



Is the Incipient Community of Senegalese Emigrants to Spain in Favor of the Donation of Related Renal Live?

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ABSTRACT

Background. Senegalese populations are massively migrating to the southern parts of the European Union, especially Spain, France, and Italy. The attitude towards living kidney donation in this group is little known. The objective of this study was to analyze the attitude toward living kidney donation of subjects from the population of Senegalese residents in Spain.

Methods. The study subjects were the Senegalese population residing in Spain aged >15 years stratified according to age and sex, according to census data and immigrant support associations. The evaluation instrument used was an attitude questionnaire toward renal live transplant (“PCID-DVR” Ríos: The questionnaire of the International Collaborative Donor Project about Living Kidney Donation [“Proyecto Colaborativo Internacional Donante sobre Donación de Vivo Renal” in Spanish] developed by Dr. Ríos). Support of African immigration associations was used to advise on the location of potential respondents. Fulfillment of the questionnaire was anonymous and self-administered. Verbal consent was requested for collaboration in the study. Student *t* tests, the χ^2 test, Fisher exact test, and a logistic regression analysis were used in the statistical analysis.

Results. The study included 293 respondents. Overall, 62% (*n* = 181) were in favor of renal live donation (relatives and close friends); 38% (*n* = 112) did not consider the possibility of renal live donation or they had doubts. This attitude is not related to social variables or general information (*P* > .05). The variables associated with this attitude (*P* < .05) were related to the family environment (especially with the partner) and the risk assessment of donating a living kidney.

Conclusions. Based on these results, the Senegalese population that has immigrated to Spain has a very unfriendly attitude toward renal live donation.

ORGAN donation from deceased donors does not provide enough organs to obtain optimal transplantation rates to meet the demands of the population [1]. Even in Spain, for instance, which has one of the highest rates of deceased donation, this type of donation is insufficient [2]. To reduce the deficit, living donations are being encouraged given that it is an ethically acceptable therapeutic option due to the low level of risk for the donor and the good clinical results achieved. However, despite an

ongoing living donor program in most Spanish transplant centers, and most health care professionals being in favor of this approach, this type of donation is currently very limited [3–8]. In addition, it has been seen that Spanish patients on

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the transplant 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 [9].

In Spain, a notable increase in the foreign population is creating a new social and demographic reality throughout the country [10–13]. The population of Senegalese origin is emigrating massively to southern Europe, especially Spain, France and Italy. Little information is known about their attitude toward related living kidney donation. Our study hypothesis was that the population residing in our geographical area originating from Africa (where the focus is on living donation, given the limited development of deceased donation) would be in favor of related living kidney donation, and as such could be a target group for our health care policy aimed at encouraging living kidney donation. The aim of the study was to analyze the attitude toward renal live donation of people among the Senegalese population resident in Spain.

PATIENTS AND METHODS

Study Population

Senegalese population members living in Spain aged >15 years were stratified according to age and sex. A random representative sample was made according to the respondent's legal situation: those with legal documentation and those without legal documentation. For those with legal documentation, the population census of Spain provides the number of people of every nationality living in Spain, giving their age, sex, and municipality of residence (<http://www.ine.es/inebase/cgi/axi>). The sample was stratified according to age and sex according to these data. For the population without legal documentation, the information is not as accurate as the previous group because there is no official information. Different immigration charities were consulted to estimate the size of this group. With this information, an approximate population census was created, and this sample was stratified according to age and sex.

Evaluation Instrument

Attitude was assessed by using a validated questionnaire of attitude toward living kidney donation [11,12] (PCID-DVR Ríos: The questionnaire of the International Collaborative Donor Project about Living Kidney Donation [“Proyecto Colaborativo Internacional Donante sobre Donación de Vivo Renal” in Spanish] developed by Dr. Ríos) [3–8]. This questionnaire presents a total of 63.005% explained variance and a Cronbach's α reliability coefficient of 0.778.

Fieldwork

The random selection of subjects to be surveyed was based on stratification. Assistance was needed from African immigration support associations to advise on the location of potential respondents. Fulfillment of the questionnaire was anonymous and self-administered. Verbal consent was requested for collaboration in the study.

Statistics

A descriptive statistical analysis was performed, and the Student t test, χ^2 test, Fisher exact test, and a logistic regression analysis were applied.

RESULTS

Of the 293 Senegalese subjects surveyed, 62% ($n = 181$) were in favor of related living kidney donation (familiar and close friends).

Tables 1 and 2 present the factors associated with attitude toward related living kidney donation. Socio-personal variables are those variables associated with the donation of live renal-related studies (100% university vs 47% without studies; $P = .001$) and have offspring (68% vs 52%; $P = .007$). Knowledge variables regarding the organ donation and transplantation process are those variables associated with the risk assessment that the respondents make

Table 1. Variables Affecting Attitudes Toward Related Living Kidney Donation in Bivariate Analysis

Variable	In Favor ($n = 181$ [62%])	Not in Favor ($n = 112$ [38%])	P
Socio-personal variables			
Age	–	–	.315
Sex	–	–	.646
Civil status	–	–	.604
Offspring	To have offspring	Lack	.007
Level of studies	University students	No studies	.001
Knowledge about and attitude toward organ donation and transplantation			
Possibility of needing a transplant for oneself	Yes	No	.001
Risk assessment of renal live donation	Any	A lot	<.0001
Social interaction and pro-social behavior			
Family comment on donation and transplantation	Yes	No	<.0001
Opinion of a couple toward donation and transplantation	In favor	No	<.0001
Prior relationship with donation and transplantation	–	–	.480
Perform pro-social activities	Yes	No	<.0001
Religious			
Religion of the respondent	Catholics	Muslims	<.0001
Know the attitude of your religion toward transplantation	In favor	Unknown	.049
Attitude toward the body			
Concern about mutilation after donation	No	Yes	<.0001

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