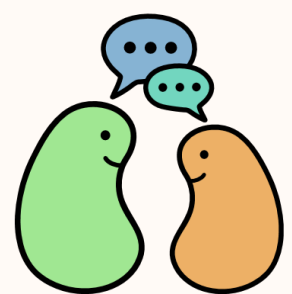


# Gift of Life Empowering Living Kidney Donation



Kidney Donor  
Conversations

[www.MyKDC.org](http://www.MyKDC.org)

# Continuing Education



- To complete the course, the learner must:
  - Watch the 60-minute webinar (live or recorded)
  - Complete evaluation & post-test questions
  - Approved for Social Worker CEs through ASWB
- Glenna Frey speaker for this webinar, is on the speaker's bureau for American Nephrology Nurses' Association. All relevant financial relationships listed were mitigated.

# Learning Outcomes

- After this course, the learner will:
  - Describe how to coordinate and conduct appropriate transplant option discussions with dialysis patients
  - Differentiate the processes and supports for deceased vs living donor transplantation within the existing transplant system
  - Explain the cost comparisons of dialysis vs. transplant



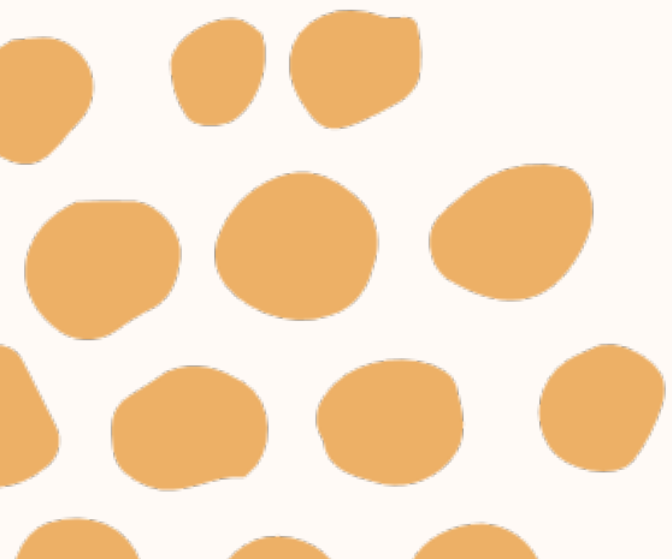
# Sessions

- Advancements and Challenges in Kidney Transplant: Empowering Patients and Professionals
- Pathway to Giving: Understanding the Living Kidney Donor Process
- Giving Life, Exploring Impact: Benefits and Considerations for Living Kidney Donors
- Finding a Lifesaving Match: Strategies for Finding a Living Kidney Donor

# Session 1



## Advancements and Challenges in Kidney Transplant: Empowering Patients and Professionals



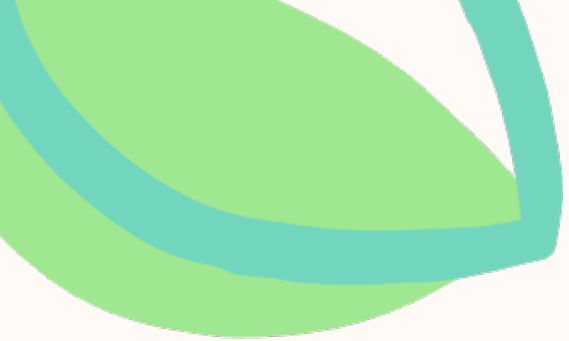


Image: Flickr


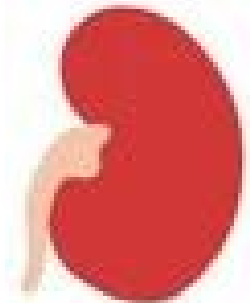
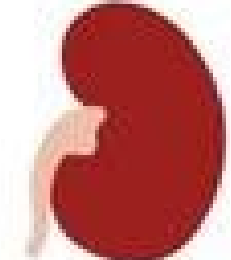
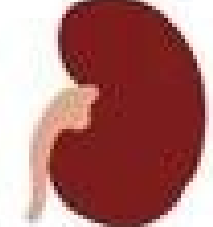
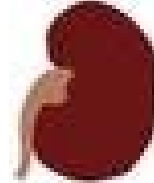


