

# SRTR Living Donor Collective Update

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### Disclosures

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# First Successful Living Donation in 1954

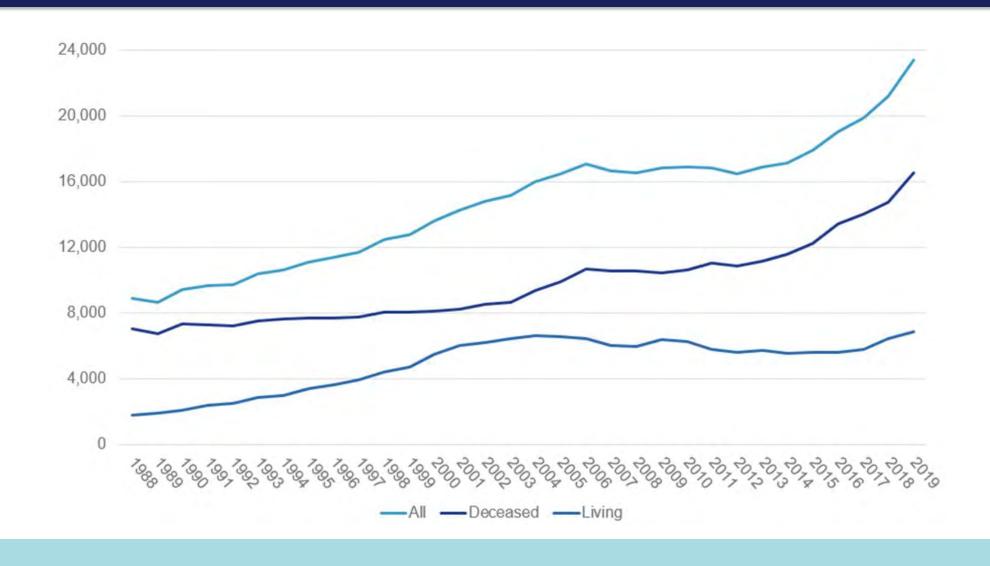


Ronald Herrick (right) donated a kidney to his twin brother when they were 23 years old.



Ronald developed ESKD treated with hemodialysis and died 56 years after donation (age 79) from complications of heart disease.

#### **COLLECTIVE** Trends in Deceased and LD Kidney Transplants





## Why do we need the Living Donor Collective?

- For LD candidates: reduce barriers to access
- For programs: share best practices and efficiencies
- For everyone: better understand long-term risks



# VING DONOR Living Donor Collective Timeline

- 2018 Pilot (10 kidney and 6 liver) programs defined registration data to be collected
- 2019 Pilot data were collected and refined
- 2020 Pilot ended, and HRSA called for expansion to include all living donor candidates in the US



# NG DONOR Living Donor Collective Data

- Include all candidates who undergo evaluation
- Accept that numbers eliminated by pre-screening will vary
- Collect reasons candidates do not donate
- Follow candidates and donors by linkages and surveys
- Compare candidates donating vs. not donating over time

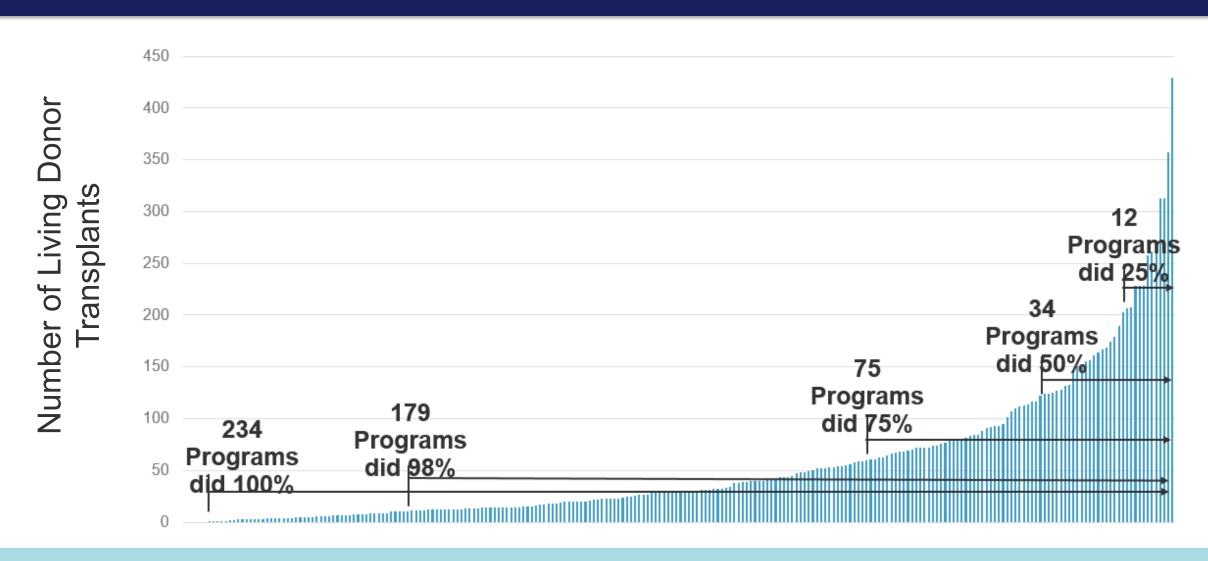


# COLLECTIVE Kidney Program Expansion Plan

- Initially add ~6 programs per year
- Add largest programs first
- Focus efforts on electronic interfaces
- Include all programs after 2-3 years



