

XII Congreso Nacional de GESIDA XIV REUNIÓN DOCENTE DE LA RED DE INVESTIGACIÓN EN SIDA Málaga 29 noviembre - 2 diciembre 2021



## HIV-positive Donor to Positive Recipient Renal Transplantation (RT): A Nationwide Survey

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#### **Introduction / Objectives**

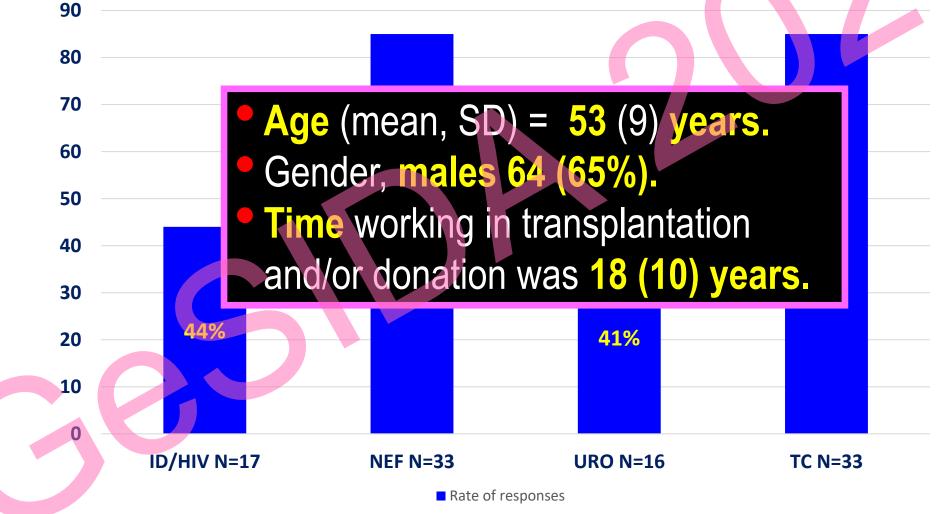
- HIV+ donor organs (mostly kidney) can now be transplanted into HIV+ recipients (HIV D+/R+) with endstage organ disease in several countries (South Africa, USA, Europe). Spain has the world's highest donor rate, but using HIV+ donor organs is forbidden by law since 1987.
- This nationwide survey canvassed RT teams on this new strategy and their attitude toward HIV D+/R+ KT.

#### **Methods**

- The survey was performed in 2018-19 and was sent to the four members of RT teams (specialists in HIV/infectious diseases (HIV/ID), Nephrology (NEPH), urological surgery (URO SURG) and transplant coordination (TC)) in the 39 Spanish adult RT centers.
- Standardized questions were answered through a questionnaire (REDcap software) using an analog scale from 0 (fully disagree) to 10 (fully agree).
- The responses were correlated according to the specialty of the RT team.