# Start the Conversation!

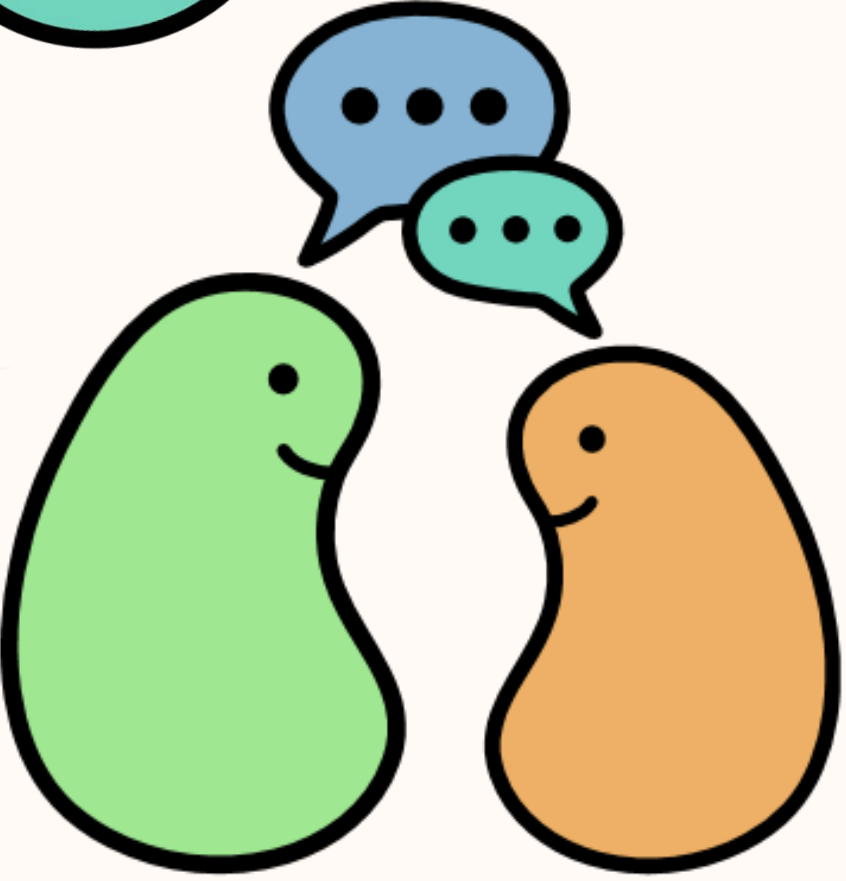
Stage 4 or Before



## 5 Stages Of Kidney Disease

| Stage 1   | Stage 2  | Stage 3A  | Stage 3B  | Stage 4   | Stage 5  |
|---|--|---|---|---|----------|
| GFR $\geq$ 90   | 89 $\geq$ GFR $\geq$ 60  | 59 $\geq$ GFR $\geq$ 40   | 44 $\geq$ GFR $\geq$ 30   | 29 $\geq$ GFR $\geq$ 15   | GFR < 15 |
|  |  |  |  |  |          |
| Normal or high function   | Mildly decreased function  | Mild to moderately decreased function   | Severely decreased function   | Kidney failure  |          |

Polling Question  
#1





# CMS Conditions for Coverage

## **Standard:**

Frequency of assessment for patients admitted to the dialysis facility.

(1) An initial comprehensive assessment must be conducted on all new patients (that is, all admissions to a dialysis facility), within the latter of 30 calendar days or 13 outpatient hemodialysis sessions beginning with the first outpatient dialysis session.

# CMS Conditions for Coverage

## **Standard:**

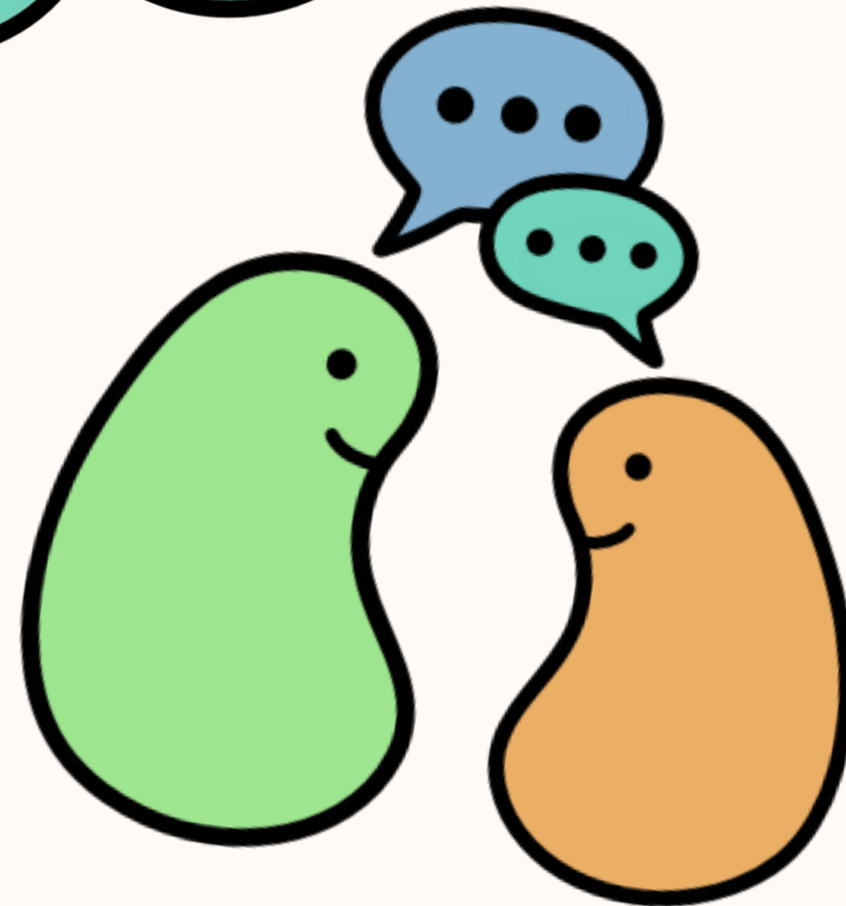
Frequency of assessment for patients admitted to the dialysis facility.

Comprehensive Assessment criteria:

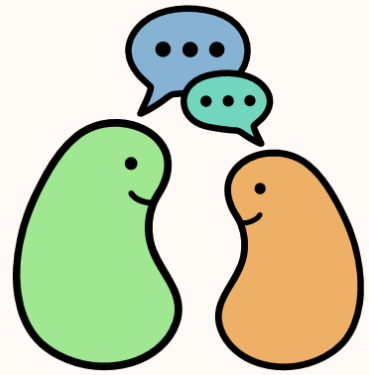
Evaluation of suitability for a transplantation referral, based on criteria developed by the prospective transplantation center and its surgeon(s).

If the patient is not suitable for transplantation referral, the basis for nonreferral must be documented in the patient's medical record.

Polling Question  
#2



# When to start the transplant discussion in dialysis?



As soon as possible, based on their readiness to learn.

- Anxious?
- General health?
- Independent?
- Family/support?
- Basic understanding of kidney disease, dialysis, and transplant (deceased and living)
- Misconceptions?
- Goals? (short term, long term related to family, quality of life, travel, pain, medications, hobbies, etc.)



# Transplant is not a once-a-year discussion by one person

It takes a team.

It takes small, supportive steps.

Goals may change as understanding changes.

Goals may change as health changes (better or worse).

What if you had resources for finding living donors?

What if you had resources to help living donors?



This is an ongoing conversation...

# Consider referring all patients for transplant

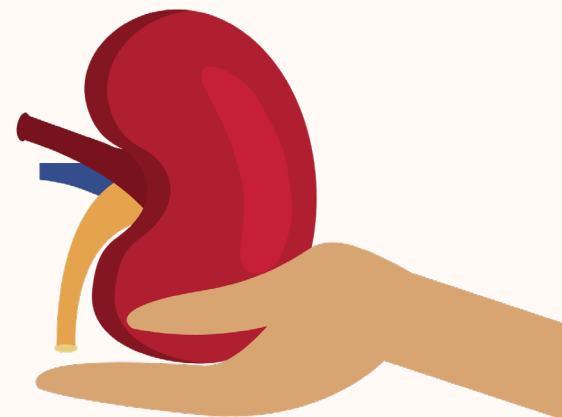
Would it be best for the patient if:

- Dialysis staff did not decide who is a good candidate for transplant.
- Patients were referred to the transplant team within the first 2 months of starting dialysis.
- Transplant centers communicated why they are not a good candidate and what it would take to help them be a good candidate.
- Goals were set based on changes needed to become a good transplant candidate.
- Goals were re-evaluated monthly. When appropriate, refer back to the transplant team.



