

Live Liver Donor Transplant - Frequently Asked Questions

What are the advantages to getting a living donor liver transplant?

- Decreased wait time. Live donor transplant allows patients to receive a transplant sooner than waiting for a deceased donor liver.
- Patients more likely to return to a better quality of life in less time.
- Decreased chance of dying while waiting for an organ.
- In a live donor transplant, the surgery date is set ahead of time. This allows everyone time to make plans, and to schedule the surgery at a time that is best for all.

What are the risks for the person who gets the transplant?

Living donor transplant is a more complex surgery than deceased donor transplant. There are more risks when you have a live donor liver transplant, such as bile duct problems. Most of these problems can be treated. But there is a risk that it could lead to graft loss or death.

Who can be a donor?

The UW Transplant staff takes great care to review each person's case to learn about risk factors for them as a likely live donor. It is a very serious process for the donor team. The donor care team makes a decision based on each person's specific case. Here are some basic guidelines for who can and cannot be a donor:

- A living donor can be related or unrelated. A donor should be between 18 and 60 years of age. A donor must be old enough to provide informed consent and young enough to have a healthy liver.

- The donor's main goal should be to help the recipient.
- The choice to donate must be without outside pressure, coercion, or financial gain. The donor must be in excellent physical and emotional health. The donor must be free of major health issues.
- The donor must have a blood type that is well-matched with the recipient's blood type.
- Donors must have a body mass index (BMI) less than 35.
- A donor cannot have cancer or any active infections.
- The donor must have normal or near normal liver function and have no history of any liver disease.
- The donor's liver must have a pattern of blood supply and bile duct placement that are suitable for transplant. Each person's anatomy is different.
- You must have family or friends who can provide support before, during, and after the surgery.
- Plan to be off work 3 months. The donor must know and be able to state the risks of living liver donation.
- You must have a primary care doctor.
- It is strongly advised to have your own health insurance. Lack of health insurance may exclude a person from being a donor.

What is the process like to be a live donor?

The person willing to be a donor has thorough medical, surgical, and psychosocial testing prior to having this surgery. This involves several full days of testing and meetings with doctors, nurses, social workers, and psychologists at UW hospital. This person will have their own team helping them through the process. After review of the testing, a decision is made by the team whether the person can be a donor.

What are the risks for the live liver donor?

While the results of adult-to-adult transplants are very good throughout the world, it does carry risks for the donor.

Surgical Risks:

Although the live donor process attempts to reduce risks, no surgery is without any risk. Some of the risks include:

- Injury to the bile ducts or blood vessels that remain in the liver. This can result in liver failure and the chance of the donor needing a liver transplant.
- Reaction to the anesthesia given during the surgery.
- Stroke or heart attack.
- Blood clots in the legs or lung.
- Fluid around the lungs or collapse of a lung.
- Retain fluid.
- Mild or severe infections, such as pneumonia, urinary tract infections, or wound infections.
- Bleeding that won't stop that results in blood transfusions.
- Another surgery.
- Bile leakage or bile duct problems.
- Injury to other organs such as the spleen, stomach, or intestine.
- Scarring.

- Pain in the incision that doesn't go away.
- Problems with wound healing.
- Hernia.
- Bowel problems, such as slow or blocked bowels.
- Depression, anxiety, or other problems with mood, mainly if the transplant recipient has a hard time.
- Problems with getting insurance in the future.
- Death –In the United States we have over 4600 live donor liver transplants. There have been four deaths reported over the past 15 years. This would give a death rate of less than 1 in 1000. However, higher estimates of death rates have been discussed, as high as 0.5%, (1 in 200).

What are the costs of live donation?

The live donor evaluation, surgery, hospital stay, and after care must be covered by the recipient's insurance, not the donor's. Some insurance companies do not cover live donation. However, once approved by your insurance, the medical and surgical costs of live liver donation are covered for the donor—even if they are ruled out during the evaluation, or choose not to proceed. Donors should plan on being off work for 8 to 16 weeks. Being a liver donor may affect long term job status.

There may be other expenses, including travel costs to get to Madison, or unpaid time off work. You can talk with the live donor social worker to learn about any resources that may be offered.

What is the surgery and recovery like for the donor?

Part of the donor's liver is removed so that it can be implanted inside the person who needs the liver transplant. The rest of the liver usually grows bigger in the weeks after the surgery. Donors usually spend a day or two in the intensive care setting, and then move to the transplant floor for a few more days. The recovery time varies. Time off work is anywhere from 8 to 16 weeks.

During this time, you will need extra support at home. You will have follow-up visits at the transplant clinic. Overall, the recovery can last several months. We expect that you will return to your normal state of health and quality of life after the recovery phase.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 5/2018 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7409.