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## Model for deceased donor transplantation- Tamil Nadu experience

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Tndia lags behind in the world average rate of the deceased donor per million. India with a population of 1.2 billion has a ♣renal transplantation rate of 3.25 per million population, which is very low when compared to countries such as Spain, United states of America, Portugal and Thailand. There is a huge burden of morbid disease like diabetes and hypertension in India. The crude and age adjusted incidence rates of end stage renal diseases are estimated to be 151 and 232 per million populations in India. In case of ESRD the only hope for the patient is organ transplantation. This is because the survival rate of the patients after reaching ESRD beyond 3 months is <10%. This signifies how important organ transplantation is in today's scenario in India. Number of deceased donor per million populations per year for USA, UK, Thialand and India are 21, 15, 1, and 0.12 respectively. Why there was a need for a model for transplantation because due to imbalance between supply and demand, commercialization of the organs increased in various parts of India. This has led to formation of a model for deceased donor transplantation by Tamil Nadu government in clamping down the commercialization of live organ transplantation and promotion of the deceased donor transplantation. The government of India promulgated the transplantation of Human organ Act in 1994 after which deceased donor transplantation initiated. In 2007, Tamil Nadu government decided to make policies and new frameworks to form a model. Deceased donor transplantation is well suited to the main source for organ transplantation requirements. It can save lives and eliminate commercialization, without any moral compulsion on near relative to donate organ and would benefit rich and poor. The structure of this model is comprised of anchor, called the convenor. The convenors role is to maintain a list of recipients awaiting transplantation and allocate organs, call meetings of the advisory committee, collect data on transplantation and take up generation awareness programme.

To maintain the transparency of the programme, all the allocation and prioritization of the organs is done under the norms of government orders given by the ministry of family and welfare. Tamil Nadu Cadaver transplant programme facilitated the retrieval of 2460 organ and tissues from 445 donors from October 2008 to 31 January 2014. Out of total organs 814 kidneys were retrieved from 445 donors. It is ten times as compared to the rate of whole country. The deceased donor transplantation programme is successful in Tamil Nadu because this programme is the outcome of a collaborative effort between state government, private sectors and NGOS, the Tamil Nadu model can be a good example for spreading awareness of organ donation in other states of India and other developing countries that can follow this model to eliminate commercialization.

## **Biography**

Ashish Verma graduated in medicine from Govt. Stanley Medical College, Chennai. After that, he worked as a research affiliate in the Dialysis Vascular Access research group in University of Cincinnati Medical center. He worked as junior resident and clinical research assistant in Department of Kidney, Urology and Transplantation in Madras Medical Mission Hospital. He has published cases and manuscripts in peer reviewed journals and also presented abstracts in international Congress. Currently He is a Clinical Research Assistant in the Department of Nephrology in MMM Hospital.

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