Information for Patients

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Overview

Nationally, there are more than 17,500 patients on the waiting list for liver transplantation, with more added each day. Almost 5,000 patients receive liver transplants every year, but more than 1,700 patients die each year while on the waiting list. Because livers from people who have died are given to the sickest patients first, patients have to wait until they are very ill before they are high-priority for transplant.

At UCSF Medical Center, the majority of organs for transplantation are obtained from people who have died and whose families have given permission for their organs to be donated. However, an increasing number of liver transplants are performed with portions of livers donated by a living relative or friend.

A living donor transplant not only reduces the waiting time, but also improves the chance for transplant success. Compared to patients who must wait until they are very sick to receive a transplant, patients who are transplanted earlier recover more quickly after transplantation. For donors, satisfaction comes from knowing that he or she is helping a family member or friend who is very sick and in need of a liver transplant.

In living donor liver transplantation, a section of liver is removed from a living donor and transplanted into a recipient. The procedure is possible because the liver regenerates, or grows. Regeneration happens over a short period, possibly days to weeks and certainly within eight weeks for both the recipient and the donor. The liver’s unique ability to regenerate itself — combined with technological advances — allows more people to be donors.

Surgeons at UCSF have performed living donor transplants between adults and children since 1992 and performed adult-to-adult living donor transplants since January 2000. More than 250 live donor liver transplants have been performed at UCSF.

All donors and recipients receive excellent care from the multidisciplinary transplant team consisting of hepatologists (liver specialists), surgeons, nurses, pharmacists, social workers, physician assistants, financial counselors and support staff.
Highlights
• UCSF has performed more living donor liver transplants than any other California center
• Team approach to both pre- and post-transplant care
• Multicultural environment and bilingual staff
• Patient- and family-centered approach to care

Volumes
• More than 250 living donor transplants performed
• More than 2,000 liver transplants performed
• More than 100 liver transplants performed annually

Frequently asked questions
What are the requirements to become a living donor?
First, the potential donor must want to make the gift of liver donation to help a friend or relative. The donor should also be:
• Between 18 and 55 years of age
• In good health with no major medical or psychiatric illness
• Not overweight (body mass index less than 30), or able to lose weight if necessary
• A non-smoker for at least six weeks prior to surgery
• Not pregnant
• Able to understand and comply with short- and long-term follow-up care

Who can be a living donor?
A living donor does not need to be a blood relative of the recipient. The donor could either be a spouse, parent, child, other relative or an unrelated friend, as long as the donor has the same blood type of the recipient or blood type “O”. The Rh factor — positive (+) or negative (-) — does not affect the suitability to donate.

If I am related to the recipient, will he or she have less rejection?
There does not appear to be a lower risk of rejection if the donor is a blood relative. The relationship between donor and recipient also does not appear to affect the amount of immunosuppressive medication the recipient will need after transplant.

What is the advantage of a living donor?
With a living donor, the waiting time for the recipient is shortened. Without a living donor, patients can be on the waiting list for months or years depending on their disease, blood type, and condition. Unfortunately, many patients die while waiting on the list for a deceased donor to become available.

How long does the evaluation take?
The time it takes to evaluate a potential donor varies. If all the donor’s tests are without problems, he or she can become a donor within six to eight weeks. If problems are identified during the process, more tests may be necessary to ensure the safety of the donor, as donor safety is always our priority.

Will my evaluation be covered by medical insurance?
The liver recipient’s medical insurance should cover any medical expenses related to the donor’s evaluation, surgery, hospitalization and immediate post-operative care.

Will I be able to lead a normal life after donating a piece of my liver?
Yes, both donor and recipient can lead a normal life after surgery. We expect that most patients will return to a normal life within three months after surgery. Most donors can return to work within six weeks. We advise that women not become pregnant for at least three to six months after surgery.