

END THE WAIT!

NKF Recommendations

A Multi-Faceted Collaborative Initiative to End the Wait for a Kidney Transplant in the U.S. in 10 Years

OVERALL RECOMMENDATIONS

- 1) The National Kidney Foundation Board of Directors is making this series of recommendations to address the fundamental problem facing Americans in need of a kidney transplant. That is the shortage of organs and resulting wait. These recommendations use proven and tested strategies which can end the wait in ten years. This is a comprehensive program focused on a commitment to do what our patients need us to do. No single narrow solution will do.
- 2) A collaborative framework must be created to ensure that all eligible kidney transplant candidates receive a transplant within one year. Many organizations, government agencies and individuals can actively contribute, with each implementing aspects of the overall initiative consistent with their mission, expertise and interest
- 3) Funding to begin and sustain the initiative will be sought from multiple private and public sources
- 4) A big picture approach will be needed in Congress so comprehensive legislation can be crafted to meet the larger goal rather than small changes or amendments in existing laws. This will complement the National Organ Transplant Act (NOTA) and the Uniform Anatomical Gift Acts (UAGAs) which will then not need to be amended.

SPECIFIC RECOMMENDATIONS

1. Improve Outcomes of First Transplants

Financial – Cover immunosuppressive drugs for life

Education – Educate CKD Stage 4 patients about

- staying as healthy as they can
- the opportunities for and benefits of early transplantation
- the possibility of living donations and
- the identification of potential living donors

Medical Practice –

- Evaluate Stage 4 CKD patients for a transplant prior to the initiation of dialysis
- Implement the new KDIGO Guidelines on the Care of the Recipient

2. Increase Deceased Donation

Financial – Ensure that OPOs have the discretion and funding to assist donor families with expenses directly related to the donation, which may include some funeral expenses

Education – Facilitate training of all appropriate hospital personnel about the optimal care for potential donor families

Medical Practice –

- Minimize discard and maximize utilization of donated organs
- Build upon the actions and momentum of the Breakthrough Collaborative
- Identify, recover and utilize organs from Extended Criteria Donors and from Donation after Cardiac Death donors nationwide

3. Increase Living Donation

Financial –

- Guarantee that all living donors, without qualification, are reimbursed for all expenses involved in the donation, including lost wages. This includes non-directed donors and potential donors who are evaluated but don't ultimately donate.
- Guarantee living donors access to health care coverage for any medical expense or disability related to the donation
- Guarantee living donors life insurance coverage for death related to the donation
- Guarantee that living donors get their jobs, or equivalent jobs, back
- Guarantee that living donors will not be discriminated against in obtaining health and life insurance
- Establish a specific billing code for post-donation care of living donors

Education –

- Create an NKF Living Donor Council to support the needs of living donors and potential donors
- Create a "Living Donation Breakthrough Collaborative" to stimulate best practices for living donation
- Inform the general public about new developments in living donation and transplantation

Medical Practice –

- Provide all potential donors with access to laparoscopic nephrectomy
- Establish a nationwide program of matched donation
- Increase staff and physical resources at transplant centers to minimize the time waiting for a living donation
- Evaluate more than one potential living donor for a single recipient when feasible
- Collect, maintain and analyze data on living donors annually, consisting of, at least, blood pressure, eGFR, proteinuria and Hb A1C

4. **Make the donation and transplant system and processes more efficient and equitable**

Medical Practice –

- Eliminate regional variations in the rates of consent, living donations, early transplantation, access to transplantation and follow-up care
- Eliminate racial and other disparities in donating, listing, remaining active on the waiting list and receiving a transplant
- Maintain uniform organ donation laws across the United States