



KIDNEY TRANSPLANT PROGRAMM FINLAND

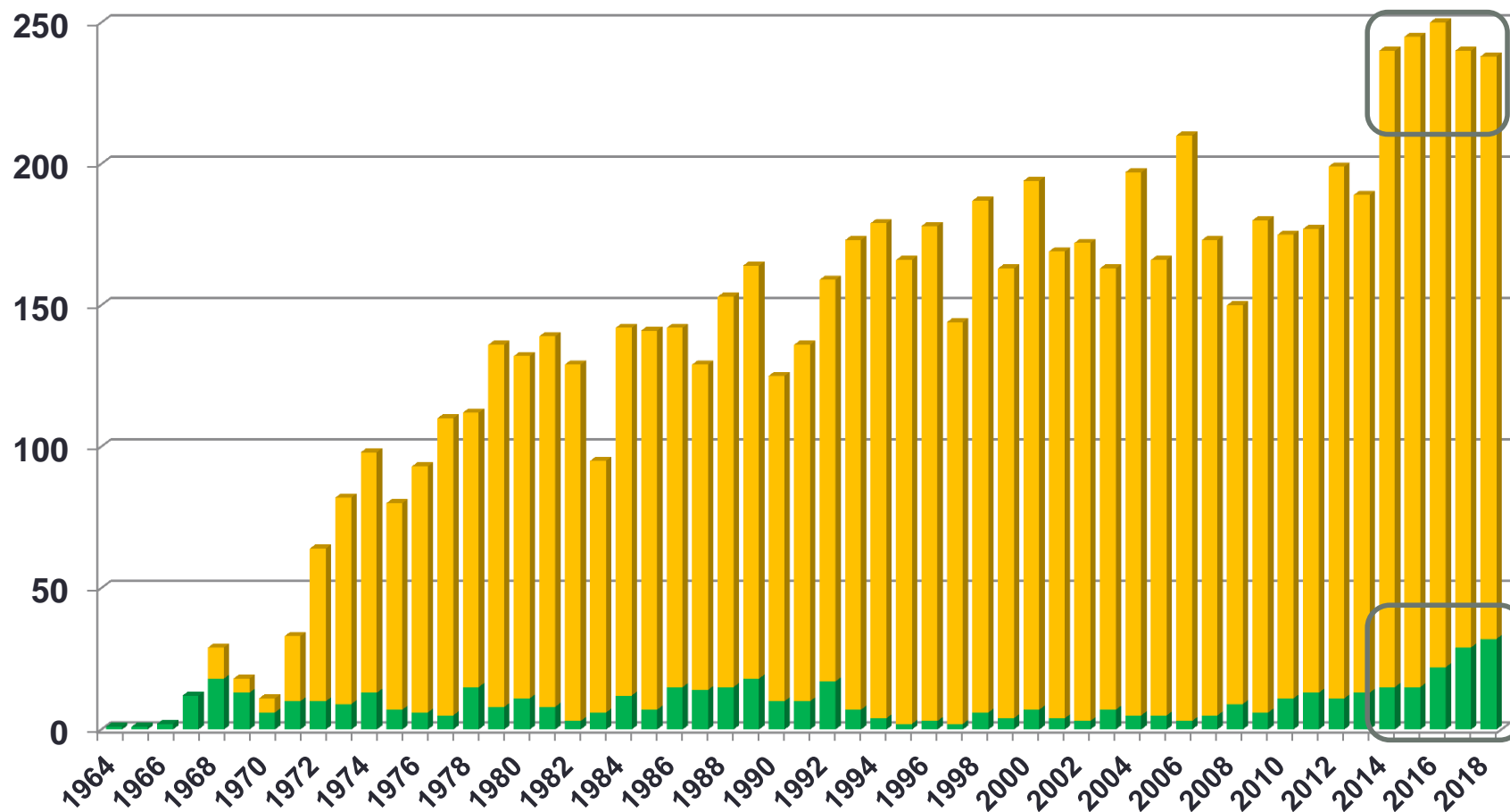


