## Site logo

## Frequently Asked Questions About Living Donation

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* [Can someone with herpes become a donor?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#herpes)
* [Will donating a kidney prevent you from becoming pregnant or fathering a child?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#pregnant)
* [Should I stop smoking before my surgery?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#smoking)
* [Should I stop drinking alcohol?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#alcohol)
* [Should I stop taking my medication(s) before the evaluation or the surgery?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#evaluation)
* [What should I bring with me to the hospital?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#bring)
* [If I am cleared to be a donor, how is it decided when the transplant will take place?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#cleared)
* [Once the transplant is scheduled, will it definitely happen?](http://www.transplantliving.org/living-donation/facts/frequently-asked-questions/#scheduled)

#### What is living donation?

An alternative for individuals awaiting organ transplantation from a deceased donor, living donation takes place when a living person donates an organ or part of an organ for transplantation to another person. Living donation usually involves a single kidney, a segment of the liver, the lobe of one lung, a portion of the pancreas or a portion of the intestine.

#### What organs can be donated by living donors?

Living donor transplants are a viable alternative for patients in need of new organs. Many different types of organs can be supplied by living donors, including:

* **kidney**   
  This is the most frequent type of living organ donation. All living kidney donors will experience a decrease in their kidney function, which varies depending on the donor’s age and medical history.
* **liver**   
  Individuals can donate a segment of the liver, which has the ability to regenerate and regain full function.
* **lung**   
  Although lung lobes do not regenerate, individuals can donate a lobe of one lung.
* **intestine**   
  Although very rare, it is possible to donate a portion of your intestine.
* **pancreas**   
  Individuals can also donate a portion of the pancreas.
* **heart**   
  A domino transplant makes some heart-lung recipients living heart donors. When a patient receives a heart-lung "bloc" from a deceased donor, his or her healthy heart may be given to an individual waiting for a heart transplant. Extremely rare, this procedure is used when physicians determine that the deceased donor lungs will function best if they are used in conjunction with the deceased donor heart.

#### What are the advantages of living donation over non-living donation?

Living donor transplants have many advantages:

* A living donor transplant may reduce your time on dialysis and/or years of waiting for a deceased donor organ.
* Some living donor transplants are done between family members who are genetically similar. A better genetic match lessens the risk of rejection.
* potential donors undergo a battery of tests to make sure they are healthy.

#### What are the qualifications for living donors?

In order to qualify as a living donor, an individual must be physically fit, in good general health, and free from high blood pressure, diabetes, cancer, kidney disease and heart disease. Individuals considered for living donation are usually between 18-60 years of age. Gender and race are not factors in determining a successful match. The living donor must first undergo a blood test to determine blood type compatibility with the recipient. If the donor and recipient have compatible blood types, the donor undergoes a medical history review and a complete physical examination.

The decision to become a living donor is a voluntary one, and the donor may change his or her mind at any time during the process. The donor's decision and reasons are kept confidential.

#### How do I ask someone to be my living donor?

Asking someone to be a living donor involves careful consideration that may create a variety of emotions. But for many people, the shift in thinking "I need to ask someone to donate an organ" to "I need to inform people about my situation and educate them about organ donation" can have a significant impact on your state of mind and willingness to talk to family members and friends. Talk to your transplant team about resources they can provide to help you through this process.

#### What are the costs related to living donation?

Most medical costs associated with living donation are covered by the recipient’s insurance. The government requires all certified transplant centers to charge a recipient's insurance an "acquisition fee" when he or she receives a transplant. The medical costs related to the donor's medical evaluation, transplant procedure and postoperative care, called the "donor protocol" are covered by this fee. Anything that falls outside of this protocol is not covered. These costs could include annual physicals, travel, lodging, lost-wages and other non-medical expenses.

#### Will I be entitled to disability pay?

If your job provides disability insurance coverage, then you will most likely be entitled to disability pay. Check with your employer.

#### What is related living donation?

Related living donors are healthy blood relatives of transplant candidates. They can be:

* + - brothers and sisters
    - parents
    - children over 18 years of age
    - other blood relatives (aunts, uncles, cousins, half brothers and sisters, nieces and nephews)

#### What is non-related donation?

Unrelated living donors are healthy individuals emotionally close to, but not blood related to transplant candidates. They can be:

* + - spouses
    - in-law relatives
    - close friends
    - co-workers, neighbors or other acquaintances

#### What is non-directed donation?

Non-directed donors are living donors who are not related to or known by the recipient, but make their donation purely out of selfless motives. This type of donation is also referred to as anonymous, altruistic, altruistic stranger, and stranger-to-stranger living donation. Individuals who are interested in becoming non-directed donors should contact transplant centers in their area to discuss the possibility of becoming a donor.

#### What is paired exchange donation?

A paired exchange donation consists of two kidney donor/recipient pairs whose blood types are not compatible. The two recipients trade donors so that each recipient can receive a kidney with a compatible blood type. Once the evaluations of all donors and recipients are completed, the two kidney transplant operations are scheduled to occur simultaneously.

