

## **Living Kidney Donation 101**

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# Disclosures

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I have no financial disclosures or conflicts of interest to report.

# Kidney Transplant Statistics

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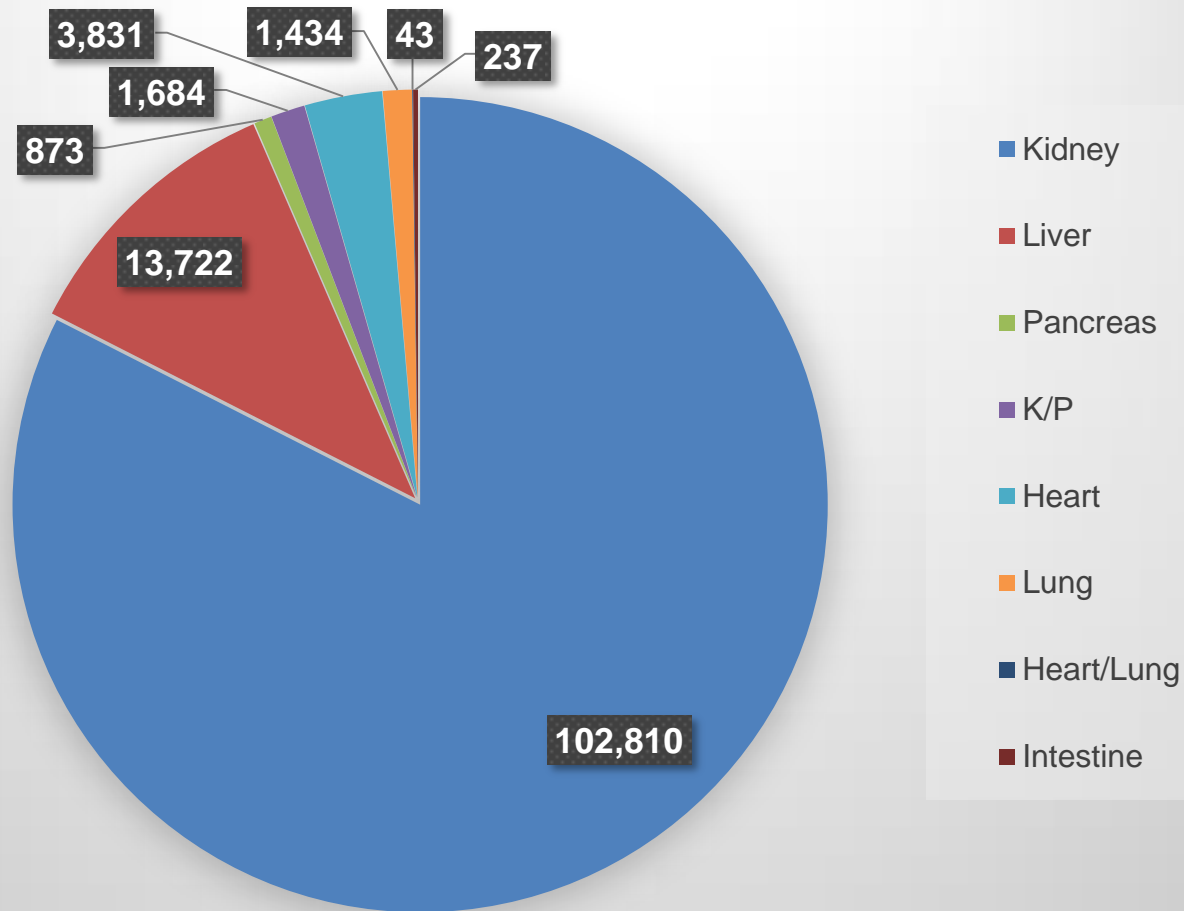
>600,000 people in the U.S.  
in need

>100,000 on the waitlist in  
U.S.

~790 on our waitlist @ UNC

Average wait-time for UNC is  
5-7 years

# National Waitlist by Organ – UNOS, Feb. 2019



# DDT vs. LDT in the US

Trend for deceased donors – slow increase, but for living donors, somewhat stagnant:

	To Date	2018	2017	2016	2015	2014	2013
All Donor Types	446,360	21,167	19,849	19,060	17,878	17,108	16,896
Deceased Donor	294,847	14,725	14,038	13,431	12,250	11,570	11,163
Living Donor	151,513	6,442	5,811	5,629	5,628	5,538	5,733

# Why are LIVING DONOR KIDNEYS better?

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From a healthy person

Donor thoroughly evaluated/screened

Less Cold ischemia time (CIT)

Kidney lasts longer and works better

No long waiting list

# Living Donation – Benefits & Eligibility

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Immediate, no waiting list. Surgery scheduled.

