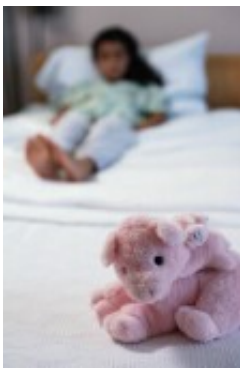


More kids getting donor organs, but gaps persist, study finds

May 22 2013, by Alan Mozes, Healthday Reporter



Researchers looked at whether change in donor criteria made a difference.

(HealthDay)—Over the last decade, the number of American children who die each year awaiting an organ donation dropped by more than half, new research reveals. And increasing numbers of children are receiving donor organs.

During that time, the overall pool of potential [organ donors](#) expanded to include not just patients who've experienced brain death but also those with a "circulatory determination of death."

But it's unclear how much that shift in donor criteria helps children waiting for transplants.

"There are a couple of bottom lines, the first being that there are simply

not enough donor organs for people on the [waiting list](#), whether they're children or not," said study lead author Dr. Jennifer Workman, a fellow in pediatric [critical care medicine](#) at the University of Utah School of Medicine in [Salt Lake City](#). "So we have to do anything we can as a medical community to chip away at the stark numbers.

"And in trying to get as many organ donors as possible, we have to think of who are the possible donor candidates," Workman added.

"Traditionally, it's been those who met brain death criteria. But if the family has a child or adult who has such severe injuries or is so severely ill that there is no way to make any recovery they may choose to withdraw life-support, regardless of whether or not there's brain death. And in that situation that patient can still be an organ donor, and some families may feel that participating in this process is appropriate and meaningful for them."

The study authors noted that regardless of trends, the overall picture for those currently awaiting an [organ donation](#) continues to be dire.

Currently, the waiting list for organ transplants exceeds 117,000 American adults and children. And although roughly 28,500 transplants took place in 2011, that same year 7,000 people died while waiting for an appropriate donor match.

Against that backdrop, many in the [medical community](#) have turned to the prospect of enlarging the donation pool by accepting organs from both pediatric and adult patients deemed to have experienced circulatory death, even in the absence of full brain death.

The researchers noted that donation after circulatory determination of death (DCDD) was actually the norm when [organ transplants](#) first came to the fore back in the 1950s and 1960s. "We didn't actually have [brain death](#) criteria until the 1980s," Workman said. "So when transplants first

became an option, DCDD was the only way to donate."

But with advances in medical technology, a shift got under way toward relying solely on organs sourced from patients who had lost all brain function, or to those who had lost both circulatory and respiratory function.

The pendulum started to swing back, however, in the 1990s in light of both growing recipient need and the wish on the part of family members of circulatory death patients to participate in the donation process.

In 2006, the Institute of Medicine, an independent panel that advises the federal government, encouraged medical facilities to develop and adopt guidelines outlining under what exact conditions such donations are to take place.

To explore how this may have affected the pool of young patients up to age 17 awaiting an organ, the study authors examined data collected by the Organ Procurement and Transplantation Network from 2001 through 2010.

By looking at the statistics covering all liver, kidney, heart, lung, pancreas and small bowel donations, the team found that just over 14,200 American children received an organ transplant in that time frame.

For the most part, the number of annual donations to children in need rose over the decade, from a low of 1,170 in 2001 to a high of 1,628 by 2009. However, there was a dip to 1,475 donations by 2010.

And while the number of pediatric donors dipped by 15 percent over the study time frame, more than two-thirds of donations to children were cases in which a child donor gave to a child recipient.

As had been the case in prior years, most organs given by child donors actually ended up being given to adult recipients.

Circulatory death donations to child recipients continue to be just a small fraction of the overall donation pool, the research team found. Just 31 such donations taking place in 2010, although that figure is way up from 2001, a year in which just a single such donation transpired.

The new findings appear in the June print issue of the journal *Pediatrics*.

On a decidedly positive note, Workman's team found that although the number of children on the transplant waiting list held steady throughout the study period, the number of children who died while awaiting a donation plummeted from a high of 262 in 2001 to 110 by 2010.

"So while this decline is great, from what we looked at we can't directly say that increasing DCDD donations has been the reason," Workman said. "But it seems logical to conclude that the more organs made available, the more it will help to relieve the waiting list strain. Even if these DCDD organs go to adults, it frees up other organs that might go to children. So everybody benefits."

Dr. Craig Lillehei, an associate professor in Harvard Medical School's department of surgery, and program director of Boston Children's Hospital's department of surgery, seconded the thought.

"I would totally agree with that," said Lillehei, who co-wrote an editorial accompanying Workman's study. "What we have is a big problem for both adults and [children](#). And it is absolutely right that increasing the availability of organs overall ultimately helps everybody."

More information: To learn more about organ donations, visit the [U.S. Department of Health and Human Services](#).

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