



Submission No.: CS11-9375

Session : Concurrent Symposium 11 (Heart)

Date & Time, Place : November 18 (Sat), 11:00-12:30, Room 6F-2

Session Title : Patient management for thoracic organ donor candidates

Abdominal organ transplantation team's view

Han Ro

Gachon University Gil Medical Center, Republic of Korea

In the management of deceased donors, how to maintain volume status is a major concern for each surgical team. It is difficult for the team managing the deceased donor to find the appropriate balance when the target volume status required by the kidney transplant team and the status required by the thoracic transplant team are conflicting. This is especially true for maintaining euvolemia, which is easy to define conceptually but not simply determined by clear clinical parameters. However, given the relatively low discard rate of kidneys compared to other organs in deceased donors, and the unique allocation algorithm in Korea that assigns the unilateral kidney to the donor management center, it is likely that donor management teams in each HOPO (hospital-based organ procurement organization) will be relatively sympathetic to the wishes of the kidney transplant team. Donor management staff are more experienced with the management protocols for kidney transplants because the majority of HOPOs are kidney transplant centers but do not perform heart or lung transplants. Maintaining abdominal organ performance while meeting management targets for heart or lung transplantation is not an unrealistic goal, and it is important to understand, consider, and approach deceased donor management with these social factors in mind.