Transplanting Organs With Hep C

The risk of using an organ infected with hepatitis C are lower than ever—and could save patients months on organ waitlists.

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In the United States, nearly 113,000 people are on organ transplant waiting lists. Hundreds die every year while waiting for an organ.

In an effort to mitigate the shortage, doctors are increasingly turning to organs from donors who were living with hepatitis C virus (HCV). A recent report from Reuters overviews the latest research on transplantation of HCV-positive organs.

Until recently, hospitals and transplant centers have typically discarded organs from donors with hep C because of the transmission risk. However, now that HCV is highly curable (with more than a 90% success rate), many doctors—and patients—are willing to receive a transplant that could result in an infection.

Doing so can help significantly reduce the amount of time people spend on organ waiting lists, allowing them to get well faster and potentially saving thousands of lives

Currently, in the case of most HCV-positive transplants, patients receive an infected organ and are treated to cure their hep C later, once their bodies have recovered.

However, new research hopes to streamline the process and reduce the amount of time people have to live with the infection—or, better yet, develop methods that can prevent an infection altogether.

For example, a recent study showed that treating people for hep C with direct-acting antiviral therapy just hours after transplant surgery could successfully ward off an infection.

Other researchers are testing whether ultraviolet light can deactivate HCV in organs before they're transplanted.

Advances could one day allow doctors to evaluate and rehabilitate organs affected by a variety of illnesses—from hep C to fatty liver disease.
