

# First kidney paired donor transplants performed

December 10 2010

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Kathy Niedzwiecki of Pelham, NH, and Ken Crowder of St. Louis are experiencing renewed life and health thanks to the generosity of two living kidney donors.

Cathy Richard of Henniker, NH, had planned to donate to her sister-in-law, Ms. Niedzwiecki, and Rebecca Burkes of St. Louis had intended to be a living donor for her fiancé, Mr. Crowder – only to find that both were medically incompatible with their intended recipient. But in the first paired donation arranged through a national pilot program of the Organ Procurement and Transplantation Network (OPTN), Ms. Burkes was able to donate to Ms. Niedzwiecki and Ms. Richard became a donor for Mr. Crowder.

"Paired donation is helping the transplant community help people who otherwise could not get a living donor transplant. We're proud to be able to coordinate these for the first time using a national network for potential matches among 77 participating transplant programs," said OPTN/UNOS president Charles Alexander, RN, MSN, MBA. United Network for Organ Sharing (UNOS) operates the OPTN under federal contract.

The donor recovery and transplant operations all took place Monday, December 6. Ms. Niedzwiecki was transplanted at Dartmouth-Hitchcock Medical Center, and Mr. Crowder received a transplant at Barnes-Jewish Medical Center in St. Louis. Ms. Richard underwent surgery at Dartmouth-Hitchcock, and Ms. Burkes donated her [kidney](#) at Barnes-

Jewish. The kidneys were preserved for transportation by the New England Organ Bank and Mid-America Transplant Services; Angel Flight, Inc. also provided air transportation to and from Dartmouth-Hitchcock.

Dr. David A. Axelrod, section chief of transplantation surgery at Dartmouth-Hitchcock, performed both the donor and transplant operations at his center. "We all realize that the shortage of donors is only getting worse," he commented. "One solution is to expand the accessibility to live donor transplants. The innovation here is an increasing pool of potential donor-recipient pairs. Expanding the database of willing and able live donors, at the local, regional, and national level through programs like this pilot, enables us to maximize access to this precious resource."

Drs. Surendra Shenoy and Jason Wellen performed the donor and recipient surgeries at Barnes-Jewish. "Paired kidney exchange programs have allowed for a significant increase in the number of patients that receive a living kidney transplant, therefore freeing up additional cadaveric kidneys for the 80,000 plus people on the national wait list," said Dr. Wellen, surgical director of the Washington University/Barnes-Jewish kidney and kidney/pancreas transplant program. "A nationally run paired exchange program will allow for many new donor/recipient matches to take place that would otherwise not have been available through smaller-run paired exchange programs."

The donors and recipients were paired according to the first computerized match run conducted by the OPTN in October 2010. Each transplant program participating in the pilot program submits detailed medical information on potential living donors and candidates to an affiliated coordinating center, which works directly with UNOS on administrative issues such as enrolling donor/recipient pairs, making logistical arrangements and entering data. The New England Program for

Kidney Exchange (NEPKE) was the coordinating center for Ms. Richard and Ms. Niedzwiecki; Johns Hopkins Hospital served as the coordinating center for Mr. Crowder and Ms. Burkes.

"We are extraordinarily grateful for the work of the coordinating centers, each of which also arranges kidney paired donations within its own network of transplant programs," said Mr. Alexander of the OPTN and UNOS. "The goal of the pilot project is to see whether combining the data of multiple centers and networks will generate successful matches that may not be found through one individual organization. The fact that these transplants occurred from the first match run suggests this will be true."

Future match runs will be conducted every four to five weeks with information on potential living donors and candidates supplied by pilot participants. Each [transplant](#) program will make individual medical decisions about accepting living donors or candidates and whether they qualify for matching through the pilot program. In addition, each program must document that potential living donors have undergone a rigorous medical screening and have provided detailed informed consent for donation and for potential participation in a national match run.

Provided by Dartmouth-Hitchcock Medical Center

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