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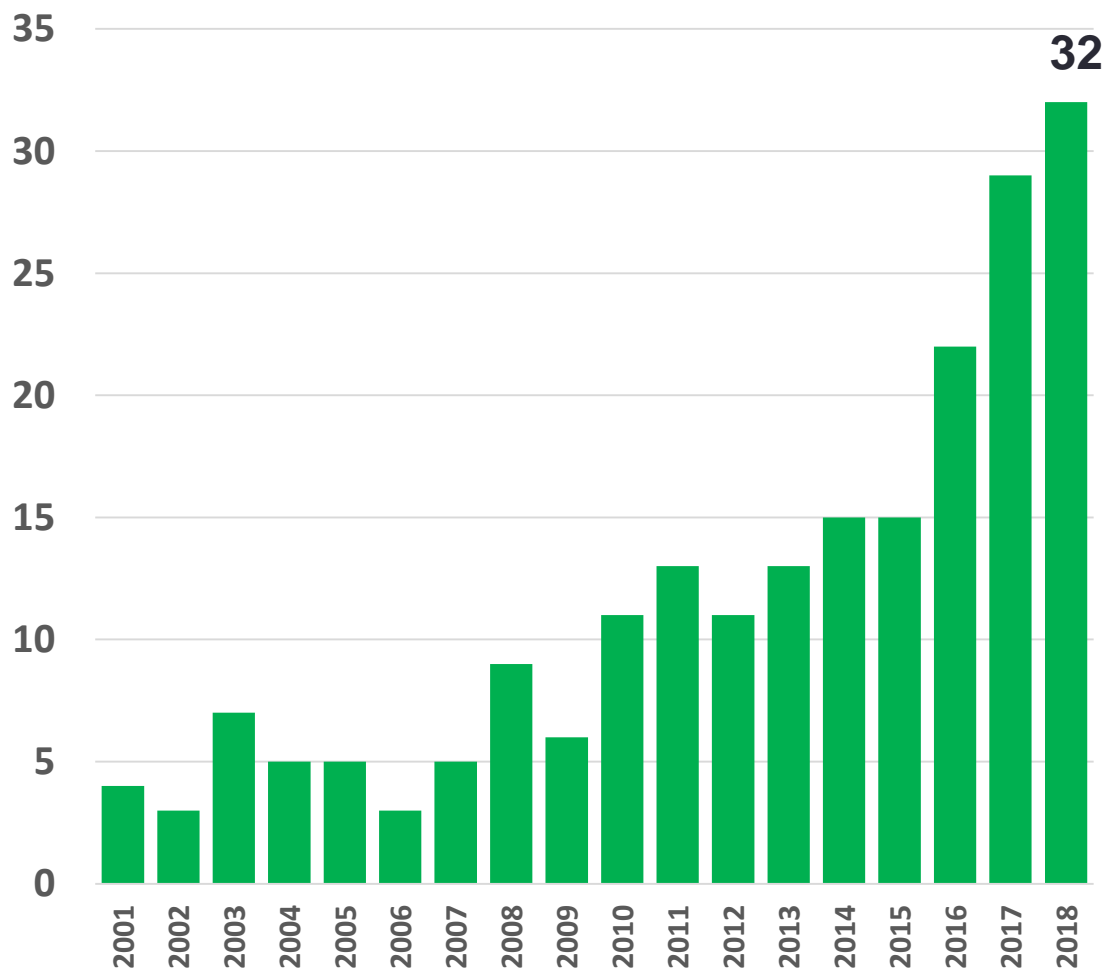
Kidney transplantations since 1964

