people know about the deceased donor organ program and that they could register with their Department of Motor Vehicles. Although registrant rates could be higher, many consider this a successful program because more than 80% of the population say they would be an organ donor. Part of this success stems from there being a national organization, UNOS, (United Network for Organ Sharing) that facilitates deceased donation and is supported by the Federal Government. Each year, millions of dollars are spent on deceased donor education and many thousands of hours of human capital is spent to sign people up and educate the public.

**No such structure exists to educate the public about living kidney donation. As a result, there is little knowledge about living kidney donation. There are many myths and misconceptions that need to be overcome, here are a just few.**

MYTH	FACT
<b>I need 2 kidneys to live a normal life.</b>	One in 750 people are born with one kidney and their life expectancy is the same as someone who is born with 2 kidneys.
<b>You have 2 kidneys, because one is a spare.</b>	Most kidney diseases affect both kidneys, as is the case with the two leading causes of kidney failure: diabetes and high blood pressure.
<b>You won't be accepted as a donor, if you are older than 65.</b>	It's not someone's age, it's their health that matters. Many people have donated who are in their 70s or even their 80s.
<b>The recipient is unable to reimburse a donor for any out-of-pocket expenses they incur.</b>	It is legal to reimburse a donor for any pre- or post-transplant expenses that they might incur; such as travel, lodging, food, or lost wages.
<b>If you smoke marijuana, you are not allowed to be a kidney donor.</b>	This is not true: if that were the case many people in California and other States wouldn't be able to donate.
<b>Most transplants are from Living Donors</b>	There are almost 2.5 times more deceased donor transplants each year than living donor transplants.
<b>Matching someone to donate is 1 in a million, that's why a blood relative is needed to be a donor.</b>	A blood relative is NOT needed; the drugs recipients take is one of the primary reasons a blood donor isn't needed and the "matching" criteria has become much easier.
<b>A kidney donor will have to take anti-rejection drugs for the rest of their life</b>	It's the recipient who will take the immunosuppressant drugs, not the donor.
<b>Kidney donors need to limit their physical activities.</b>	Most kidney donors can return to their normal activities in 4-6 weeks following the transplant, however, they should follow their doctor's instructions. Everyone recovers differently from this procedure.
<b>Kidney donors must adhere to a new diet after they donate.</b>	Kidney donors do not have any dietary restrictions.
<b>A kidney donor can no longer consume alcohol following donation</b>	While excessive alcohol use is always dangerous, a kidney donor can consume alcohol in moderation – or as advised by their doctor.
<b>A female kidney donor should not get pregnant after donation.</b>	Women can have children after being a kidney donor. A woman should consult with her doctor before becoming pregnant.
<b>A donor's sex life will be affected by donation.</b>	After a period of recovery from the procedure an individual should consult their doctor, but should be able to resume sexual activity when they feel well enough to do so.