Hep C–Positive Heart Transplants Not Tied to Change in 1-Year Survival Rate

An analysis of nearly 8,000 heart transplants found that whether or not the donor had hepatitis C, 90% of recipients survived one year.

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Receiving a heart transplant from a donor who had hepatitis C virus (HCV) is associated with no difference in the likelihood of surviving for one year after the operation.

Given the rise of highly effective and tolerable direct-acting antiviral (DAA) medications to treat hepatitis C over the past six years, transplant recipients who do not have HCV can, according to numerous studies, safely receive an organ from a person who had the virus. The recipients can receive DAA treatment following their transplant and clear the virus.

Arman Kilic, MD, of the University of Pittsburgh Medical Center, and colleagues analyzed data from the United Network for Organ Sharing regarding 7,889 adults at 128 medical centers who received a heart transplant between January 2016 and December 2018. They published their findings in the Journal of the American Heart Association.

A total of 343 (4%) of those transplants were from donors who had HCV. These donors were more likely to be older, white and have died of a drug overdose.

Ninety percent of those who received a heart from a donor who had HCV survived one year after their transplant surgery, compared with 91% of those whose donor was HCV negative. The difference between these two figures was not statistically significant, meaning it could have been driven by chance.

A recent smaller study conducted in Tennessee among 80 people reached similar conclusions about the safety of transplanting HCV-positive hearts.

One year after surgery, participants in the new study also had comparable rates of graft rejection, new use of dialysis, and stroke and a similar length of postoperative hospitalization between the two study groups.

“Wider implementation of protocols for using HCV-positive donors and an assessment of longer-term outcomes, including seroconversion rates, will be important in maximizing the effect of HCV-

positive donors on national donor shortages," the study authors concluded.

"We are encouraged by these results and believe this is a landmark change in our ability to better meet the demand for heart transplantation by increasing the donor supply," Kilic said in a press release. "It is our hope that more centers will use hepatitis C–positive donors for heart transplantation."

To read a press release about the study, click here.

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