A Widow Fights to End Transplant Discrimination Against People With Alcoholic Liver Disease

November 9, 2017

For people with alcoholic liver disease (ALD), getting a liver transplant can be a battle fraught with discrimination. Across the United States, Canada and Europe, many hospitals and transplant centers still enforce a policy that requires a potential transplant recipient to stay sober for six months before he or she is considered eligible for lifesaving surgery.

However, in a recent op-ed in STAT News a Canadian widow who lost her husband to ALD, tells the story of her successful fight to help change the discriminatory transplant policy that she claims killed him.

In the opinion piece, Debra Selkirk writes about her husband, Mark, who was admitted to an Ontario hospital in November 2010 with acute liver failure caused by alcohol use disorder. Mark's doctor said he needed a liver transplant but that specialists "wouldn't even look at him" until he was alcohol-free for six months. They refused to assess Debra as a living donor, and Mark died 16 days later.

Two years after Mark's death, Selkirk began her mission to avenge his death after coming across legislation suggesting that her husband had the same rights as any other person with liver failure to be put on a transplant waiting list. She also discovered several studies showing that most ALD patients do not resume drinking posttransplant and that the medical community has been largely aware of this fact from the very beginning.

Selkirk quotes Thomas Starzl, MD, the first surgeon ever to conduct a successful liver transplant, who concluded in 1988 that "the imposition of an arbitrary period of abstinence before going forward with transplantation would seem medically unsound or even inhumane." She also reviews dozens of research papers exploring outcomes of ALD patients after a liver transplant that largely show high survival and low remission rates among those lucky enough to undergo the surgery.

Armed with this knowledge, in October 2015, Selkirk filed a constitutional challenge in the Ontario Superior Court of Justice against the six-month wait imposed on her late husband. After months of negotiations and delays, she agreed to an out-of-court solution to the case: In 2018, the hospital, along with Ontario's organ network, will launch a three-year pilot program that will assess patients

with ALD for liver transplants without imposing a sobriety requirement.

Under the new program, patients put on the recipient list will enter into a program of care that includes a transplant surgeon, a liver specialist, an addiction psychiatrist, a nurse practitioner and a social worker to help them take care of their health and remain sober after transplantation. Selkirk says she's hopeful that the results from the Ontario program will mirror other studies showing success rates among individuals with ALD and help ensure that Ontario's temporary nullification of the six-month wait period will become permanent.

Meanwhile, sobriety requirements are still imposed on patients with ALD at most U.S. transplant centers. However, Selkirk notes in her op-ed that several centers throughout North America and Europe have been experimenting with more modern approaches that accept all liver transplant candidates on equal terms. While she waits for the tide to change, Selkirk is working to create a nonprofit called the Selkirk Liver Society, which advocate for and support individuals with alcohol-associated liver disease.

To read Selkirk's full story, click here.

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