# BUT ... aren't the transplant centers too busy?

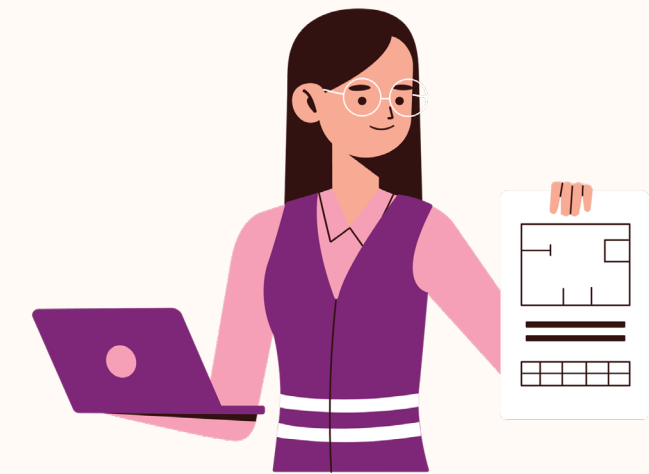
- Increase in supply → systems grow and change to meet the demand (new innovations, technology).
  - No one says to cancer patients: "There are too many people getting radiation, we cannot refer you to the radiation doctor."
- Patient-focused care
  - Best treatment discussions would not depend on how busy the transplant centers are or how long the waiting list is.
  - "We will help you get the best treatment, a living donor transplant."



# Develop a Plan to Discuss the Best Treatment

## Education Ideas

- Introduce the idea that a living donor transplant is the best treatment for most people with kidney failure; benefits of transplant over dialysis. Acknowledge resistance. The goal is to help them fully understand all the implications before making any decisions.
- Benefits of a living donor over a deceased donor kidney.
- Ways kidneys can be donated. Kidney donor risk and benefits.
- Resources to help a living donor find them.
- Family meeting to discuss transplant.





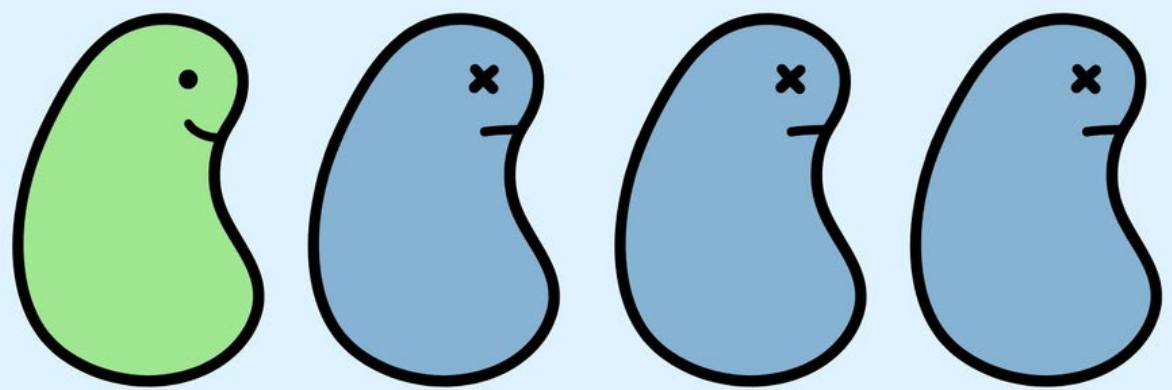


These four sessions will provide you with information and tools to help you with the conversations ...