#### What is kidney donor waiting list exchange donation?

If a paired exchange cannot be found, living donors in certain areas of the country may be eligible for living kidney donor list exchange. In this type of exchange, a kidney donor who is not compatible with their intended recipient offers to donate to a stranger on the waiting list. In return, the intended recipient advances on the waiting list for a deceased donor kidney. This type of living donation is also referred to as list-paired exchange and living donor/deceased exchange.

#### What is blood type incompatible donation?

This type of donation allows candidates to receive a kidney from a living donor who has an incompatible blood type. To prevent immediate rejection of the kidney, recipients undergo plasmapheresis treatments before and after the transplant to remove harmful antibodies from the blood, as well as the removal of the spleen at the time of transplant.

#### What is positive crossmatch donation?

The positive crossmatch process is similar to the process used for ABO-incompatible living-donor kidney transplants, where patients can receive kidneys from living donors with blood types incompatible with their own. Similarly, treating patients with plasmapheresis also greatly reduces the chance of organ rejection in patients with elevated antibody levels. Previously, these elevated antibody levels made tissue rejection almost certain. Positive crossmatch live donor kidney transplants are usually only performed if no other live donors (with a negative crossmatch) exist.

#### Is there risk with living donation?

All patients experience some pain and discomfort after a surgical procedure. And as with any major operation, there are risks involved. It is possible for kidney donors to develop infections or bleeding and when a portion of the liver or pancreas is donated, the liver or spleen may be injured.

#### What is involved in becoming a living donor?

Living donation is arranged through individual transplant centers according to their protocols.

#### Do some people have trouble making the decision to become a living organ donor?

Yes. Although some people can easily make this decision, many go through a bit of soul-searching before deciding. It's very normal to be afraid of giving away part of your body and to experience guilt about not wanting to be a donor.

#### Will I require a blood transfusion during my surgery?

Although blood transfusion during this surgery is uncommon, it may be necessary. As a precaution, you may be asked to donate one or two units of your own blood before the surgery. If you do need a transfusion, your own blood can be used.

#### Can someone with herpes become a donor?

Having herpes does not absolutely rule someone out for donation, but the disease should be well-suppressed at the time of donation.

#### Will donating a kidney prevent you from becoming pregnant or fathering a child?

No.

#### Should I stop smoking before my surgery?

You must stop smoking to be a donor, even if you are a light smoker. Smokers have an increased risk of cardiovascular and pulmonary complications with any surgery.

#### Should I stop drinking alcohol?

If you are going to be a donor, it is best that you stop drinking. If you have a history of heavy alcohol use, it is very important that you tell your physicians. Alcohol use may not prevent you from being a donor. You should not return to drinking alcohol after surgery until advised it is safe to do so by the transplant team.

#### Should I stop taking my medication(s) before the evaluation or the surgery?

You should not stop any prescription medication unless advised to do so by a physician. Be sure to tell your transplant physician and team about all prescription and over-the-counter medications you are currently taking.

#### What should I bring with me to the hospital?

You should only bring minimal belongings like a basic toiletry bag for your use in the hospital. Because the hospital will already have your insurance information, there is no need to bring any documentation unless you are specifically asked. Leave all jewelry or other valuables at home or give them to your family for safekeeping.

#### If I am cleared to be a donor, how is it decided when the transplant will take place?

This decision is made jointly by the transplant team, by you, and by the recipient. The transplant team, particularly the physicians involved directly in your recipient's care, will determine as accurately as possible the best time to do the transplant, based on the recipient's medical condition.

#### Once the transplant is scheduled, will it definitely happen?

A number of events could happen that may change the date of the transplant. For example, the recipient's condition might deteriorate to the point where he or she is too sick for a transplant. Or, the recipient or donor might develop an infection or some other condition that would need to be treated before the transplant could be done.

[Reference and Publication Information >](javascript:toggleElement('RefPubInfo');)

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* + - [University of Minnesota Medical Center, retrieved January 6, 2014](http://www.uofmmedicalcenter.org/Specialties/KidneyTransplant/Livingkidneydonorprogram/Tipsforfindingalivingdonor/index.htm).
    - [OPTN/UNOS Patient Affairs Committee](http://optn.transplant.hrsa.gov/members/committeesDetail.asp?ID=14" \t "_blank)

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### Did you know?

* [UNOS](http://www.unos.org) facilitates all organ allocation in the U.S.
* Every transplant hospital in the U.S. must meet specific requirements.
* There are many [financial resources](http://www.transplantliving.org/before-the-transplant/financing-a-transplant/) for transplants.
* [Living donation](http://www.transplantliving.org/living-donation/) increases the existing organ supply.
* It's important to get to know your transplant team.
* [Before the Transplant](http://www.transplantliving.org/before-the-transplant/)
* [Community](http://www.transplantliving.org/community/)
* [After the Transplant](http://www.transplantliving.org/after-the-transplant/)
* [Pediatric](http://www.transplantliving.org/pediatric/)
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* [Legal](http://www.unos.org/legal/index.php)
* [Site Map](http://www.transplantliving.org/site-map/)
* [Contact](http://www.transplantliving.org/community/contact-us/)
* [Espanol](http://www.trasplantesyvida.org/)

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