



Live Kidney Donor Work Up – What Lies Beneath The Tip Of The Iceberg

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Background

The current study is an assessment of workload implications of live kidney donor assessment at a single centre in the UK.

Methods

Data was collected prospectively over 1 year (2012 – 2013).

The end-points were proceeding to donation or not and if not, why not.

All the donors were assessed as per an established protocol.

Results

122 potential donors were registered,

Only 18 went on to donate their kidney

Yielding a ratio of approximately 1 donor for every 6 screened (after excluding donors still on the work up pathway).

In 35%, live donor work ceased after preliminary telephone interview as the donor was medically unfit or had a BMI >40.

In 12.3% donation did not proceed because of medical co-morbidity including hypertension, perceived cardiac risk and history of malignancy or urological problems.

6.5% donors withdrew during assessment.

In 6.5% donation was suspended as the recipient became unfit and in 2% the recipient received a DCD kidney from the national pool.

In 1.63% donation did not proceed as the recipients renal function remained stable and 1 recipient declined to accept the live donation.

20% (24) potential donors were being worked up at the conclusion of the study.

Costs

DESCRIPTION	ANNUAL COST GBP
Live Donor Coordinator Salaries	85896.00
Clinic HCA	21231.00
Specialist Surgeon Consultation	30385.00
Physician Consultation	7530.00
Admn. / typing & clerical	8512.00
Imaging costs	39628.00
Blood work / virology / tissue typing	249068.96
TOTAL COST over 79 potential donors	442250.96
Cost per actual donation	24569.49

Conclusions

A significant proportion (31%) of unnecessary clinic assessments are avoided by nurse led telephone screening.

Despite this donor medical issues are the commonest reason for non-progression to Donation.

A significant number of donations fail to proceed because of recipient factors and addressing these can potentially reduce the cost of unnecessary or too early assessments that then need repeating.

References

Provider to Provider services 2012 – 2013 tariff
University College London Foundation NHS trust

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