



INTRODUCTION

The Living Bank in 2009 established The Living Donor Bank which will address an urgent need for living kidney donors. Due to the aging population, soaring obesity rate and resulting diabetes and high blood pressure, the U.S. is experiencing an alarming spike in kidney failure.

Of the more than 103,000 people on the national organ waiting list, approximately 85,000 need a kidney. Although minorities donate in proportion to their share of the population, their transplant need is greater due to kidney failure related to diabetes and hypertension.

Every day, patients with kidney failure die waiting for a transplant. In many cases, a willing donor, usually a family member, is unable to donate due to incompatibility. Estimates are that this occurs in one-third of the cases. According to McCune, et al, in a study at the South-Eastern Organ Procurement Foundation, 81.62% of living donors came from family, either by blood or marriage.

The average living donor kidney functions for 15.5 years while a deceased donor kidney typically lasts half as long. The issues involved in living donation are unique and involve a complex interaction of the recipient, donor and their families. The Living Donor Bank assists in making the process a successful one.

BACKGROUND

The new frontier in organ donation is living donation. Medical advances have created the possibility for every person waiting for a kidney transplant to receive a kidney from another person. However, the gap between donors and need continues to grow. Scientific studies show that living donors have the same life expectancy as anyone else.

In keeping with the history of The Living Bank, The Living Donor Bank started with seed money from the Houston philanthropic community, in particular the Healthcare and Nursing Education Foundation.

The Living Donor Bank Mission is to:

- Educate about living donation and support living donors;
- Assist potential recipients to search for a living donor;
- Educate about paired donations and kidney chains; and
- Provide assistance with travel expenses to qualified living donors

The following information will help you consider each decision you must make regarding becoming a living donor. Along with your Living Donor Bank counselor, you learn important facts about kidney donation and discuss them in the context of each step of the living donation process to be sure it is right for you. This prepares you to enter the transplant center and proceed with the actual process of kidney donation.

Assistance from The Living Donor Bank continues beyond donation in the form of supportive counseling and living donor support groups.

The following information will help determine whether or not a person can meet other more specific conditions for donation. Anyone who does meet the conditions discussed below and wishes to consider living donation further may contact:

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1-800-528-2971

HEALTH

Your physical health status prior to donation is very important

1. You must have a healthy weight as measured by your “Body Mass Index.”
2. You must have healthy blood pressure (no hypertension).
3. You must be free from chronic infection and other chronic illnesses.
4. Your kidney function must be normal (no kidney disease).
5. Your blood sugar levels must be in a healthy range (no diabetes).
6. You have not had cancer for more than five years.

Your mental health status must be good also. This means that:

1. You understand the risks and complications associated with being a living donor.
2. You feel free to say “yes” or “no” to becoming a donor (and you may change your mind at any point in the donation process).

You should have the support of your family and close friends

If you are willing to be a living donor, you do not have to match the recipient whom you wish to receive your kidney. You may choose to participate in a “paired donation” or a “donor chain.” There are certain health risks that come with any kind of surgery. You will be told about these at the hospital as you sign permission forms.

Kidney donation means having surgery. You will be given anesthesia, or put to sleep with medication. In an operating room, the surgeon will make an incision or opening in your abdomen and, in most cases, using laparoscopic instruments, will remove your kidney. The kidney will be taken to the person who is waiting for the transplant. The kidney will be connected to that person’s blood supply in a special surgical procedure.

AFTER SURGERY:

A kidney donor usually has one abdominal incision approximately 3-inches long and two smaller ones near the rib cage. You will remain in the hospital for several days depending on what your doctor orders. After leaving the hospital you will continue to recover at home. There will be discomfort from the surgery. You will be extra tired or fatigued for at least one month. Be sure to ask the professionals at the hospital about your recovery process.

Important! For the rest of your life:

After a kidney donation, you must keep yourself very healthy. You must maintain a healthy weight and be careful to avoid risk factors such as high blood pressure and diabetes. Good health includes eating well and exercising as well as having regular check ups. If you hate going to the doctor, think twice about donating your kidney. If you have good health habits now, all you have to do is keep up the good work. If you don’t have good health habits now, what makes you think you will change after donating a kidney?

This is a serious question that needs to be resolved, and we are here to assist you.

FINANCIAL CONCERNS

A person may **NOT** benefit monetarily from donating an organ; in other words, you may not sell an organ nor be paid for donating one.

PRIOR TO DONATION

You may be asked to have your family doctor prepare a report on your general health. All testing for actual donation plus all other expenses through the donation will be paid by the recipient's medical insurance or Medicare/Medicaid.