Kidney works better & lasts longer.

Deceased donor: 8-10 yrs

Living donor: 15-20 yrs

Shortens wait time for others.

Donor must be at least 18 years old (older if a non-directed donor-center specific).

Donor has to be medically and psychologically healthy.

Contraindications to being a donor include (but not limited to):

Diabetes

Cancer history

Autoimmune disorders

Drug use

HIV

Obesity

# Types of Living Kidney Donation

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Compatible directed donation-most common, donating to a person you know (related or unrelated), that you are compatible with.

Incompatible directed donation – donating to a person you know (related or unrelated) but are not compatible with. Programs such as desensitization or ABOi transplant options are utilized.

Non-direct donation- donating altruistically, usually at center level or part of national registry.

Kidney paired donation (KPD)- you can't donate to who you want to but you can find another pair to swap with - UNOS, NKR, Alliance, or with individual centers.

Advanced Donation (voucher program)- you donate now, as a non-directed donor, and obtain a voucher for future use by someone in need – NKR.



# A potential living donor starts with.....

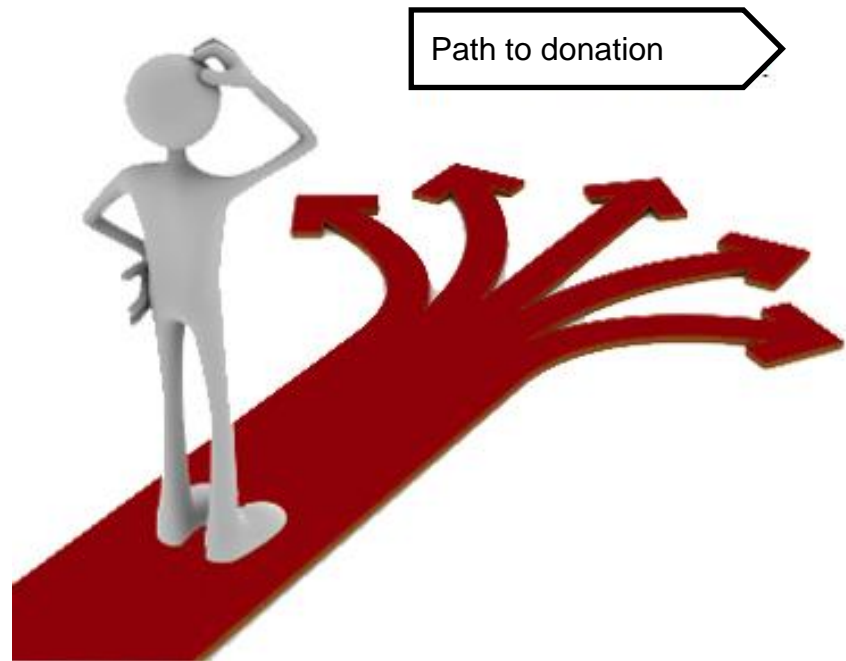
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Screening – are there any absolute rule outs?

Education- tell person how the donor evaluation process works.

Insurance authorization- recipient's insurance pays for donor testing, surgery, hospital stay.

First “test” is ABO typing and Cross Match (XM)- check compatibility.