Total number 7597

■ Living ■ Cadaveric



Kidney transplantations living donation



← year 2018

Helsinki 5.8 pmp year 2018

Scandiatransplant 13 – 14 pmp
year 2018

Publications of the Ministry of Social Affairs and Health 2014:23

Ministry goal 10 pmp year 2020

**National Action Plan on
Organ Donation and
Transplantation**
2015–2018

PRACTICES AND LEGISLATION

HISTORY

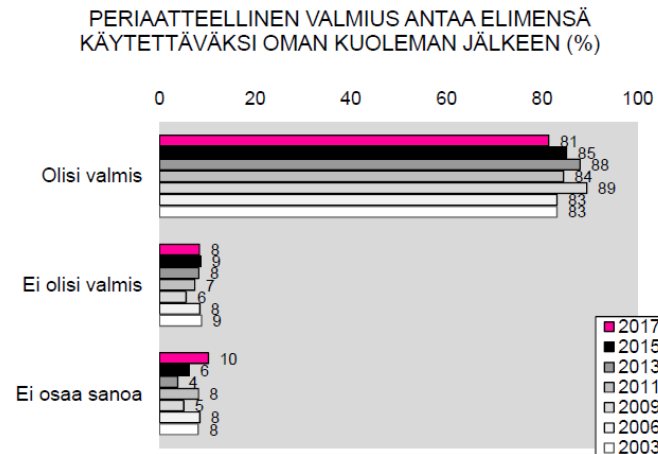
Brain death officially accepted in Finland 1971

- Tradition to promote cadaveric donation (DBD)

Attitudes towards organ donation

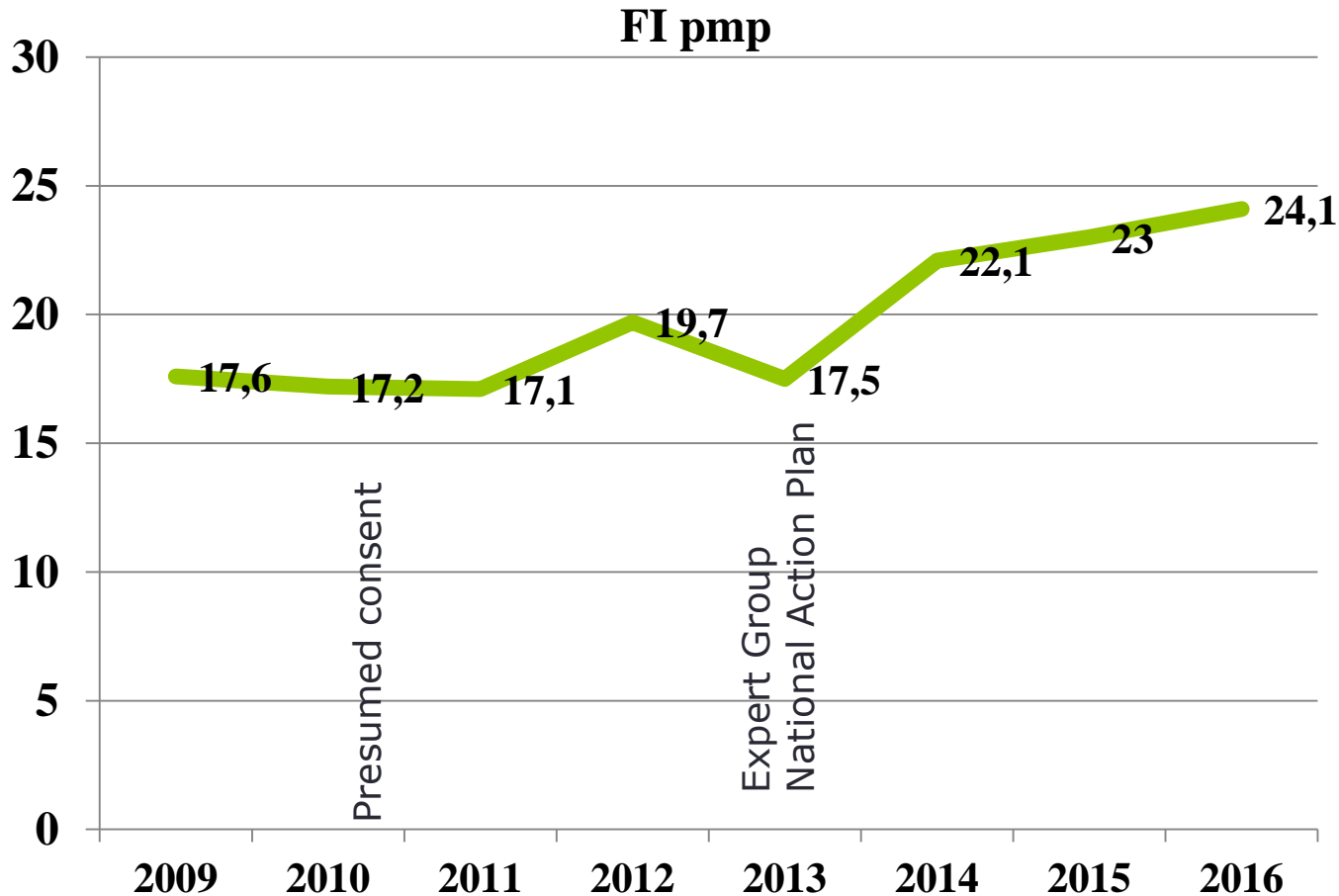
Survey 20.2. – 3.3 2017 Finnish Kidney and Liver Associations
(Ages 17-79 years)