# **Results: Demographic data from 39 RT teams (100%)**

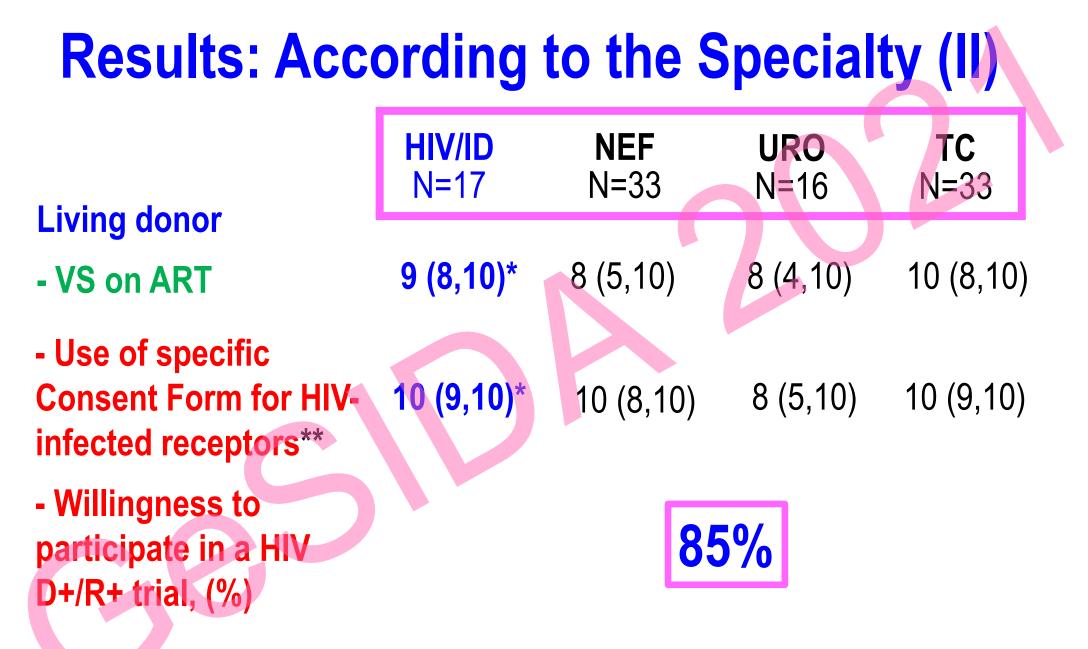




HIV/ID: HIV/infectious diseases; NEF: Nephrology; URO: Urology; TC: transplant coordination teams.

<b>Results: According to the Specialty (I)</b>					
	<b>HIV/ID</b> N=17	<b>NEF</b> N=33	<b>URO</b> N=16	TC N=33	
Deceased donor					
- VS on ART**	10 (9,10)*	9 (7,10)	8 (7,10)	10 (8,10)	
- No VS off ART	1 (0,7)	2 (0,5)	1 (0,4)	3 (1,8)	
- HIV diagnosis at transplant evaluation	1 (0,5)	2 (0,5)	1 (0,5)	4 (1,8)	
- High risk donor, HIV-**	9 (8,10)	8 (6,9)	7 (2,10)	10 (8,10)	
- Serodiscordant HIV- donor but HIV+ couple	9 (8,10)	8 (6,9)	7.5 (5,10)	10 (8,10)	

VS = HIV virologically suppression; ART = Antiretroviral therapy; HIV/ID: HIV/infectious diseases; NEF: Nephrology; URO: Urology; TC: Transplant coordination teams. 0 = Fully disagree; 10 = Fully agree. \* Median (IQR) \*\* **P value: <0.05.** 



VS = HIV virologically suppression; ART = Antiretroviral therapy; HIV/ID: HIV/infectious diseases; NEF: Nephrology; URO: Urology; TC: Transplant coordination teams. 0 = Fully disagree; 10 = Fully agree. \* Median (IQR); \*\* **P value: =0.058** 

### **Results**

- There were no differences by age, gender or transplant activity.
- The reasons for not participating (N=15, 15%) in a potential HIV D+/R+ trial were: Use optimal donors, 5 (33%); Contraindicated by Spanish law, 2 (13%); Lack of evidence, 2 (13%); No need in Spain, 2 (13%); and, Other reasons, 4 (27%).
- **Potential number of donors last 20 years (only TC)**: Virologically suppressed, 60 cases; High risk/Serodiscordant: 7 cases; No virologically suppressed, 26; and, living donors, 34. Two-thirds of the cases in the last 10 years.

## Conclusions

- Most Spanish RT team specialists **would use** kidneys from virologically suppressed HIVinfected deceased or living donors for HIV-infected recipients with indications for RT.
- Conversely, they would not use organs from donors that were not HIV suppressed or in which HIV-infection was diagnosed at the time of transplant evaluation.
- In recent years, the number of potential HIV+ donors from both cadaver and living donors has increased.
- The results of this survey could initiate a change of the donor law in Spain.





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