# Living Donation - Costs

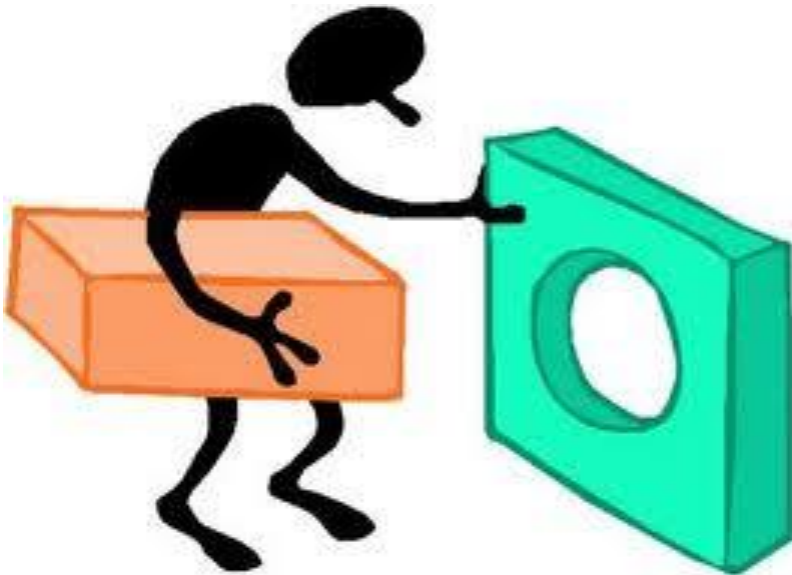
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A living donor's medical expenses are paid by the recipient's insurance in most cases. This is verified up front. However, some expenses are NOT covered.

Covered	Not Covered
Evaluation visits	Travel expenses
Diagnostic bloodwork	Routine cancer screenings
Diagnostic tests	Lodging
Surgery	Lost Wages
Post-surgical care	Unrelated medical issues

# What if recipient and donor NOT compatible?

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Blood type incompatible or positive XM.

It's okay, there are still options to consider:

Blood type incompatible transplant (ABOi)

Kidney Paired Donation (KPD)

# Blood Type incompatible transplant (ABOi)

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These are compatible blood types:

Recip A – Donor A or O

Recip B – Donor B or O

Recip AB – Donor A, B, AB or O

Recip O – Donor O

If donor not compatible to recip- can try ABOi.

Nothing different on donor side.

Recipient needs:

Acceptable titer levels (low enough to be treated successfully).

Education about ABOi protocol (I.S. medication before surgery, plasma pheresis treatments).

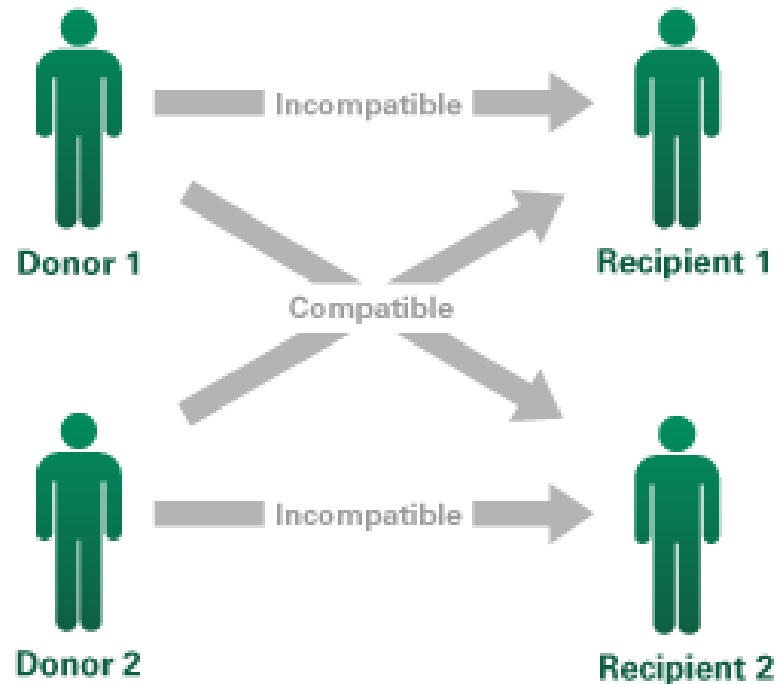
Education about risks of this treatment.

# Kidney Paired Donation (KPD)

Look for another pair to “swap” with.

Swap because of incompatible blood type or positive cross match with donor.

Also consider compatible swapping. Recipient and donor are compatible but have difference in age. They could swap to find a “better matched” kidney for the recipient.



# If recipient and donor ARE compatible

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Evaluation proceeds. Includes medical and psychosocial testing and consults.

Must “prove” donor is healthy and no risk factors for future kidney problems.

- Labs, CXR, EKG
- Renal u/s, Kidney function test/scan
- CT angiogram, Cardiac testing (prn)
- Nephrology, Transplant Surgery
- Financial coordinator
- Social worker and/or Psychologist
- Nurse coordinator
- Health maintenance/cancer screenings

Once evaluation complete, reviewed by donor team/committee and decision made on donor candidacy.