# The Problem

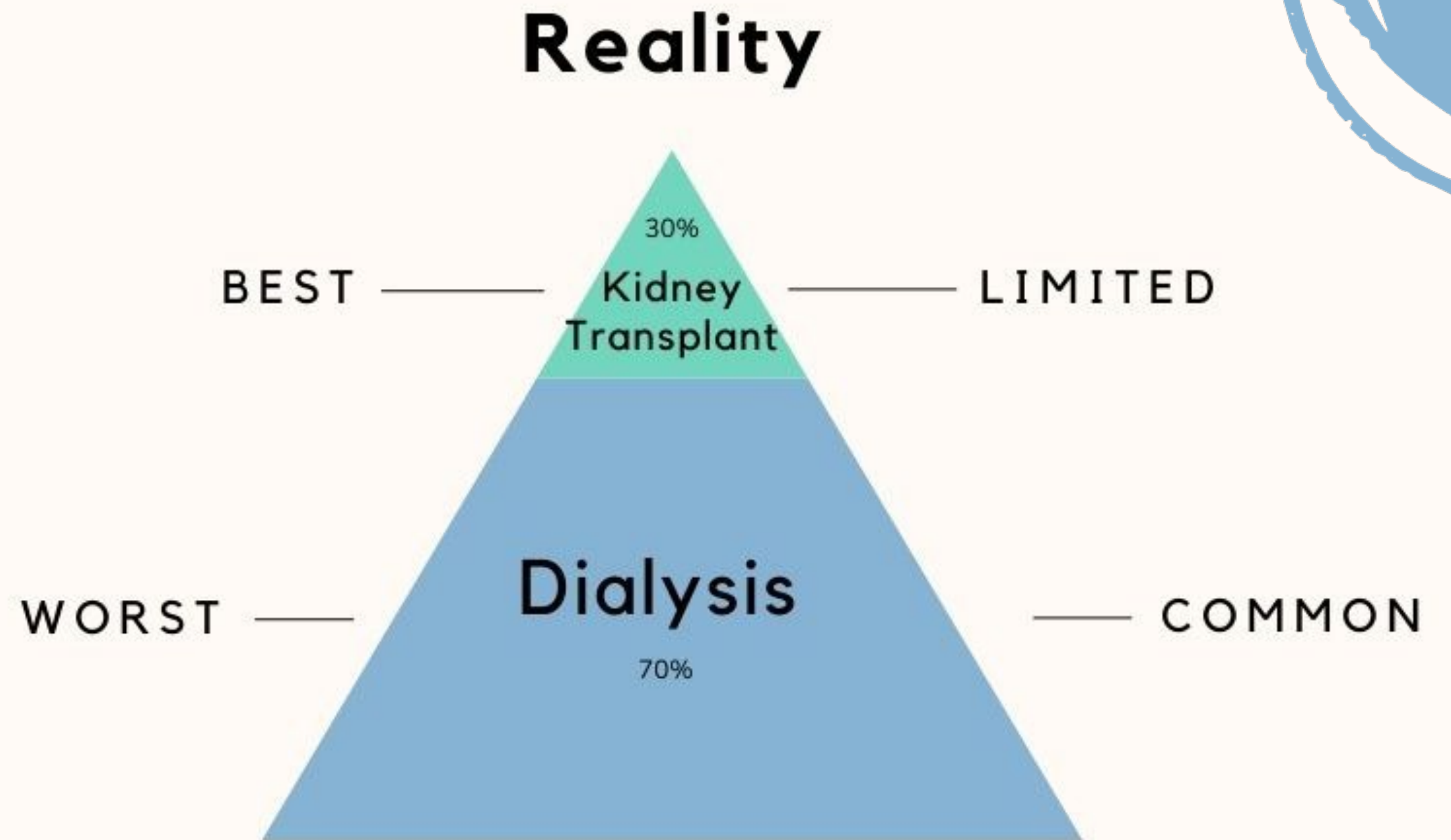
On the kidney transplant waiting list



only 1 in 4 get a kidney.

