



Living Liver Donation: Medical Toolkit

CHAPTER • 2

Reasons to consider being a living liver donor

How does living liver donation help save lives?

Being a living liver donor means donating a part of your liver to a recipient whose liver doesn't work the way it should. A living donor liver transplant (LDLT) removes part of the donor's liver for transplant and leaves the rest in the donor's body.

Most liver patients are on a long wait list for whole livers from donors who have died (deceased donors). There aren't enough deceased donor livers, so each year almost 1 in 5 patients (about 18%) on the waitlist dies or gets too sick for a liver transplant.

Allowing living people to donate means more livers are available for transplant in a timely manner.

What are the benefits of a living liver transplant?

Compared to deceased donor transplants, living donor liver transplants:

- Can usually happen sooner, before the liver patient gets sicker
- Can be planned and scheduled ahead of time
- Lower the chance of the liver patient dying while waiting for a deceased donor transplant
- Raises the chance of a successful transplant because the liver patient may be less sick

What do I need to know about being a living liver donor?

The shape of your liver may prevent you from donating

The shape (anatomy) of a living donor's liver needs to allow enough blood flow that the liver can function and grow after donation. The transplant team will check on your liver's blood flow and size to decide if you can be a living donor.

Your body size may prevent you from donating

You may not be able to donate part of your liver:

- If you are very overweight (obese) because of higher chances of problems in surgery and fatty liver disease from obesity
- If you have a small body, because your liver may not have a part large enough for your intended recipient

Your transplant team will talk with you if these are issues for you.

Your intended recipient's health can affect if living donation will work for them

Certain liver problems can make living or deceased donation a better option for a recipient:

- Patients with **liver cancer (HCC)** who have been cleared for a liver transplant are likely to benefit from living donation. These patients need a liver transplant soon, before cancer spreads beyond their liver
- Patients with **acute liver failure (ALF)** in the US rarely get a transplant from a living donor because the recipient is very ill and may need a whole liver from a deceased donor for best results. They may get a deceased donor liver very quickly because of their ALF
- Patients who **need a new liver after a failed liver transplant** (retransplantation) may not be able to get a living donor or deceased donor transplant. Each case is evaluated carefully and can proceed only in certain cases.
- Patients with an **unusual liver problem** (such as cancer spreading from the colon to the liver, or cancer in the bile duct) may benefit from a living donor transplant
- Patients who **need both a liver and a kidney** need to consider with their transplant team if living donation (both organs from a single living donor or from 2 separate living donors) is reasonable and safe



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How can I learn more?

To learn more, see Chapter 3 on living liver donation for people with obesity.

REFERENCES

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Note: This information is the opinion of the Living Donor Community of Practice (LDCOP) of the American Society of Transplantation. The LDCOP is a group of health care professionals and researchers who specialize in living donation. The LDCOP's recommendations are meant to offer you helpful information, but you may find opinions from other groups or organizations that are helpful to you, too.