If approved, donor notified. Recipient notified.

If both are ready to proceed, surgery is scheduled.



# Surgical procedure

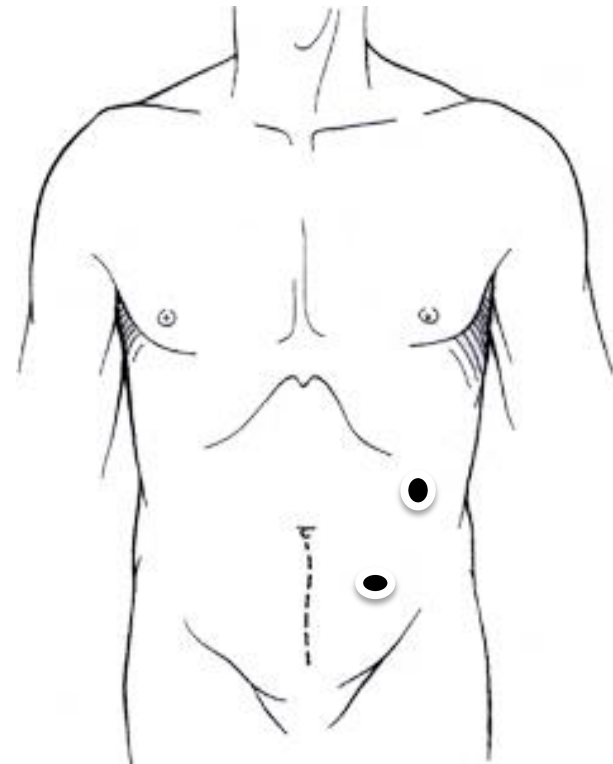
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## Open surgery

- Rare

## Laparoscopic surgery

- Routine approach
- Faster recovery
- Shorter hospital stay
- Less pain
- Smaller incisions



# Post donation care and recovery

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Hospitalized about 2 days. Goals for discharge:

- Ambulate
- Pain control
- Bladder/bowel function return

Monitor labs – creatinine will increase after donation

Monitor for infection at surgical site

Monitor incision healing



# Post donation instructions

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No driving until cleared by surgeon

Lifting restrictions for 10-12 weeks post donation. Concern for developing hernia

Discuss return to work plan with donor team

No dietary restrictions following donation

Recommend a healthy, balanced diet and regular check ups with a doctor



# How can patients FIND a donor?

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Share their story with friends, family and the community.

Talk with their family about who can be a spokesperson or “champion.” This person can talk to others on their behalf.

Send a letter or email about their need for a living donor to family and friends.

Let their community know about your need for a transplant and that living donation would likely provide you with the best outcome.

Folks can get creative.....

# People get creative.....



# People get creative.....



Cancer survivor using Times Square billboard to find kidney d...



# Community Education

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By the recipient/families- health fairs, church talks, NKF KEEP screenings, fundraisers, T-shirts, billboards, sandwich boards, etc.

By the transplant center- LD champion programs, marketing to dialysis centers/patients/nephrologists/clinics.

By the media- radio, newspaper, social media stories.

By getting involved with organizations.....





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[Transplant Living](#) > [Kidney](#) > How to find a living donor



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Kidney  
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# Non-Directed Donation

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## Non-directed donation (NDD)

- donating altruistically
- usually at center level or part of national registry.
- donor evaluated first, then entered in registry or recipient selected by center

# Advanced Donation

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Advanced Donation Program (ADP / voucher program)

- you donate now, as a non-directed donor, and obtain a voucher for future use by someone in need
- NKR is the program UNC is affiliated with, but there are others.
- donors may want to donate now, before get older
- donor may want to donate, recover, then be able to be caregiver for recip



# RESOURCES

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UNOS patient website: [www.transplantliving.org](http://www.transplantliving.org)

SRTR website: [www.ustransplant.org](http://www.ustransplant.org)

OPTN website: [www.optn.org](http://www.optn.org)

Federal government organ donation website: [www.organdonor.gov](http://www.organdonor.gov)

National Kidney Foundation website: [www.kidney.org](http://www.kidney.org)

National Foundation for Transplants: [transplants.org](http://transplants.org)

American Kidney Fund: [www.kidneyfund.org](http://www.kidneyfund.org)

American Organ Transplant Association: [www.aotaonline.org](http://www.aotaonline.org)

# THANK YOU

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