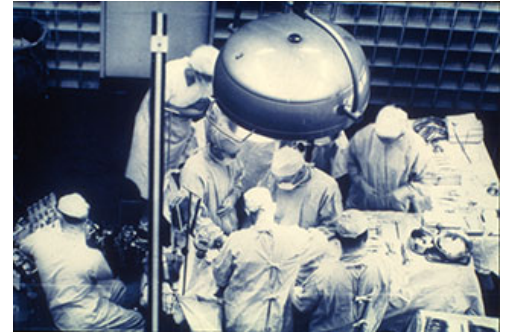




TRANSPLANT NEPHROLOGISTS AND SURGEONS: DO MORE TO INCREASE LIVING DONATION

(New York, NY) October 1, 2014 – Transplant nephrologists and surgeons overwhelmingly believe there aren't enough reimbursement and compensation opportunities available for living kidney donors, according to a study published in the October issue of the National Kidney Foundation's *American Journal of Kidney Diseases*.



Interviews with 110 transplant nephrologists and surgeons from 12 different countries revealed strong support for full reimbursement of out-of-pocket expenses such as medical bills, accommodation, transportation and childcare costs associated with organ donation. Compensation in the form of payment for lost income and inconvenience was also agreeable to many interviewees, as long as payments didn't provide an undue financial benefit to a donor.

Strategies to increase the number of living donors vary widely around the world. Currently, payment for donation of any kind is prohibited in many countries, and those with reimbursement policies in place are structured in a way that can be confusing and difficult to navigate, researchers stated.

"Any talk of reimbursement, compensation or incentivization for living donors brings up a variety of complex, multi-faceted issues," said study author Allison Tong, PhD, of the Centre for Transplant and Renal Research at Westmead Hospital in Australia. "Transplant surgeons and nephrologists have a direct professional role in living kidney donation and their experiences can provide highly relevant insight into ongoing living donation debates."

In the United States, there are over 100,000 people waiting for a lifesaving kidney transplant.

However, in 2013, only 16,896 kidney transplants took place, 5,733 of which came from living donors.

The most surprising responses, according to researchers, were from a minority of transplant nephrologists and surgeons who said they agreed, in principle, with a limited, government-regulated trial of financial incentives for living kidney donation. However, most interviewees stated that financial incentives for kidney donors would be fraught with ethical, moral, socio-economic and feasibility issues. Others noted that financial incentives could potentially jeopardize altruistic-based donation systems.

“This study clearly shows that transplant professionals are frustrated with the waiting period patients endure for organs, especially for kidneys,” said Thomas Manley, director of scientific activities at the National Kidney Foundation. “But the underlying theme is one that we have been advocating for many years – we need to reduce the disincentives associated with living donation, not only in the United States, but around the world.”

Study participants also expressed interest in piloting and studying the effects of tax breaks, discounted or free insurance premiums, life insurance and wait-list priority for donors as a means to strengthen living donor systems around the world.

Dr. Tong said the study’s findings will help inform future government policies that will protect and promote ethical living kidney donation and the removal of disincentives for potential donors.

Transplant Facts from the National Kidney Foundation

- There are over 122,000 people waiting for lifesaving organ transplants in the U.S. Of these, more than 100,000 await kidney transplants.
- Nearly 3,000 new patients are added to the kidney waiting list each month.
- 12 people die each day while waiting for a life-saving kidney transplant.
- Every 14 minutes someone is added to the kidney transplant list.

The **National Kidney Foundation (NKF)** is the leading organization in the U.S. dedicated to the awareness, prevention and treatment of kidney disease for hundreds of thousands of healthcare professionals, millions of patients and their families, and tens of millions of Americans at risk. For more information, visit www.kidney.org (<http://www.kidney.org/>).

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