

AJT Publishes DTAC Analysis of Donor-Transmitted Disease

Among transplantation's lifesaving benefits, there is some risk that a disease in the donor can be conveyed to recipients. The OPTN/UNOS ad hoc disease transmission advisory committee (DTAC) investigates reports of potential disease transmission from donor to recipient, both to assess the risk of transmission and recommend measures to reduce future risk or improve the treatment of recipients with a donor-derived disease.

In the August issue of the *American Journal of Transplantation*, the DTAC, for the first time, summarized its investigation of reports of potential donor-derived transmission events in the United States. The article chronicles events reported from 2005 (the first full year such data were collected) through 2007.

Reporting of potential events continued to increase each year of the study period; the increase likely was not an indication of higher rates of disease transmission but, instead, an improvement in reporting. Because more specific classification was available for the 2007 reports, the analysis focused on that year in greatest detail.

The overall frequency of reports of potential disease transmission was very low, accounting for 0.96 percent of all deceased donation in 2007. In most reports, either transmission could not be proven or there was no reported illness in a recipient.

A significant proportion of proven transmission events, however, resulted in death or illness among transplant recipients. Given that multiple organs can be transplanted from the same deceased donor, multiple recipient outcomes could be linked to the same donation event.

The analysis identified seven proven malignancy transmissions from deceased donors in 2007 as well as five proven and two probable donor-derived infectious disease transmissions. Nine reported deaths were attributable to eight proven cases of donor transmission events during 2007.

The authors caution that the true incidence of donor-transmitted disease is not yet known, but improvements in reporting and following such cases should clarify the risk over time. The DTAC is working to educate the transplant community about identifying and reporting potential events and enhancing its methods of analysis. [U](#)

Preparing for H1N1, Implications for Transplantation


Reports this year from Australia and Argentina have shown the U.S. health-care community the significant impact of the H1N1 influenza virus. Because H1N1 is a new strain of virus, there is no acquired immunity, especially among younger populations.

That fact, coupled with the virus' transmissibility, means that a large number of people may be unable to report to work this winter, either because they're sick or must stay home to care for sick (or quarantined) family members.

In other words, there will likely be fewer people able to report to work and, because some of them will be health-care workers, there will be fewer staff able to report to clinics and hospitals. And, because H1N1 has been shown to have serious respiratory and gastrointestinal manifestations, the facilities themselves will also be strained, with shortages of critical resources, such as ventilators and ICU beds.

The implications for the transplant community are clear. OPOs and transplant centers must do everything they can to prevent spread of the virus among their staff. They also must take precautions to prevent possible transmission of the virus from donor to recipient(s).

To help prevent donor-transmitted H1N1, the OPTN/UNOS ad hoc disease transmission advisory committee, in consultation with the OPTN/UNOS thoracic organ transplantation and liver and intestinal transplantation committees, have developed an initial set of comprehensive guidelines, which UNOS and HRSA have made available on the news sections of their websites (unos.org > news and <http://optn.transplant.hrsa.gov>). OPOs and transplant centers are strongly encouraged to read the guidelines and put them into practice as soon as possible. [U](#)

 Future updates will be posted to the newsroom section of the UNOS and OPTN websites. Also refer to these online resources for related information and developments:

- cdc.gov/h1n1flu
- flu.gov
- cdc.gov/h1n1flu
- a-s-t.org/files/pdf/ast_h1n1_guidance.pdf
- ishlt.org
- transplantation-soc.org/downloads/AST%20TTS%20H1N1%20Guidance%20Document%20disclaimer%209-22-09%20PDF%20FINAL.pdf