How much does living donation cost? Who pays?
The cost of the donation, which includes laboratory, x-ray and doctors’ and hospital charges, are paid by Medicare or the recipient’s insurance. There is no cost to the donor. However, the donor usually is not paid for time off from work. Some employers may have a living donor leave policy or will allow this time to be taken as sick leave.

Are transplants from living donors always successful?
It is important to realize that, although living kidney transplants are highly successful, problems may occur. Sometimes, the kidney is lost to rejection, or may fail because, the original disease that caused kidney failure may come back in the recipient.

What if I have more questions?
If you have additional questions, you should speak to a transplant coordinator at your nearest transplant center. In Fairfax County, it is the Inova Transplant Center of Inova Fairfax Hospital at (703)-970-3200 or at www.inova.org.

You can also get information about living kidney donation by contacting the Washington Regional Transplant Community at 1-866-be-a-Donor or www.beadonor.org.

The National Kidney Foundation of the National Capital Area can be reached at (202) 244-7900 or www.kidneywdc.org. The National Kidney Foundation (NKF) also has a site about living donation: www.livingdonors.org or call 1 (800) 222-9010.

The Fairfax County Commission on Organ and Tissue Donation and Transplantation can be reached at (703) 246-8664 or you may visit its web site at www.fairfaxcounty.gov/service/hd/otintro.htm.

Other resources include:
- Save 7 Lives (Virginia’s Online Donor Registry) www.save7lives.org
- HHS Dept. of Transplantation www.organdonor.gov
- United Network for Organ Sharing www.unos.org
- The Coalition on Donation www.donatelife.net
- Gift of a Lifetime www.organtransplants.org

What is the Transplant Center at Inova Fairfax Hospital?
The mission of Inova Health System is to provide quality care and to improve the health of the diverse communities it serves. The Transplant Center at Inova Fairfax Hospital is the most active transplant center in the Washington, DC area. In 2005, 84 persons received kidney transplants at Inova Fairfax Hospital.

What is the Washington Regional Transplant Community (WRTC)?
WRTC is the federally designated organ procurement organization for the Washington metropolitan area, serving Northern Virginia, the District of Columbia and Suburban Maryland. WRTC responds to potential organ, tissue and eye donors at more than 44 health care institutions and six area transplant centers. In May 2000, the Washington Regional Voluntary Living Kidney Donor Program was started with its goal to increase living kidney donations thus decrease the number of deaths related to kidney failure in D.C.

What is the National Kidney Foundation (NKF)?
More than 20 million Americans have some form of kidney or urologic disease. Millions more are at risk. The NKF, a major voluntary health organization, is working to find the answers through prevention, treatment and cure. Through its affiliates nationwide, the Foundation conducts programs in research, professional education, patient and community services, public education and organ donation. The work of NKF is funded entirely by public donations. The NKF of the National Capital Area serves Northern Virginia, Suburban Maryland, and the District of Columbia.

What is the Fairfax County Commission on Organ and Tissue Donation and Transplantation?
The Fairfax County Commission on Organ and Tissue Donation and Transplantation was created by the Fairfax County Board of Supervisors in 1994. The mission of this citizen advisory group is to increase awareness of organ and tissue donation and transplantation through education and coordination of community resources.

For additional copies or to request this information in an alternate format, call
703-246-2411 or TTY 703-591-6434

ANSWERING YOUR QUESTIONS ABOUT LIVING DONATION

SI USTED DESEA INFORMACION EN ESPAÑOL,
ACERCA DE LA “DONACION DE ORGANOS EN VIDA,” SIRVASE LLAMAR A INOVA FAIRFAX TRANSPLANT 703-970-3200
or WRTC 1-866-232-3666

Basic text courtesy of the National Kidney Foundation (NKF).
Updated by the Inova Transplant Center at Fairfax Hospital, Washington Regional Transplant Community, NKF and the Fairfax County Commission on Organ and Tissue Donation and Transplantation, May, 2008.
In the Washington DC area, two young women were undergoing dialysis while being evaluated for kidney transplant. During the evaluation process both women were told the median waiting time for a kidney transplant is 3 years. And, although both husbands were willing to donate a kidney to their wives, neither were matches. With the help of transplant coordinators and physicians at the Inova Fairfax Hospital Transplant Center, it was determined that each husband was a match for the other man’s wife. This is just one example of a beautiful and selfless gift from living donors who gave a loved one, friend, or stranger the ultimate gift of a renewed chance at life.

