

# Availability of family and friends key factor in deciding organ transplant suitability

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This may sanction existing prejudices and widen inequalities in selection process, warn researchers

The availability of a supportive network of family and friends is a key factor in deciding on a person's suitability for an organ transplant, reveals research published online in the *Journal of Medical Ethics*.

But as this criterion is subjective, not grounded in evidence, and often not explicit, it may sanction existing prejudices and widen inequalities in the selection process, warn the researchers.

They base their findings on feedback from nearly 600 US organ transplant providers on the criteria influencing the selection process.

National guidelines stipulate the inclusion of subjective assessments of the extent of social support when considering an individual's suitability for an organ transplant, despite the dearth of evidence linking this factor with outcomes, point out the researchers. Potential candidates can be 'marked down' if their social support is deemed inadequate.

To find out how influential this criterion might be in the selection process for kidney transplant, they asked 584 transplant providers to choose between two pretend candidates, based on 7 factors.

These were: life expectancy with and without a transplant; quality of life after a transplant; time spent on the waiting list; extent of compliance

with medical advice/drug treatment; age; and availability of supportive friends/family.

Around half of the respondents were men (257, just over 52%) and nearly half (282, 48%) were involved in the psychological/social evaluation of suitability. Of these, two thirds were social workers and 29 per cent doctors.

The remaining half (302, 52%) comprised medical/surgical providers, most of whom (more than 71%) were involved in kidney transplants.

Most (just under 89%) respondents said they had used inadequate social support as one of several factors to help them decide on transplant suitability. And most (just over 86%) agreed that patients with inadequate support were viewed less favourably than those who had good social networks to draw on.

Most providers (71.5%) thought social support was important for ensuring the transplanted organ didn't go to waste, yet nearly one in four (24%) thought using this criterion was unfair. And more than four out of 10 (42.5%) didn't feel that confident applying it to the selection process.

Analysis of the choices for the pretend scenarios revealed that, overall, a candidate's life expectancy after a transplant, how well they complied with medical advice/treatment, and how well supported they were by family and friends were the most influential factors when deciding on suitability for the procedure.

Social support emerged as the second most important factor, with providers 68 per cent more likely to choose a candidate who had a good social network of friends/family over one who didn't.

"This finding is striking, given the limited evidence base confirming the

impact of social support on [transplant](#) outcomes and its potential for increasing disparities," write the researchers.

"Because reliance on social support is unpredictable, not evidence-based, and not always transparent, use of social [support](#) may contribute to unequal access to transplantation," they add.

And the lack of formal criteria on how to assess [social support](#) and its importance in the [selection process](#), "leaves this criterion increasingly susceptible to implicit bias and may also contribute to disparities," they say.

This is particularly important, given that racial and ethnic minorities, those on low incomes, and those living in rural areas are already less likely to be selected for an [organ transplant](#), while those with a mental illness or a history of substance misuse may be more socially isolated to begin with, they point out.

**More information:** How important is social support in determining patients' suitability for transplantation? Results from a National Survey of Transplant Clinicians, *Journal of Medical Ethics* (2018). [DOI: 10.1136/medethics-2017-104695](#)

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