©Amanda Frey 2023

<https://optn.transplant.hrsa.gov/data/view-data-reports/national-data/>

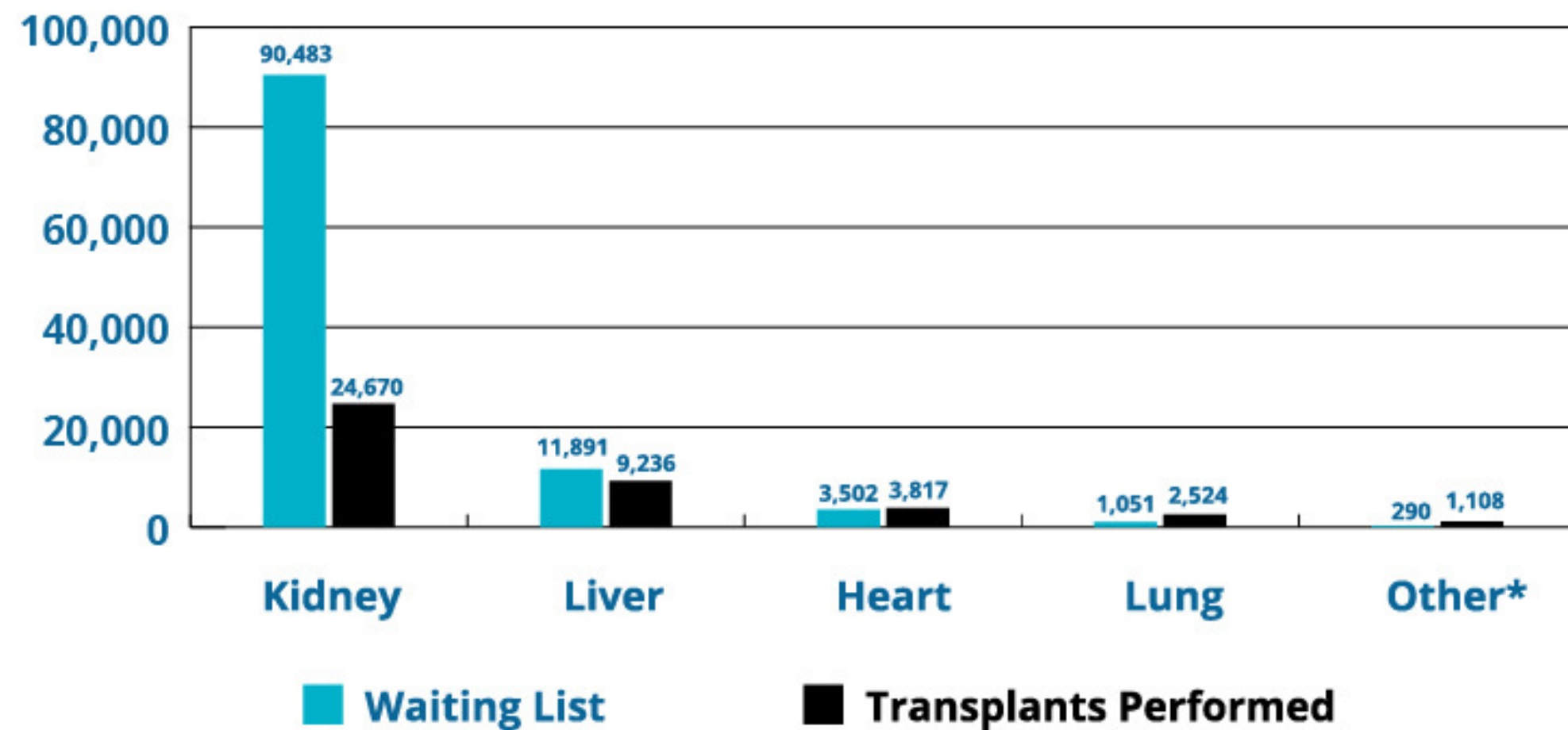


USRDS ANNUAL DATA REPORT, ESRD TREATMENT MODALITY, 2022

# Over 90,000 people are on the kidney transplant waiting list

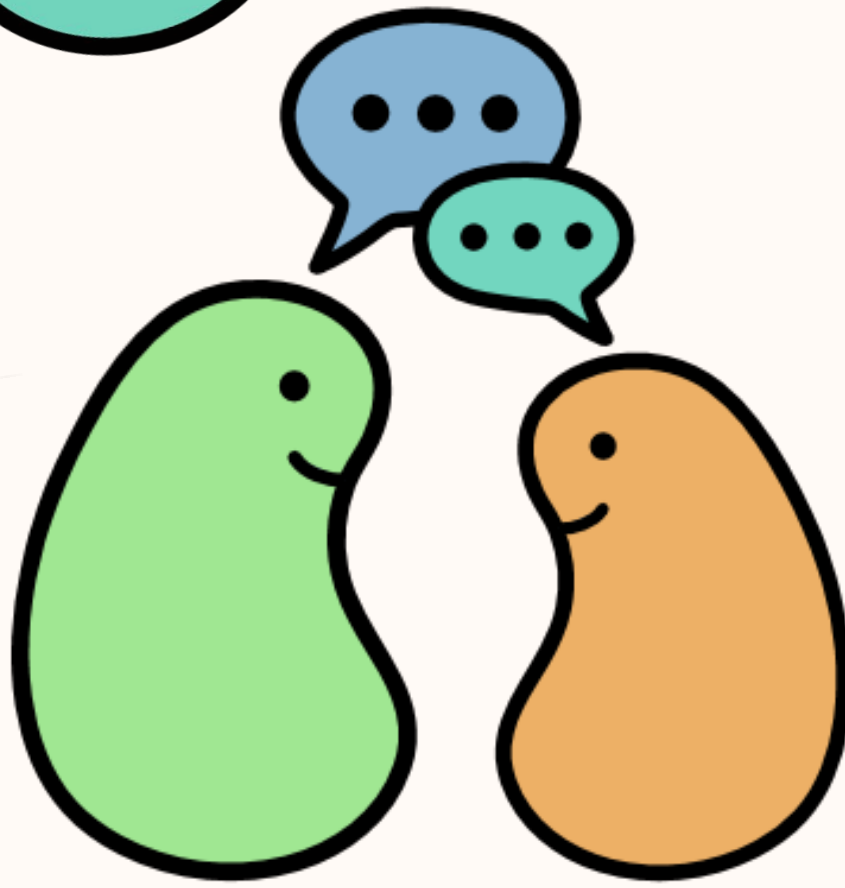
## Patients on the Waiting List vs. Transplants Performed

By Organ in 2021



\*Other includes allograft transplants like face, hands, and abdominal wall.

Polling Question  
#3



# The Solution?



60% Registered  
<1% Donate

## Why you won't donate at death:

- Health
- The way you die
- Family

## Comparison of organ donation and transplantation rates between opt-out and opt-in systems



see commentary on page 1301

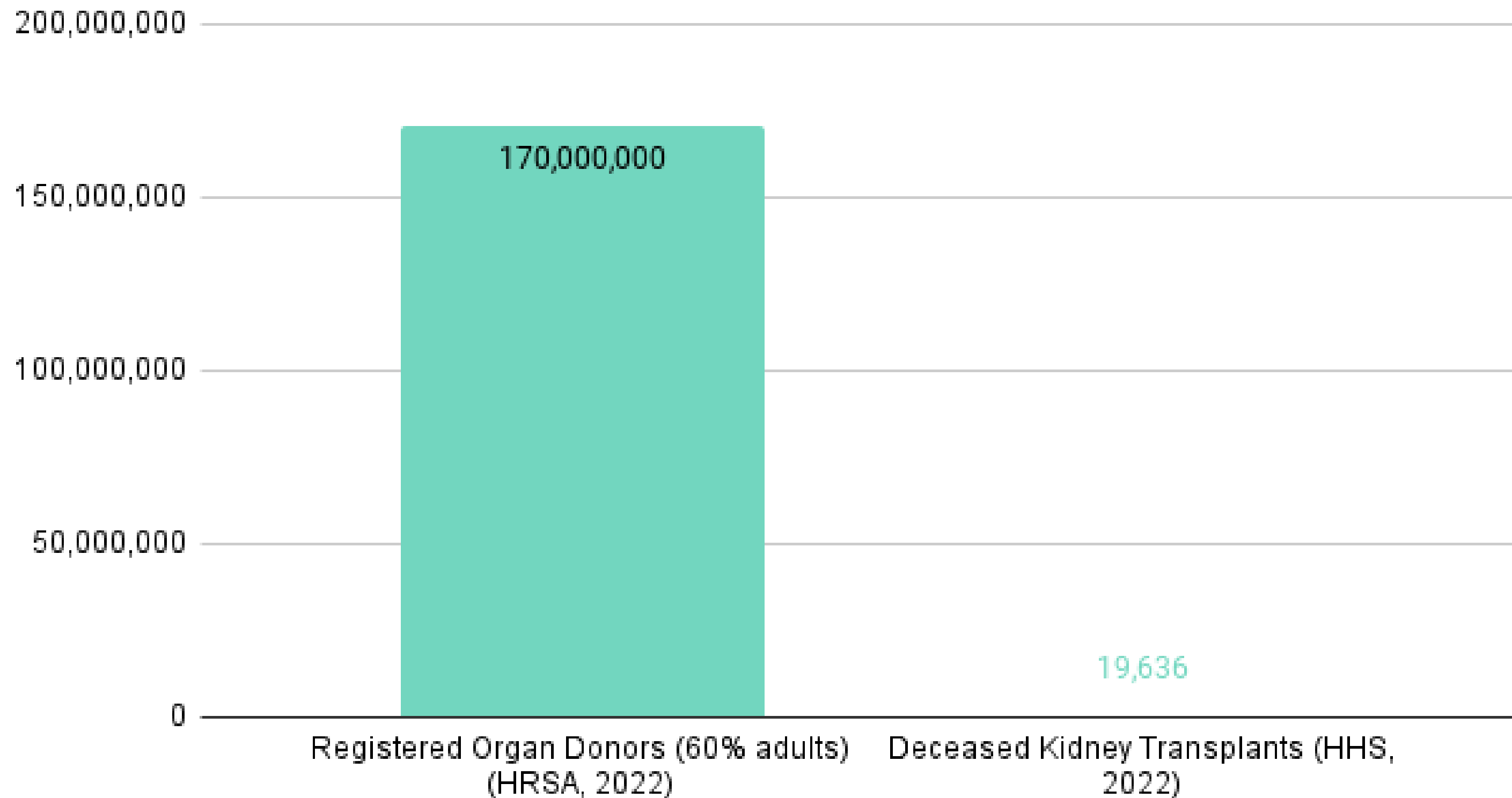
Adam Arshad<sup>1</sup>, Benjamin Anderson<sup>2</sup> and Adnan Sharif<sup>2,3</sup>

<sup>1</sup>College of Medical and Dental Sciences, University of Birmingham, Birmingham, UK; <sup>2</sup>Department of Nephrology and Transplantation, Queen Elizabeth Hospital, Edgbaston, Birmingham, UK; and <sup>3</sup>Institute of Immunology and Immunotherapy, University of Birmingham, Birmingham, UK

Compared to opt-in countries, opt-out countries had fewer living donors per million population (4.8 versus 15.7, respectively) with no significant difference in deceased donors.

