

Nephrology involvement in deceased donor kidney organ offers: a national survey.

Dr Gareth Jones¹, Dr Stephanie Chong¹, Mr Christopher Callaghan²

¹Royal Free London Nhs Trust, London, United Kingdom, ²Guy's and St Thomas' NHS Foundation Trust, London, UK

Introduction: The decision to accept or decline a deceased donor kidney offer is a complex process involving consideration of both donor and potential recipient factors. The decision is sometimes made with limited information about the potential recipient, by clinicians who may not know them directly. We undertook a national survey of consultant nephrologists to investigate their desire to be involved in the organ offer decision-making process.

Methods: We undertook an electronic survey of nephrologists in all renal units across the UK and asked questions regarding willingness to participate in the organ offer decision-making process.

Results: We received 176 responses from nephrologists in 47 different renal units. Fifty-nine percent worked in a transplanting unit and 12.4% were the first responder for organ offers.

When asked about their transplanting unit, 73% felt they were involved in organ offer decisions but only 50% were made aware of organ declines for their recipients. Sixty-seven percent felt they had sufficient involvement in the offer process while 39% wanted more and 14% did not wish to be involved at all.

When considering specific offers, 32% felt they should always be involved, 53% only when there are specific issues and 15% were happy for the transplanting centre to make the decision. The desire for involvement increased with greater complexity of the donor or potential recipient.

When asked whether nephrologists should be contacted about the organ offer before a decision is made, 31% replied always, 34% - only if there is enough time, 29% didn't need to know at the time and 4% did not need to know at all.

When asked about who should be contacted, 40% wanted the consultant looking after the recipient to be contacted during daytime hours, but during the night, the most common answer was the on-call nephrologist in the recipient centre (34%), followed by the nephrologist in the transplanting centre (30%) followed by surgeon alone (20%). Only 28% of units had a single contact number for the on-call nephrologist.

We asked about an email system informing nephrologists of organ offers for their patients; 61% felt it would be useful.

Discussion: Our survey revealed that most nephrologists are happy with their involvement in deceased donor organ offers but there is variation in willingness to be involved. The requirement for involvement also varied with the complexity of donor and recipient. Most nephrologists would like to know when an organ has been declined for their patient and we have approached NHSBT on the feasibility of providing a referring unit level report of named organ offer declines.