

AST Key Position Statements

Living Organ Donation

Living donor transplantation saves lives, often providing the very best possible outcome for the recipient. Utilization of organs from living donors has been an accepted practice since the earliest days of kidney transplantation.

Growing disparity between the number of patients in need of transplantation and availability of transplantable organs has increased interest in living donors. Innovative approaches have been developed to increase numbers of living donors, including use of non-directed donors, paired kidney donation, and immunologic conditioning of recipients to allow the successful transplantation between previously incompatible donor-recipient pairs. At the same time, there is increasing interest in the risks (medical and psychosocial) living donors accept to benefit others, and in ensuring appropriate protection (short- and long-term) for those who choose to donate. Critical issues include:

- **Incomplete understanding of live donor outcomes.** Despite the long history of living organ donation, there is incomplete information regarding medical and psychosocial consequences. This limits the ability to counsel potential donors. Short-term follow-up is mandated by the OPTN at the center level, though many centers struggle with providing accurate data on all donors. Longer-term data is even more difficult to generate. At the current time, there is no widely available mechanism to fund donor follow up and data analysis. AST endorses:
 - Fully transparent education of the potential living donor regarding known risks and benefits of donor testing, surgery, and long-term outcomes.
 - Targeted efforts by the OPTN and other interested parties to define parameters most likely to inform the living donor process, then collecting and analyzing data in a cost effective manner that does not pose undue burden on transplant centers or donors.
- **Non-reimbursed financial expenses incurred by donors.** Many medically suitable and willing potential living donors are unable to donate due to financial disincentives. While potential donors face no direct medical costs during the evaluation period, they are often saddled with many out-of-pocket expenses associated with the donation (travel to the transplant center, subsistence, housing, and child care), as well as lost wages. Current mechanisms for reimbursement of expenses are clearly inadequate. The AST endorses:
 - Removal of disincentives for living donation, such as reimbursement of travel expenses, housing, lost wages, medical expenses related to donation, complications and follow-up and other out-of-pocket expenses associated with living organ donation.
 - Preferred status for prior organ donors who subsequently develop end-stage organ failure and require transplantation.
- **Difficulty obtaining health and/or life insurance as a consequence of donation.** Insurance coverage for the living organ donor can become problematic in both the short and long-term. The cost of the surgical procedure and the care following the surgery are generally covered by the recipient's insurance, but only for a defined, and relatively brief, period of time. There may also be instances where the donor is left facing medical expenses not covered by any insurance policy. Coverage for potentially unknown long-term complications is not clearly delineated, and some donors have been refused health insurance due to prior donation. The AST endorses:



- Advocacy for access of living donors to life and health insurance.
- Exploration of provision of insurance coverage for donors (such as Medicare eligibility) to assure protection from financial expenses that might arise as a consequence of donation.

The American Society of Transplantation believes that by addressing the issues outlined above, both process and outcome of living organ donation in the United States can be improved. Furthermore, the AST believes that living organ donation rates can be increased in an ethical fashion with adequate protection for potential living donors via:

- Educational programs to increase public awareness of the benefits of organ donation.
- Professional education programs addressing living donor issues and utilization.
- Promotion of kidney paired donation.
- Public recognition of organ donors and their families through Honors/Donor medals.

It is the stated position of AST that "...living donors ought not to profit financially nor should they be financially disadvantaged from donation." Though the AST remains opposed to direct payment for organs from living donors (consistent with current Federal law), many questions remain regarding the potential impact of financial incentives (or removal of disincentives) on the willingness of potential donors to complete the process. Thus, AST supports careful study, debate, and exploration of these issues in appropriate venues and targeted research.

The AST also supports efforts to minimize the financial complexity and administrative burdens currently inherent in paired living organ donation.

Approved by the AST Board of Directors on April 13, 2009

Revisions approved by the AST Board of Directors on September 6, 2011

Revisions approved by the AST Board of Directors on December 6, 2012

Revisions approved by the AST Board of Directors on June 25, 2013