... other barriers to organ donation must be addressed, even in settings where consent for donation is presumed.

# Registered Organ Donors & Deceased Transplants



# Where is the increase in deceased donor kidneys coming from?

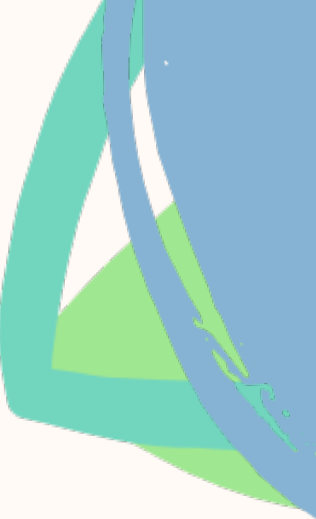
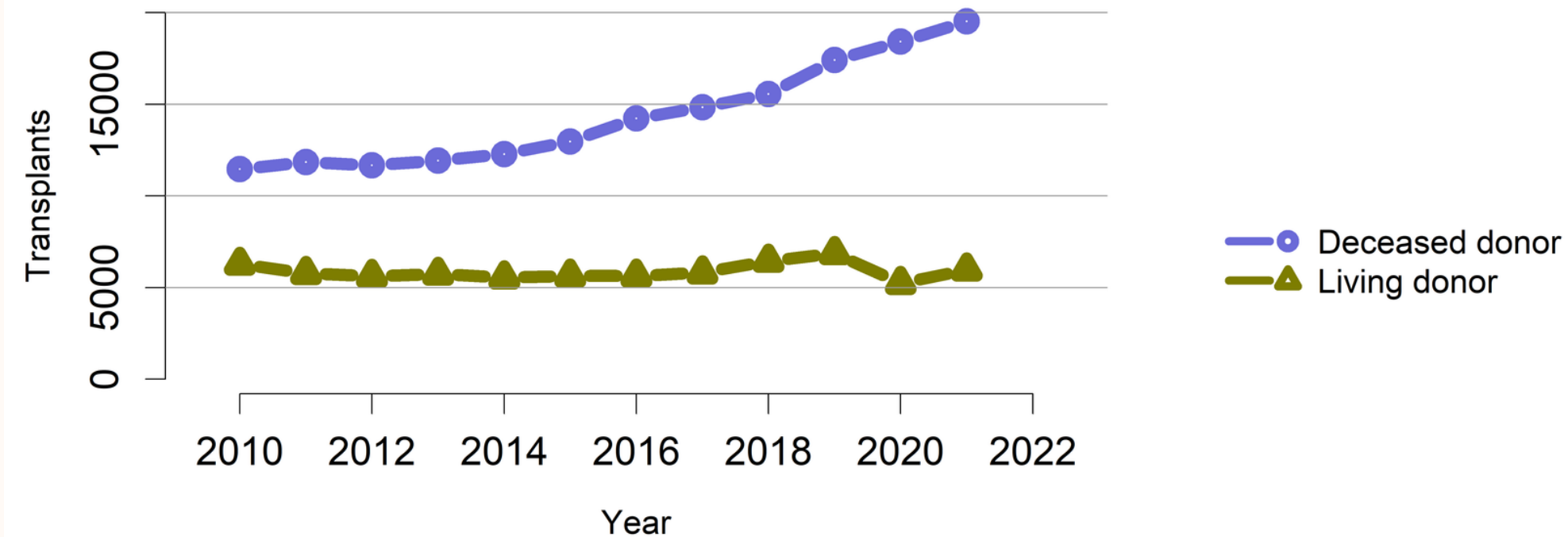


Figure KI 65: Total kidney transplants by donor type



“The percentage of DCD donors increased from 13% in 2011 to 30.2% in 2021. The increase in numbers of donors from 2011 to 2021 (8,126 to 13,862) and those with anoxia as cause of death may be due to the opioid epidemic.”



# Transplant

**The Best**

**GOOD** 😊

Deceased  
Donor Kidney

- 8-12 Years

Pre-emptive  
Living Donor Kidney

- 12-20 Years
- Less wait Time

okay 😞

Dialysis

- 5-10 years

- Better Quality of Life
- More free time
- More stable blood pressure and electrolyte levels
- Higher rates of employment

<https://optn.transplant.hrsa.gov/data/view-data-reports/national-data/>

<https://optn.transplant.hrsa.gov/resources/guidance/educational-guidance-on-patient-referral-to-kidney-transplantation/>

Kidney Disease Symptoms Before and After Kidney Transplantation. Taylor, K., Chu, N., Chen, X., et al. CJASN, June 2021

# What is the Cost?

## Dialysis

- Costs the Medicare system an average of \$121,000 per patient per year

## Transplant

- First year ~ \$145,000
- \$32,000 each year after surgery

The United Kingdom estimated hemodialysis patients have a more than 7-fold patient carbon footprint.

