Policy Review Changes Landscape for Liver Transplants

February 28, 2018 By Connie M. Welch

In January 2018, a recent policy review changes availability of donated livers for patients waiting liver transplant across the U.S. The policy changes stemmed from a law suit filed by the family of a woman from New Jersey who has been on life support waiting a lung transplant.

The guiding principle of the national transplant system has been; locals first. Most organs stay in the areas where they are donated, even if sicker patients are waiting in other parts of the country.

The recent lawsuit resulted in a federal judge emergency order to force places with a relative abundance of organs to share across the country under new guidelines.

For patients waiting for a transplant, time is crucial. Last year throughout the U.S. there were a great number of patients on the transplant waiting list who either died or were removed from consideration because they were too sick to survive transplant surgery.

Across the U.S. it has been reported that California and New York, have severe shortages of transplanted organs available to their patients. Under the recent policy change that first spurred the government to immediately broaden access to lungs for transplant patients now are opening up broader sharing guidelines for liver patients.

The United Network for Organ Sharing (UNOS) based in the U.S. has had policy guidelines throughout the country where the U.S. is divided into 11 regions, which include 58 territories known as donation service areas. Up to this year the general transplant policy states each area has first right at the organs collected from their area in which the sickest patients from their area are first in line.

Only when an organ is deemed unsuitable for all the patients in their area is it made available to patients first within the region, then nationwide.

It has been reported that waiting times vary throughout the U.S. because organ supply and demand are not spread evenly over the country. How quickly a patient receives a transplant or even if they receive one at all largely depend on where they are being treated under the old guidelines.

At UC San Francisco Medical Center, it’s been reported the average wait time for a liver is 3 years,

but in certain states the wait time is much shorter. At Ochsner Medical Center in New Orleans for example reported the average wait time is over two months. The national average being over 14 months.

There are pro and con debates from transplant surgeons across the U.S. in how the new policy change would help or hurt patients on the waiting list.

In Charleston, S.C. the Medical University of South Carolina reports to have “one of the shortest wait time in the country.” Dr. Prabhakar Baliga, a transplant surgeon there stated, “eliminating local preference would be akin to taking charity funds raised locally for wildfire victims in California and diverting them to hurricane victims in Texas. The success of transplants is based on a gift from the local community. Taking away organs from South Carolinians is unfair.”

The 2013 liver policy guidelines set in place by the UNOS states, “the sickest patients, those scoring at least 35 on a 40-point scale used to assess liver condition and rank as transplant candidates are given priority not just within their donor service area but throughout their regions.”

The new plan drops the patients eligible score to 32 and adds patients outside the region if they are within 150 nautical miles of the donor hospital. As a counter to those changes, it gives the nearest patients a small boost up the waiting list.

Officials report the policy would go into effect late 2018.

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