

# **British Transplantation Society / UK Transplant**

## **Arrangements for Altruistic Non-Directed Living Kidney Donation**

### **Summary**

- Donor assessment - as per national guidelines & unit protocol including mandatory mental health assessment
- Approval process via local Independent Assessor & HTA panel
- Donor registration with UK Transplant
- Donor organ allocation - UK Transplant carry out organ matching and allocation as for deceased donor kidneys
- Crossmatch test – ideally within one week of offer
- Suspension of recipient from deceased donor transplant list - at discretion of implanting centre and recipient
- Transport of kidney arranged – units liaise with UK Transplant
- Final crossmatch tests – according to agreed protocol
- Transplant operation - with anonymity of both parties

# British Transplantation Society / UK Transplant

## Arrangements for Altruistic Non-Directed Living Kidney Donation

### Donor Assessment

The donor must be assessed using a protocol based upon British Transplantation Society / Renal Association guidelines (UK Guidelines for Living Donor Kidney Transplantation available at [www.bts.org.uk/Forms/Guidelines\\_complete\\_Oct05.pdf](http://www.bts.org.uk/Forms/Guidelines_complete_Oct05.pdf)).

It is essential that all medical, surgical, psychiatric and psychological assessments necessary to ensure fitness to donate have been completed. Early mental health assessment is recommended to ensure there is no relevant psychiatric or psychological illness, to establish competence to consent and to explore motivation.

The clinician responsible for the donor should ensure that the donor has been given and has read and understood the HTA leaflet, Information about living-donor transplants<sup>1</sup>.

As part of the counselling it would be appropriate to emphasise that confidentiality of the donor would be respected. However, when such innovative procedures are taking place it is very difficult to avoid press interest (whatever efforts are made to preserve confidentiality) and the donor would need to be warned about that potential.

The HTA and UKT have relevant media policies that are continuously under review. General media implications or a specific case can be discussed by contacting the press office of the Human Tissue Authority on 0207 211 3400 or UK Transplant on 0117 975 7475 or 7477 or [pressoffice@uktransplant.nhs.uk](mailto:pressoffice@uktransplant.nhs.uk).

### Approval process via local Independent Assessor & HTA panel

A written referral is required from the clinician responsible for the donor to an accredited Independent Assessor (IA).

Details of the information required in the referral are provided in the HTA document '*Guidance for transplant teams and Independent Assessors*' which can be downloaded from

[http://www.hta.gov.uk/transplantation/organ\\_donation/independent\\_assessors.cfm](http://www.hta.gov.uk/transplantation/organ_donation/independent_assessors.cfm)

The written referral should be sent to the IA with a copy of the psychiatric report and form HTA IT (DC) where a translator has been used. The referral should include email contact details of the clinician responsible for the donor and the living donor coordinator. This is to ensure that both the donor clinician and living donor coordinator can be informed of the HTA's decision.

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<sup>1</sup> [http://www.hta.gov.uk/db/documents/Living-donor\\_transplants\\_leaflet\\_\(amended\\_final\).pdf](http://www.hta.gov.uk/db/documents/Living-donor_transplants_leaflet_(amended_final).pdf)

The referral can be written by a living donor coordinator, provided the name of the registered medical practitioner who has explained the procedure and the risks involved is specified.

The IA should not be the same person as the one who performs the medical, surgical or psychiatric assessment.

The IA sees the donor to assess whether the relevant HTA requirements have been met. The IA then completes a report of the interview and sends it to the HTA. This report will contain the IA's recommendation as to whether they believe, based on all of the available evidence, that the donation should proceed. A letter confirming this has been done is sent to the clinician responsible for the donor.

A HTA panel considers the report and makes a final decision. This decision is communicated to the IA, living donor coordinator and clinician responsible for the donor, using the HTA reference number automatically generated upon submission of the report to the HTA.

If approval is given, living donor transplantation must go ahead within six months, otherwise an updated report from an IA will be required.

### **Donor registration with UK Transplant**

Following HTA approval, the donor must be registered with UK Transplant using the appropriate form ('Altruistic Non-directed Living Kidney Donor Information' (K-LIV-AND)), available by emailing [forms@uktransplant.nhs.uk](mailto:forms@uktransplant.nhs.uk).

### **Donor organ allocation**

After receipt and validation of the donor's details, the UK Transplant Duty Office will carry out a matching run using the current allocation algorithm for deceased heartbeating donor renal transplant allocation<sup>2</sup>. This will be done within 2 days of data validation. The Duty Office will inform clinicians responsible for care of the first choice recipient, as they would for a deceased heartbeating donor organ offer. The Duty Office facilitates contact between the donor work-up team and the clinicians responsible for recipient.

### **Crossmatch test**

The crossmatch between donor and recipient should follow the protocol of the recipient's transplanting unit and laboratory, and should be organised as soon as practicable, ideally within one week of offer.

If the crossmatch test shows that the transplant can proceed, the date for surgery can be agreed.

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<sup>2</sup> [http://www.uktransplant.org.uk/ukt/about\\_transplants/organ\\_allocation/kidney\\_\(renal\)/kidney\\_\(renal\).jsp](http://www.uktransplant.org.uk/ukt/about_transplants/organ_allocation/kidney_(renal)/kidney_(renal).jsp)

## **Suspension of recipient from deceased donor list**

The decision about when to suspend the recipient from the deceased donor transplant list should be made by the implanting centre in conjunction with the recipient. The proposed date for surgery and any change to the recipient's waiting list status must be notified to UK Transplant as soon as possible.

## **Transport of kidney arranged**

The transplant units involved should liaise in advance with the UK Transplant Duty Office about arrangements for the operation, so that the Duty Office can organise prompt transfer of the donated kidney to the recipient's transplanting centre as required.

## **Final crossmatch test**

Units should arrange for final crossmatch tests according to an agreed protocol.

## **Transplant operation**

If for any reason the planned transplant does not proceed, UK Transplant should be notified of the reason. If appropriate, a new matching run will be carried out to identify an alternative recipient.

Retrieval surgery would usually take place in the unit that performed the donor work-up, although alternative arrangements can be made with the agreement of all those concerned.

Once the donor and recipient operations have been performed, the clinician responsible for the recipient completes the HTA (B) form, which is sent to UKT, and the transplant team informs the IA.

The recipient's Primary Care Trust should reimburse the unit performing the work-up and retrieval, in line with recommendations submitted to the Department of Health.

Anonymity of the donor and recipient should be preserved. Post surgery any communication between donor and recipient should be negotiated by transplant coordinators, respecting the wishes of both parties, in the way that sometimes occurs between families of deceased donors and organ recipients.

The HTA's '*Guidance for transplant teams and Independent Assessors*' can be downloaded from:

[http://www.hta.gov.uk/transplantation/organ\\_donation/independent\\_assessors.cfm](http://www.hta.gov.uk/transplantation/organ_donation/independent_assessors.cfm)