Reply to the Letter to the Editor: Organ Utilization From Deceased (Non-Heart-Beating) Donors

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Dear Editor,

As a reply to the Letter to the Editor written by Yıldız (1), first we are thankful for the interest in our studies.

With regards to the first question:

In fact, both kidneys of the donor were accepted for transplantation in other transplant centers of EUROTRANSPLANT and were actually transplanted. Unfortunately, we have very limited access to the data of these transplantations and cannot report on the postoperative clinical courses, laboratory values and ultimately outcomes.

With regards to the second question:

We think that a common misunderstanding in terms of warm ischemia times needs to be addressed to interpret the different results and time periods.

For a better understanding we would like to clarify the definition of warm ischemia time used in the presented study. Warm ischemia time was defined as the time interval needed for the implantation of the graft in the recipient, hence the anastomoses time. Yıldız and colleagues refer to an alternative definition of warm ischemia times, which occurs during organ procurement in non-heart-beating donors: the time interval needed to establish vascular access and start the cold preservation. This is of importance: while both time intervals are warm ischemia times, the former presents a period during which the organ is coming from the cold and is slowly rewarmed in the recipient's body, before blood reperfusion is established. The latter one resembles a time period during which the organ

Received: 03.01.2018
Accepted: 05.01.2018

remains at 37°C in the recipient in an ischemic state, subsequently with higher metabolic demands and higher potential of harms to the allograft.

Non-heart-beating donors are not used in Germany at all. The presented study does not report data from a non-heart-beating donor

but reports data from a heart-beating-donor with history of cardiac arrest.

References

1. Yıldız I. Organ Utilization From Deceased (Non-Heart-Beating) Donors. *Chirurgia (Bucur)*. 2018. doi: 10.21614/chirurgia.113.270