AFTER DONATION

Time off work:

Expenses associated with being off work during your surgery and recovery are your responsibility. Recovery usually takes several weeks and occasionally longer if there are any complications. If your job is strenuous you will also need to take additional recovery time. More rest than usual will be required for at least one month after donation.

Medical check ups:

You will need yearly medical check ups following donation. Check ups will include blood tests that show how well your kidney is working. *This is very important for you.*

Insurance coverage:

Check your health insurance policy to verify that your coverage will not be affected by a kidney donation. Some carriers consider kidney donations a health risk and will exclude you from coverage. This may change over time, but currently you must check with your insurance company to ensure you will not lose medical coverage if you donate. Life insurance may also be affected by organ donation so consider purchasing what you need prior to donation.

Travel and family:

Your recipient will be responsible for travel and family expenses as well as preparations if you donate away from home. There are several sources of help for such expenses, but it is up to your recipient to make arrangements for what you need. The Living Bank will provide information regarding travel and family support funds. Every organization has a process to follow when applying for funds, so discuss this with your recipient as soon as possible.

TESTING

There are many types of medical tests that a donor must complete. First of all, a donor must have his or her personal physician check blood pressure, blood sugar levels and other general health indicators. The personal physician then provides a letter to the transplant center stating that the donor is cleared to move forward with other testing required for donation.

Each transplant center has a process for donor testing. In general, testing takes several days. Some centers do it on an outpatient basis, some on an inpatient basis. In most cases, you will be educated and tested at the transplant center of your recipient (unless other arrangements are made). You should be aware that you will not be allowed to donate a kidney if you are not a suitable candidate for any reason. After all testing is complete to determine that you are in fact healthy enough to donate, your case will be presented to a medical review board. This team of professionals at the transplant center has the final say. However, even after being accepted as a living donor, you retain the right to opt-out of the process at the time.

WORD TO THE WISE

There are certain situations in which potential donors should think long and hard about choosing to donate, and in which their doctors and families should help guide decisions.

Being young

A person's health changes as they age. Doctors (and parents) do not always allow teenagers to donate a kidney for this reason.

Women who have not yet had children

Pregnancy is hard on the body. Most doctors ask women who have not yet had children to complete their families first and then consider kidney donation.

Persons with poor health habits

If you donate a kidney, you have to take proper care of yourself throughout the remainder of your life. Good health habits, that we all should embrace, such as proper diet and exercise plus regular check ups with your doctor will be important in determining your eligibility to donate.

Persons who have very intense emotion invested in being a donor

Very strong emotions influence a person's ability to make balanced decisions. Worry for a loved one or a strong desire to do something "good" or to be a hero can often lead to poor decision making. Discuss any intense emotions with the Living Donor Advocate.

DONOR-RECIPIENT MATCHING

If you are willing to be a living donor, *you do not actually have to match the person to whom you initially want to give your kidney*, but you and your designated recipient have to be willing to be part of a “**paired donation**” or a “**donor chain**.”

Paired Donation or Donor Chains

Thanks to advances in transplant technology and practices, persons across the United States are participating in paired donations and donor chains. Simply put, if a donor and recipient do not match, their data is entered into a sophisticated computer program that will identify other donor-recipients as well as donors without designated recipients and match up new donor-recipient pairs. In other words, if Sam wants Susanna to have a kidney but they do not match, then the computer will find someone that Sam does match, let's say Joel who has a donor named Jana who will match Susanna. Thus, these two pairs have surgery in the same place at the same time, and Sam gives his kidney to Joel and Jana gives her kidney to Susanna. That is a paired donation. If more recipients and donors are involved, then a chain forms.

You can visit the [National Alliance for Paired Donation](#) Web site to learn more.

VIDEOS & PRINTED RESOURCES

A picture is worth a thousand words. Kidney donation on **YOU TUBE**.

Living Donor and Recipient www.youtube.com/watch?v=IGz0Bg-Zw9o

Paired Kidney Donation www.youtube.com/watch?v=mwaoXaOnnZM

African American Organ Donation www.youtube.com/watch?v=SZf042GTDVs

Living Donor Kidney Transplantation www.youtube.com/watch?v=JMMMg1FwVRE

Kidney Donation – Living with One Kidney www.youtube.com/watch?v=p2RCc9q1wF4

Kidney Donor Program – What Do You Know? www.youtube.com/watch?v=SvshNz80uZE

Living Kidney Donor (Part 1) www.youtube.com/watch?v=wOlqV2iN9IU

Living Kidney Donor (Part 2) www.youtube.com/watch?v=5kZtWv-EvJY

READ:

One Kidney is More Than Enough (scienceline.org/2009/03/04)

WEB SITES:

www.kidneyregistry.org/index.php

www.wishuponahero.org/Wish_Upon_a_Hero.html

www.organdonor.gov - The U.S. government

www.unos.org - The United Network for Organ Sharing

www.shareyourlife.org - Donate Life

www.MatchingDonors.com

www.livingdonorsonline.org/kidney/kidney.htm

www.transplantbuddies.org

www.kidney.org/transplantation/livingdonor/info.cfm

www.livingdonors.org

www.livingdonorassistance.org

www.exploretransplant.org

www.transplantliving.org

www.a-s-t.org

www.kidney.org

www.paireddonationnetwork.org

www.healthytransplant.com

www.ast.org/researcheducation/patient.aspx

www.transplantethics.com

www.donatelife.net

www.texasransplant.org

www.uofmtransplant.org/adult/kidneytranspalnt/livingdonorblog/index.asp?p=1&t=95



The Living Donor BANK

QUESTIONS AND ANSWERS

To find out how you can assist this program in your community, call 800-528-2971.

Q What is living donation?

Living donation occurs when a living person agrees to donate an organ – or part of an organ – for transplantation to save a life. Living donors are often:

- Family members (living related donors)
- Someone who is emotionally related to the recipient such as a good friend or in-law (living unrelated donor)
- A stranger (a nondirected donor – also called an altruistic donor)

Q What role does The Living Donor Bank (TLDB) play in living donation?

TLDB encourages potential living donors to come forward and sign a donor form. TLDB then provides free counseling to the donor and recipient and coordinates with transplant centers and the United Network for Organ Sharing (UNOS) waiting list to locate a suitable recipient. Potential living donors meet with a Living Donor Advocate to ensure they are fully informed and educated before making a decision to donate.

Q What happens after I sign the donor form as a living donor?

TLDB will contact you to arrange an intake and schedule your meeting with our Living Donor Advocate. If you wish to follow through with the donation, the Living Donor Advocate will help you contact an area transplant program to arrange testing for blood and tissue matching and to locate a recipient, if yours is an altruistic donation.

Q How can I be a living donor?

You must be between 18 and 65 years of age and in good health, have normal kidney function and anatomy. The donor and recipient must have compatible blood types. A physical exam and additional testing will be required to check for cross matching and tissue type. Living donors also will be asked to participate in a psychological examination and counseling to ensure that the decision is voluntary and free from pressure. Your donation will impact all members of your family and should not be undertaken lightly.

Q What organs can a living donor give?

Kidneys are the most needed organs. A person can function well on just one kidney. Parts of other organs that can be used from living donors are the lung, liver and pancreas.

Q What are the advantages of living donation over non-living donation?

Transplants from living donors (as opposed to non-living donors) have several advantages:

- A majority of living donor transplants are done between family members who are genetically similar; this reduces rejection possibilities.
- A kidney from a living donor functions immediately. Some kidneys from non-living donors may require the patient to be on dialysis until the new kidney begins to function.
- The transplant can take place at a convenient time for donor and recipient.
- A living donor organ last almost twice as long as a deceased donor organ.

QUESTIONS AND ANSWERS continued

Q What about expenses?

The Living Bank and other organizations may underwrite some of the travel and accommodation expenses. Donors are never financially compensated. Under federal law, it is illegal to receive money or gifts in exchange for organ donation. Donors can be reimbursed for travel expenses and time lost from work. Many employers will allow an employee to take paid leave. The federal law, the Family and Medical Leave Act (FMLA), will provide unpaid leave. The cost of the living donor's evaluation, testing and surgery are generally paid for by the recipient's Medicaid or private health insurance. Some follow-up expenses may not be covered, so it is important to discuss these issues with your Living Donor Advocate and the transplant center.

Q How is the surgery done?

Surgery is either open surgery or laparoscopic. The transplant team will decide which will work in your case. A general anesthetic is administered. After surgery, the donor's remaining kidney should immediately take over the work of two kidneys.

Q What are the risks?

All major surgeries involve some level of risk. The majority of complications from living donation are minor such as temporary pain and fatigue. Information regarding risk of donation and surgery will be part of the counseling process prior to surgery, so the donor will be fully informed.

Q Where can I find additional information or reading material?

- The National Kidney Foundation Web site: www.kidney.org/transplantation/LivingDonors/index.cfm
- The United Network for Organ Sharing: www.unos.org
- Additional information about donation and transplantation: www.transplantliving.org/livingdonation