

Reply to Comment: A Worldwide Survey of Live Liver Donor Selection Policies at 24 Centers With a Combined Experience of 19009 Adult Living Donor Liver Transplants

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hank you for your comments on our article.1 This survey was done across a cross-section of liver transplant centers around the world. From Turkey, we invited Florence Nightingale Hospital to participate in it. The survey was not meant to be all inclusive but reflected donor selection practices in a cross-section of LDLT centers across the globe. The centers were chosen based on their research publications, case volume, experience, and approached by personal communication. This survey was conducted in January 2016 to understand the variability between centers, to provide new insights into live liver donor selection criteria, and to aid in their standardization. It was the first of its kind of survey, and no prior pilot study was conducted. We propose to conduct this survey every 5 years to learn the trends and changes in donor selection practices over time. We propose to include a larger number of upcoming pDDLT and pLDLT centers in future surveys.

The acceptable lower limit of donor age was 18 years at 22/24 centers, ¹ whereas the remaining 2—1 center each from Canada and South Korea—accepted donors as young as 16 years. Both these responses came from the developed world, where there are national committees to regulate donations. While in our own countries and respective centers, we do not accept minors for donation, the laws governing this vary in different countries and are reflected in their selection protocols.

As regards the upper limit of donor age, some centers from Japan, Taiwan, and Europe accepted donors up to 65 years. The population in most of these countries is older, with a longer life expectancy. Although these centers chose elderly donors, they followed more stringent selection criteria in this age group.

Finally, based on the practice at the majority of the centers, this survey recommends donor age between 18 and 60 years as ideal for liver donation, with stricter criteria for donors over 45 years.

Overall, this first of its kind survey was not designed as a consensus statement but only to highlight the widely varying practices of LDLT around the world. The policies presented in the survey are those of individual hospitals representing their respective countries in some cases, and not necessarily the personal opinions of the authors themselves. While our cross-sectional survey brought forth several interesting perspectives, an expanded survey in the future, which includes more centers, may reveal a wider realm of acceptable practices in live liver donor selection.

REFERENCES

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Received 7 August 2020. Revision received 31 August 2020.

Accepted 6 September 2020.

The authors declare no funding or conflicts of interest.

A.S.S. did final approval of the version to be published. R.J.C. participated in data acquisition, interpretation, drafting, and final approval. H.P. did data acquisition. E.P. did final approval of the version to be published.

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ISSN: 0041-1337/21/1052-e19

DOI: 10.1097/TP.0000000000003466

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