Survey 2017 **81 % would be willing to donate** organs after death, **only 8 % against**
3 % margin of error



Finland DBD pmp

population 5,5 milj



Year 2018
FIN 20 pmp
Scandiatx 18pmp

CONVENTION FOR THE PROTECTION OF HUMAN RIGHTS AND DIGNITY OF THE HUMAN BEING WITH REGARD TO THE APPLICATION OF BIOLOGY AND MEDICINE:

CONVENTION ON HUMAN RIGHTS AND BIOMEDICINE

Chapter VI

Organ and tissue removal from living donors for transplantation purposes

Article 19

General rule

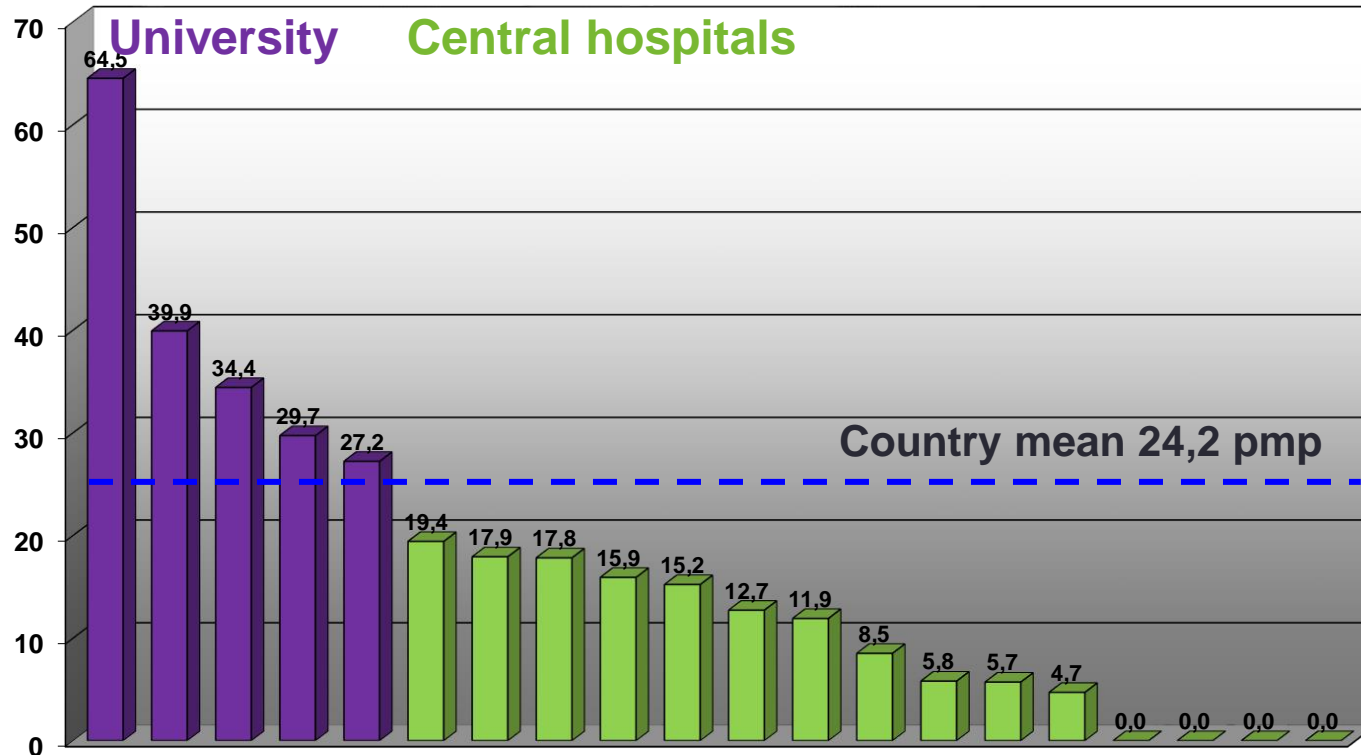
1 Removal of organs or tissue from a living person for transplantation purposes may be carried out solely for the therapeutic benefit of the recipient and where there is no suitable organ or tissue available from a deceased person and no other alternative therapeutic method of comparable effectiveness.