- Water
- Electricity
- Plastic & cardboard waste
- Transportation

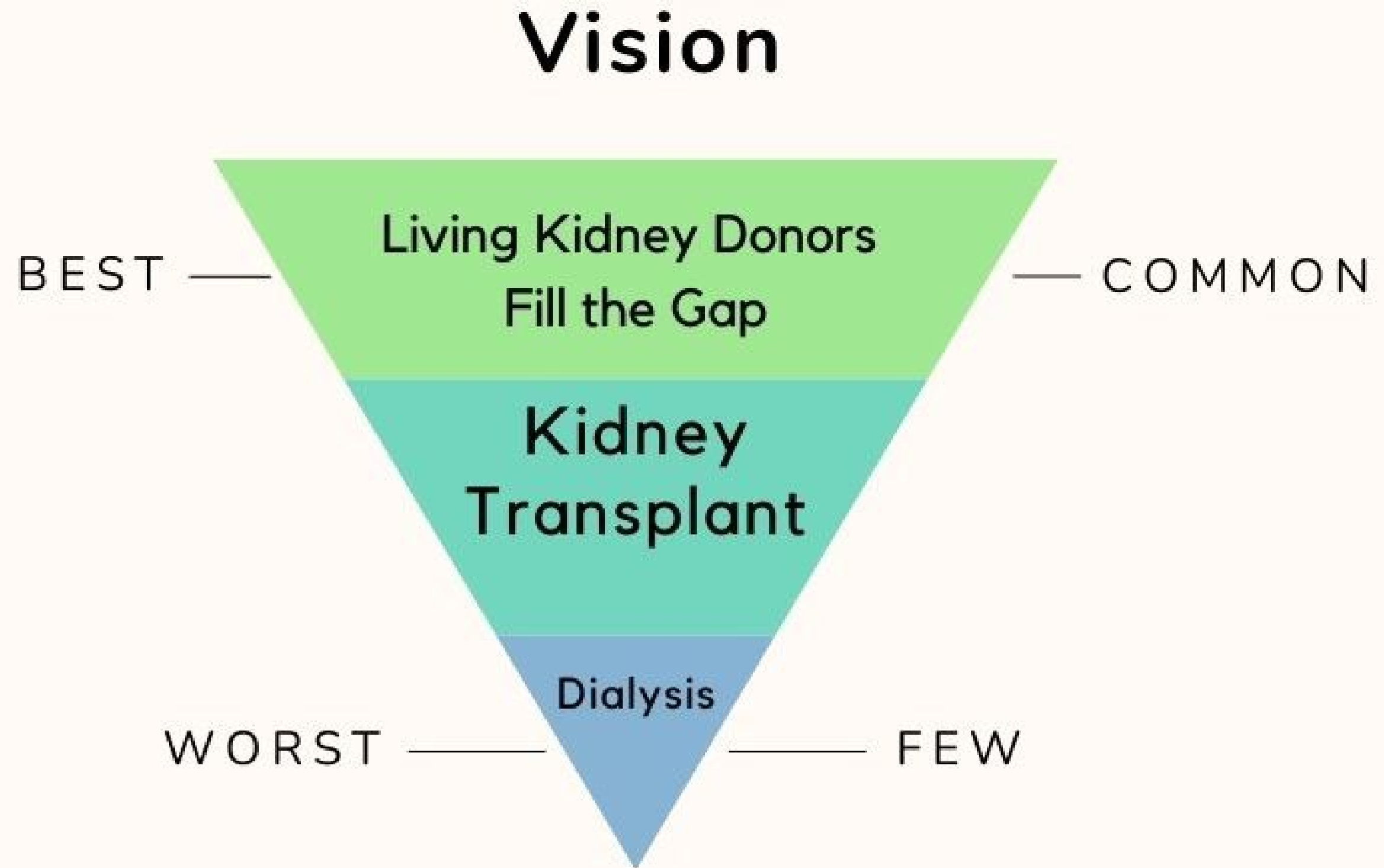
Held, P. J., McCormick, F., Ojo, A., & Roberts, J. P. (2016). A Cost-Benefit Analysis of Government Compensation of Kidney Donors. *American Journal of Transplantation*, 16(3), 877–885.

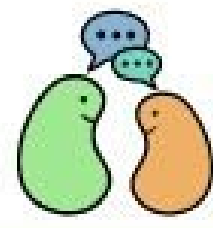
Yeo, S. C., Ooi, Y., Suet, T., & Tan, M. (2022). Sustainable kidney care delivery and climate change – a call to action. *Globalization and Health* 2022 18:1, 18(1), 1–4



# More Kidneys ...

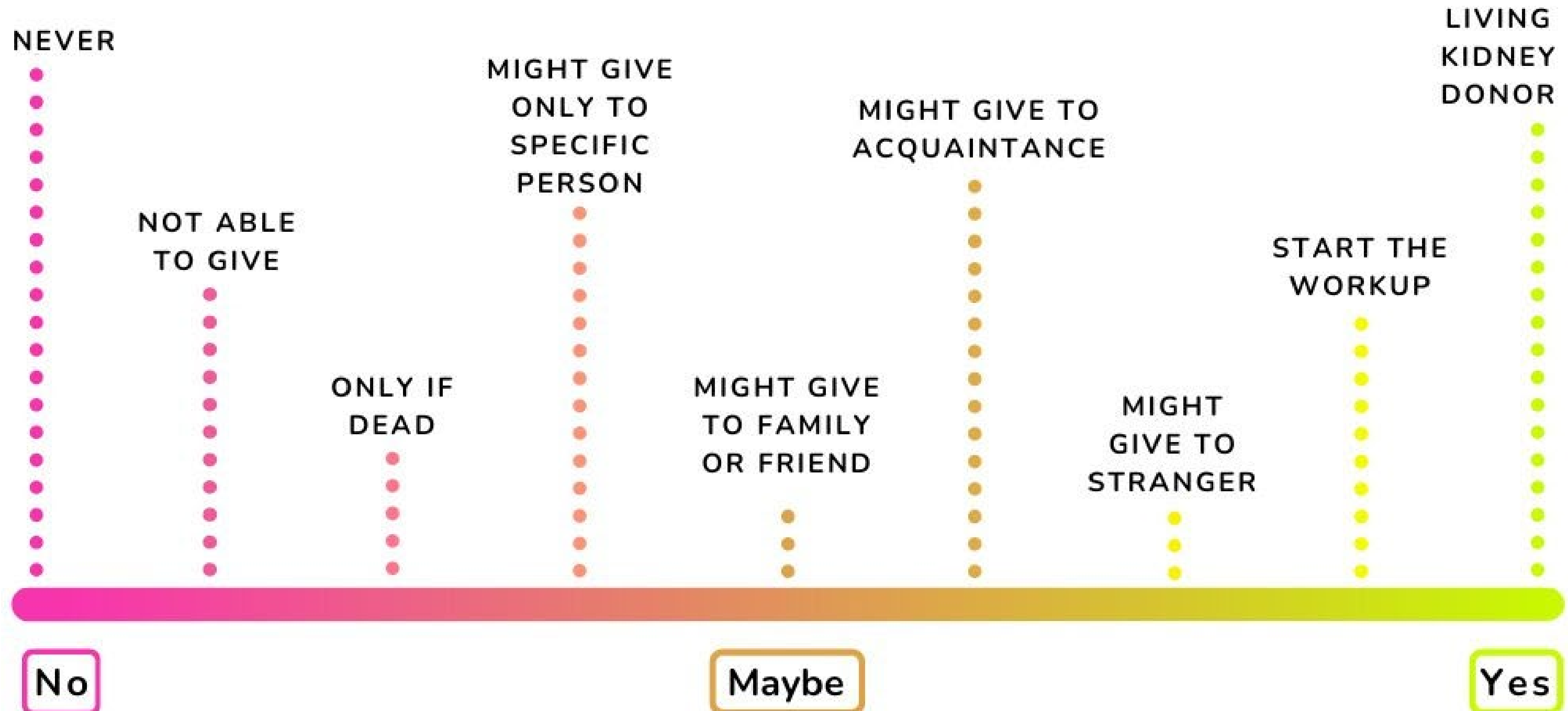
- Organ Discards - Less!
- Deceased Donors - x
- Artificial Kidneys - ?
- Pig Kidneys - ?
- Living Donors - More!