What is living donation?

Living donation occurs when a living person donates an organ or part of an organ to be transplanted into a loved one in need. The living donor is often a relative, such as a parent, child, or sibling. A living donor can also be a co-worker, spouse, friend, church member, or someone the recipient does not know.

What organs can come from living donors?

The organ most commonly given by a living donor is the kidney. People usually have two kidneys, and one is all that is needed to live a normal life. Parts of other organs including the lung, liver and pancreas have also been transplanted from living donors.

What are the advantages of living donation?

Living kidney transplantation has a number of advantages compared with kidney transplantation from a person who has died (deceased donor). Third, kidneys that come from living donors begin to function immediately after the transplant, while kidneys from deceased donors may take weeks before they begin to function normally. Fourth, recipients of living donations have increased survival rates (approximately 94% after 1 year compared to 90% for deceased donor transplants).

What determines who can become a living donor?

Ideal living donors are usually between 18 and 60 years of age and close relatives of the intended recipient. The prospective donor must have a compatible blood and tissue type as determined by tests of the donor and recipient. The donor is carefully evaluated by physical examination, tests to assure normal kidney function and studies to show the presence of two normal kidneys. Absence of hereditary diseases affecting close family donors should also be addressed. Psychological evaluation may also be recommended. The decision about whether to accept the donor is then made by the health care team at the transplant center.

Can someone who is not a close relative be a living donor?

Absolutely. A living unrelated donor is usually someone who has emotional ties to the recipient, such as a friend or colleague. With the long list of patients waiting to receive a kidney, however, more and more programs are being developed that also provide living kidney donation among strangers. The Washington Regional Voluntary Living Kidney Donor Program is a partnership between the Washington Regional Transplant Community (WRTC) and seven local transplant centers (including Inova Fairfax Hospital) gives volunteers the option to donate a kidney anonymously to whoever best matches their blood type and tissue type. It is possible that neither party will ever know the name of the other person. Living unrelated kidney transplantation has been quite successful in most cases.

If I want to donate a kidney to a relative, but my blood type doesn’t match, is there anything I can do?

If another pair of people with the same problem can be identified, it may be possible to perform a “paired exchange,” where each person donates to the other’s relative. The Washington Regional Voluntary Living Kidney Donor Program also offers a “list-paired exchange,” in which a relative who does not match his/her loved one’s blood type donates a kidney anonymously to whoever does match on the general waiting list. In return, the loved one is moved to the top of the waiting list and will receive the next available matching kidney.

For more information on this type of donation, call WRTC at 1-866-Be-A-Donor (1-866-232-3666).

How does living donation affect the donor?

Steady have shown that one kidney is enough to keep the body healthy by removing wastes and excess fluid from the blood. Living donation does not change life expectancy, and after recovery from the surgery, living donors can continue to lead normal lives. The usual recovery time after the surgery is short, and donors can generally resume their normal home and working lives within two to six weeks. As with any surgery, there are risks which potential living donors should discuss with their health care team.

Suppose someone decides against being a living donor.

A decision to become a living donor should be voluntary and free from internal or family pressures. Individuals have the right, after discussion and considering the facts, to decide that living donation is not for them. Likewise, individuals who have kidney failure have the right to decide that they do not want a transplant. The patient must live with the disease, and he or she alone has the right to decide what is to be done. That decision, as well as the prospective donor’s, must be respected.

What does the operation involve?

Once all the tests are completed, the donor and transplant operations are scheduled. Sometimes the donor and recipient are in adjacent operating rooms. The kidney is removed in a careful way and transplanted into the recipient. Laparoscopic surgery, in which a 2-3 inch-long incision and three point-size incisions are made in the donor’s abdomen, has greatly decreased post-operative pain and recovery time for the donor. The hospital stay for the donor is usually about 2-3 days after the operation. The donor may visit the doctor’s office or clinic to make sure the wound is healing well and that recovery is proceeding as expected. In general, no further treatments or office visits are needed.