



PRESS RELEASE

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KIDNEY PAIRED DONATION IS AN EXCELLENT OPTION FOR TRANSPLANT CANDIDATES

Highlights

- An analysis compared transplant recipients who received kidneys through national kidney paired donation and those who received kidneys from other living donors (such as relatives, friends or other paired exchange mechanisms).
- Despite a higher number of risk factors for poor outcomes in the kidney paired donation group, recipients in the two groups had similar rates of organ failure and mortality over a median follow-up of 3.7 years.

Washington, DC (January 28, 2020) — Recipients of kidney paired donation through a national program, also called kidney exchange, experience equivalent outcomes when compared with all other living donor kidney transplant recipients, according to a recent analysis. The findings, which appear in an upcoming issue of *CJASN*, are reassuring that a national kidney paired donation program is a safe and effective way to treat patients with incompatible living donors.

In kidney paired donation, living donor kidneys are swapped so that each recipient receives a compatible transplant. David B. Leeser, MD (East Carolina University Brody School of Medicine) and his colleagues compared the outcomes of recipients who received kidneys in this way to “control” recipients who received kidneys from other living donors (such as relatives, friends or other paired exchange mechanisms).

The analysis included 2,363 recipients who received kidneys from the National Kidney Registry, the largest program for kidney paired donation in the world, and 54,497 control recipients. Recipients in the two groups had similar rates of organ failure (5-6%) and mortality (9-10%) over a median follow-up of 3.7 years, with a maximum follow-up of 11 years.

“The study shows that patients can expect equivalent to better outcomes by using the National Kidney Registry. In the future, the transplant community may start to see living donors as a national or community resource that should be shared,” said Dr. Leeser. “The result could be the ability to transplant hard to match recipients and even better matching of easy to match recipients. Since organ availability is the limiting factor in kidney transplantation nationwide, the ability to perform kidney transplants with a greater likelihood of surviving for longer periods of time is an imperative that will decrease the number of patients being placed on the waiting list for retransplant.”

An accompanying editorial notes that if the early success of the National Kidney Registry is sustained, it may be the program of choice for participation. “The NKR has led the way in technology and innovation, and outcomes demonstrate success for those classically disadvantaged for living donor transplant, including black recipients and those who are highly sensitized,” the authors wrote. “The current report on ten years of transplantation in a national paired donor program is encouraging, and may convince more transplant programs to ‘buy in’ to the National Kidney Registry.”

Study co-authors include Alvin G. Thomas, MSPH, Ashton A. Shaffer, BA, Jeffrey L. Veale, MD, Allan B. Massie, PhD, MHS, Matthew Cooper, MD, Sandip Kapur, Nicole Turgeon, Dorry L. Segev, MD, PhD, Amy D. Waterman, PhD, and Stuart M. Flechner, MD.

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The article, entitled “Excellent Outcomes with Challenging Patients: 10 Year Outcomes in the National Kidney Registry,” will appear online at <http://cjasn.asnjournals.org/> on January 28, 2020, doi: 10.2215/CJN.06660619.

The editorial, entitled “The National Kidney Registry: Time to Buy In?” will appear online at <http://cjasn.asnjournals.org/> on January 28, 2020, doi: 10.2215/CJN.14581119.

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