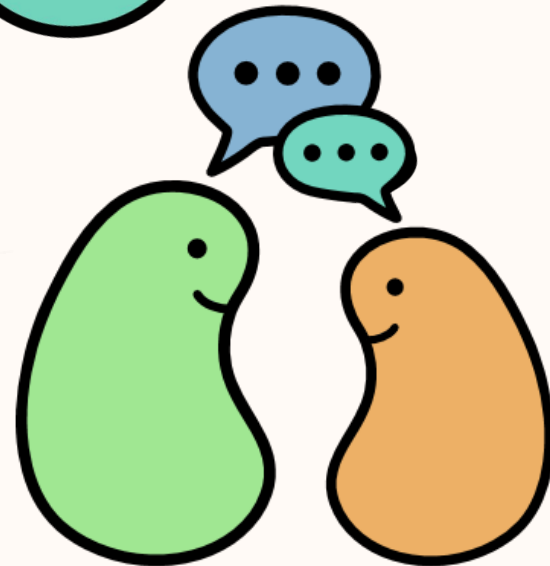


Polling  
Question #4

# Kidney Donation Continuum



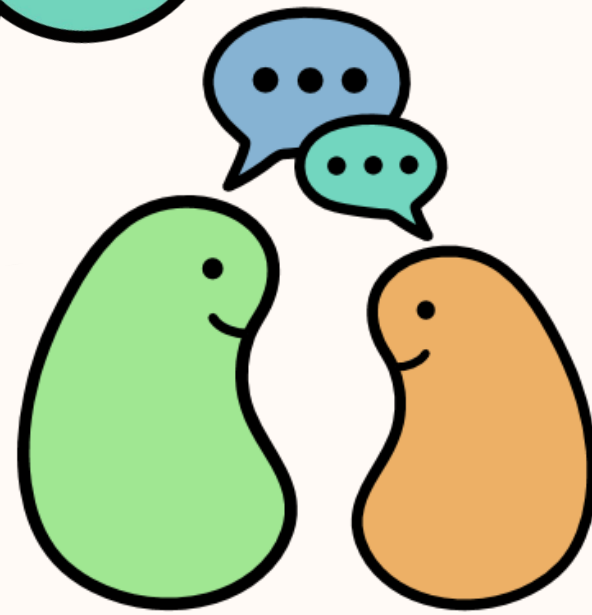
Starting Conversations  
about Living Kidney  
Donation with  
Patients/Families



- ? What have you been told about kidney transplants?
- ? What concerns do you have about getting a kidney transplant?
- ? What have you been told about deceased donors? The waiting list? The wait time? The benefits of transplant compared to dialysis?
- ? What have you been told about living donor transplants? The benefits of living compared to deceased? The wait time?



Starting Conversations  
about Living Kidney  
Donation with  
Patients/Families

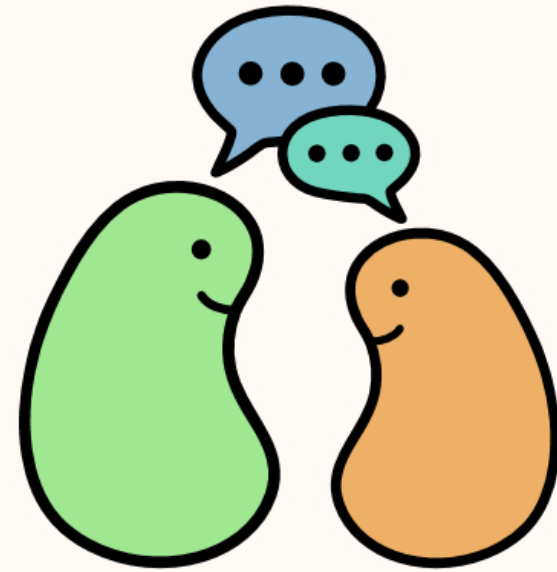


*What are Your Concerns?*



Next ...

Thank you!



# Kidney Donor Conversations

[www .MyKDC.org](http://www.MyKDC.org)

Mission: To provide education and  
support for living kidney donation

501(c)(3) nonprofit

Glenna Frey, MSN, APRN-CNS

Executive Director

[Glenna@MyKDC.org](mailto:Glenna@MyKDC.org)

# Evaluation and Post-Knowledge Check

- Link to the evaluation
  - <https://www.surveymonkey.com/r/HTJ38MB>
  - Social Workers
    - Advancements and Challenges in Kidney Transplants: Empowering Patients and Professionals, Course #5270, is approved by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program to be offered by Quality Insights as an individual course. Regulatory boards are the final authority on courses accepted for continuing education credit. ACE course approval period: 10/03/2023 - 10/03/2025. Social workers completing this course receive 1 general continuing education credit.
    - **Must complete & submit evaluation & post-knowledge check. Your official certificate will be emailed to you within 3 business days.**



## QR Code

Activate the camera on your smart phone and scan this QR code to link to the evaluation





NEXT

## Session 2



# Pathway to Giving: Understanding the Living Kidney Donor Process

