

Transplant Services

Fall 2023 Newsletter



Kidney Transplant and Living Donation: What Are The Facts?

If you have advanced kidney disease, you may be eligible for a transplant. You will need to be evaluated by a transplant center, like Presbyterian Transplant Services in Albuquerque, NM, to determine if you are a good candidate for transplant. In general, if you have chronic irreversible kidney disease, are on dialysis now or close to needing dialysis, you may qualify. You may not qualify if you have additional life-threatening diseases or infections that cannot be treated.

If you are eligible for a transplant, a kidney from a living donor can offer patients with chronic kidney disease an alternative to waiting many years for a kidney from a deceased donor. Kidneys from a living donor can be transplanted sooner and patients usually experience fewer complications. In general, living donor kidneys also function longer than deceased donor kidneys.

Can anyone donate a kidney? In most cases, if you are in good health with normal kidney function and anatomy, you can be a kidney donor. There are some medical conditions that might prevent you from being a living kidney donor.

How do you find a living donor? You can ask friends or family members to see if they would be willing to donate one of their healthy kidneys to you. There is also an evaluation process for all living donors to make sure they are healthy enough to have surgery, as well as making sure they are a good match for you. Both eligible transplant recipients and donors can begin the process by filling out this online form: https://phs.donorscreen.org/register/now.

If you are unable to find someone you know to be your match, you can use a program like the National Kidney Registry that matches people all over the country with living donors. https://www.kidneyregistry.org/.

For more information about living donation, please call our living donor coordinator, Melissa Rains, RN, MSN. Melissa can be reached directly at (505) 563-6472 or by email at **mrains3@phs.org**.



Scan this QR code to visit our website for more information about Presbyterian Transplant Services and living donation options. You also can call our office for more information at (505) 841-1434 or toll free at (800) 597-7217.

Team Member Spotlight

Brenda Frazer has been an Independent Living Donor Advocate for the last two years. In her own words:



I am happy to advocate for the donor and to address all their questions and concerns. The donor's decision is supported during the process all the way up to the time of transplant, even if their decision changes.

Recovery is important, and we confirm the importance of post-surgical follow-up. I am amazed by donors' strength, determination and progress during the recovery period.

The affirmation of the donor's decision to give their gift of a kidney is heartwarming. When reading the sentiments in letters that recipients have written to donors and their families, I am reminded by the value we can bring to each other in life. I truly enjoy my role in support of our patients in the Transplant Services department!

Myths about Living Donation

Myth: A living donor must be a relative of the transplant

recipient.

Truth: A living donor can be a spouse, friend, coworker or even someone that you don't know!



Myth: There is a lot of cost to being evaluated as a kidney donor and the surgery is very expensive.

Truth: All costs related to being evaluated to become a living donor, as well as the donor surgery, is paid for by the transplant center or covered by the recipient's insurance. Also, there may be funding available to help with travel and lodging during and after the surgery.

Myth: The donor surgery is complicated and will cause many limitations to the donor's normal life and function after donation.

Truth: The donor surgery is laparoscopic, which means there are just four small incisions used to remove the kidney. Most donors are discharged from the hospital in 2-3 days and can return to work in 2-4 weeks, depending on the type of work.

Myth After kidney donation, the donor will have to be on medication or follow a special diet and will not be able to exercise or participate in sports activities.

Truth: Prescriptions for pain and stool softeners may be needed in the immediate postoperative period only. A donor should eat a healthy, well-balanced diet, but there are no dietary restrictions after donation. A donor should be able to return to regular activities and exercise about 4 to 6 weeks after surgery.

Important information regarding open enrollment: If you or someone you know is in the process of waiting for a kidney transplant and get the option to change insurance providers during an open enrollment period, please contact the transplant social worker or transplant office to discuss the importance of insurance coverage for transplant **BEFORE** changing insurance providers.

Presbyterian Transplant Services currently accepts the following insurance providers*:

- Amerigroup Medicare
- BCBS Commercial (limited as some plans have exclusions)
- BCBS Medicare PPO ONLY
- Medicare
- Medicaid
- Optum Health UHC, NMMIP, True Health
- PHP Commercial, ASO, Centennial and Medicare
- Western Sky Community Care Medicare and Centennial (also known as Wellcare by Allwell)

*Presbyterian is also able to work with other insurance providers and obtain authorization for transplant under special circumstances.

Team Member Spotlight

Leonard Romero, MD, nephrologist, has been providing kidney care at Renal Medicine



Associates and medical services at the Presbyterian Transplant Program since 2008. Dr. Romero graduated from The University of New Mexico School of Medicine, completed his residency in internal medicine at UMass Memorial Medical Center in Worcester, Massachusetts, and completed his nephrology fellowship at UNM.

Dr. Romero has helped develop and has strengthened the living donor program, working to increase awareness of organ donations. He has been involved in policy development, evaluating potential kidney donors, providing guidance for safety and monitoring the outcomes of those who have donated a kidney. Dr. Romero played a vital role in establishing a partnership between the transplant program and the Kidney Paired Donation (KPD) program, a joint program that allows for incompatible kidney donors and recipients to exchange kidneys with people from other transplant programs across the country.

Dr. Romero is a native New Mexican. Outside of work, he enjoys new adventures while exploring our beautiful world, including scuba diving along reefs, finding the best eats in foreign countries, and skiing and hiking the Rockies.