#### LD Kidney Transplants at 240 Programs 2018-19



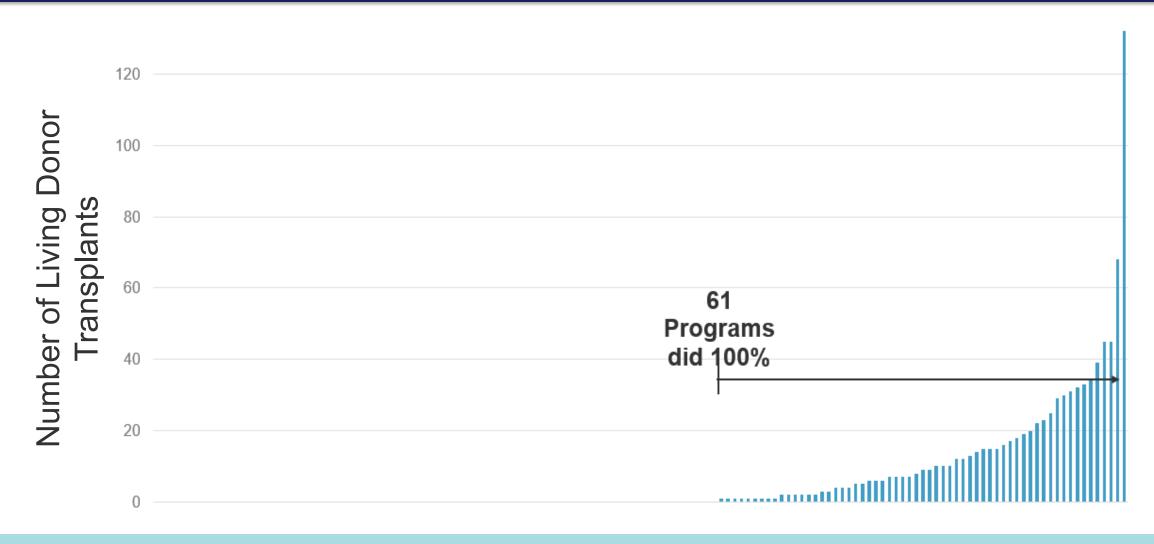


# Liver Program Expansion Plan

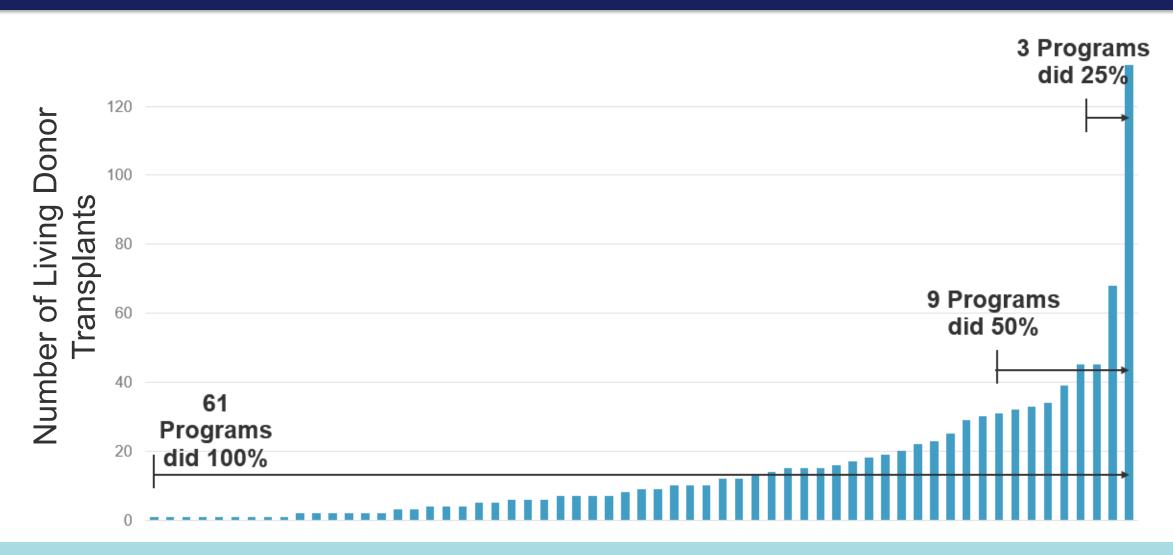
- Initially add ~4 programs per year
- Add largest programs first
- Focus efforts on electronic interfaces
- Include all programs after 2-3 years



# COLLECTIVE LD Liver Transplants at 145 Programs 2018-19



#### LD Liver Transplants at 61 Programs 2018-19





## COLLECTIVE Why add programs one by one and not all at once?

- Allows us to learn and adapt the datacollection process:
  - Define and refine data elements
  - Avoid duplicate data entry with OPTN
  - Learn how to use electronic interfaces



# Conclusions

- Living donations have not kept pace with the need
- Lack of a better understanding of long-term outcomes may be limiting living donations
- Only a comprehensive registry can provide adequate information
- The LDC pilot successfully registered candidates and donors
- Now is the time to move toward including all programs
- We need the transplant community behind this effort