To promote cadaveric donation

- Finland has ratified **Convention of human rights and biomedicine 2009**
 - cadaveric transplantations to be promoted
- Shall we start DCD (donation after circulatory death)
 - All other scandinavian countries have started or are planning
 - A finnish expert group is nominated to plan protocol
- There are huge differences between catchment areas

Brain death donors in different hospitals per million populations (pmp) 2016

pmp



Living donation legislation in Finland

- Legislation has allowed living donation only between the first grade relatives (e.g. from parents to child, between siblings) or emotionally related (limited for persons using the same kitchen)
- New initiative in summer 2016 to change the Act
- Parliament accepted 14th Jan 2019 new Act
 - come into force 1st March 2019
 - allows also altruistic donation

Living donation

- Voluntary
- No coercion
- No financial benefit for the donor

TO PROMOTE LIVING DONATION ?

after 1st March 2019 living donation is
possible in larger scale

Reasons to increase paired exchange

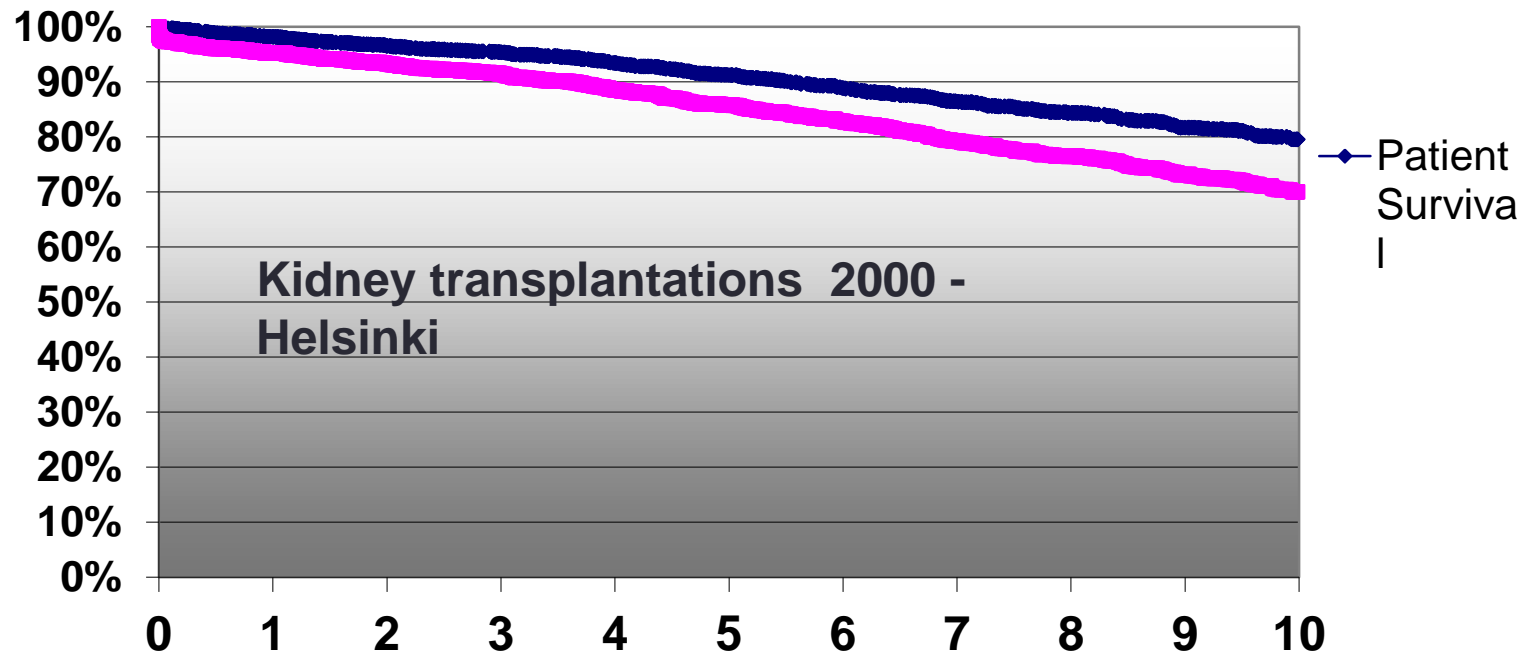
- ABO incompatibility
- Immunological

Other options to deal with these problems

- Successful transplantation using specific protocol over blood groups
- Desensitization protocols
STAMP
LAMP

Graft survival time...

	Longest time	Function
Kidney living donor	46 years	Still functioning
Kidney cadaveric donor	43 years	Still functioning



Kidney paired donation and chains

	Single center	Multicenter
Donor transport	Not required	Required
Shipping of kidney	Not required	Required
Surgical team skills	Same	Different
Cold ischemia time	Less	More
Follow-up	Same center	Difficult to follow-up

Valid informed consent ?

No medical benefits to the donor

Concern about voluntariness

Withdrawal of consent

Global kidney exchange

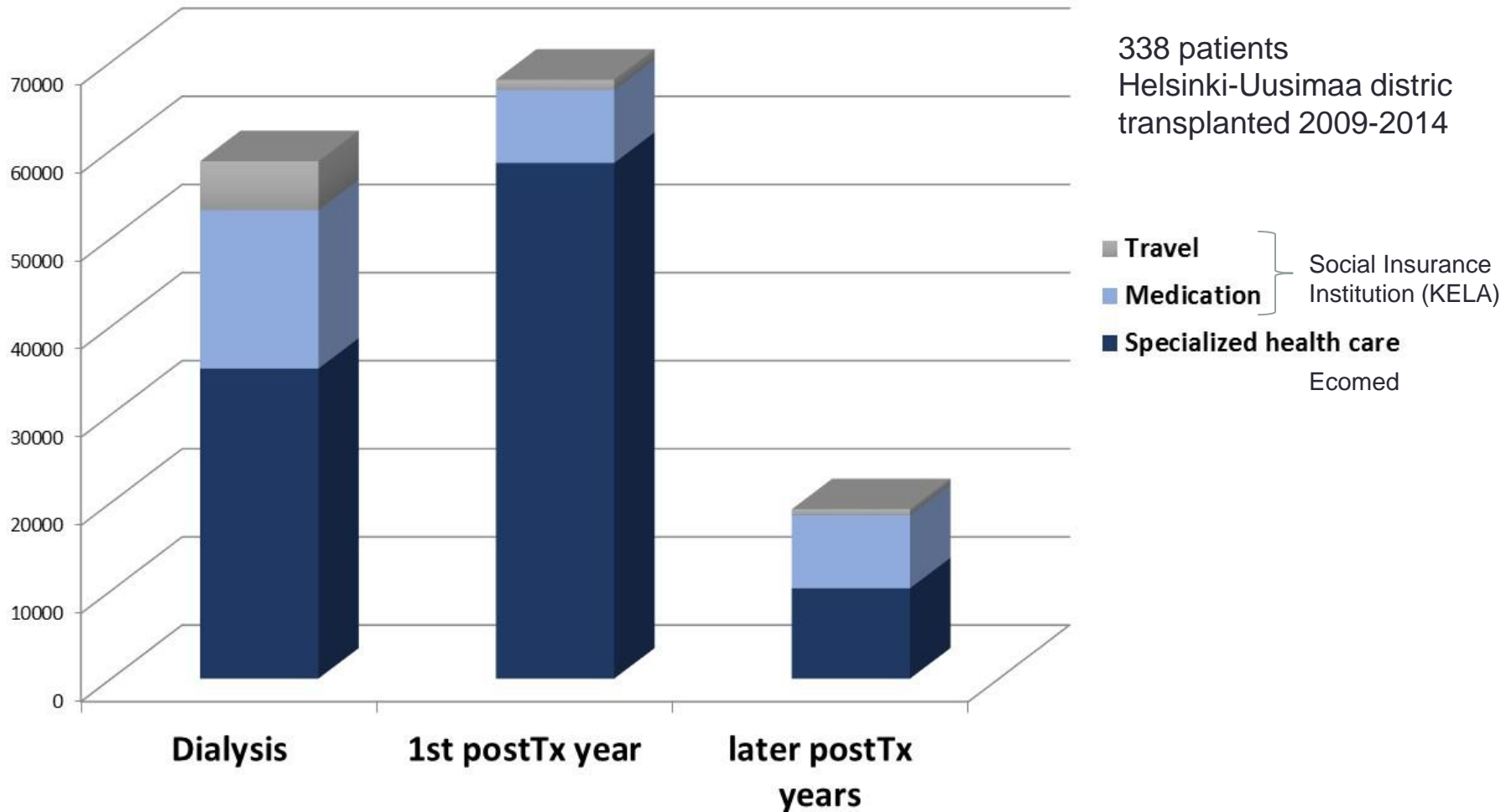
STATEMENT ON A PROPOSED CONCEPT OF GLOBAL KIDNEY EXCHANGE

European Union National Competent Authorities on Organ donation and
transplantation

In the light of the concerns listed above, the NCAs consider it inappropriate for any transplant center in the EU to participate in the proposed GKE scheme

- might infringe the fundamental principle of the non-payment for human organs,
- does not provide clear and adequate mechanisms to ensure the protection of the donor from the LMIC, neither during the selection process nor in the long-term, or
- implies a risk of coercion of potential donors in LMIC, as they might be offered a direct or indirect financial gain in exchange for their kidney;

Costs for renal replacement treatment



Near future in Finland

Main goals

- **Cadaveric donation**

- To increase DBD numbers up to 30 pmp – equalize the differences between catchment areas
- DCD donation after circulatory death

- **Living donation**

- Aim to increase living donation between relatives and emotionally related persons – to accept also altruistic donation
- **National** paired kidney exchange – exchange between two incompatible pairs

KIDNEY TRANSPLANTATION IS COST EFFECTIVE TREATMENT

.. but it should not be done at any cost –with respect of the society and ethically accepted way of acting