

**GLOBAL TRANSPLANT POLICY: Expert view on WHO statement  
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An updated World Health Organization (WHO) statement on human organ and tissue transplantation calls for consistent international standards in transplant policy, increased use of living kidney donors, and efforts to address the growing problem of international trafficking in human organs.

The statement also endorses continued development of animal organs for transplantation (xenotransplantation), with caution to prevent spreading infections to humans. The WHO statement, along with commentaries by leading transplant specialists, appears in the 27 March 2005 issue of *Transplantation*.

Dr. Abdullah S. Daar of University of Toronto points out that WHO's encouragement of living kidney donors is the opposite of a 1991 statement, which called for living donors to be used only as a last resort. While acknowledging the potential for abuse, Dr. Daar urges WHO to help countries implement recommendations for the care of living donors around the world—especially in developing countries, which are likely to see the fastest growth in transplantation.

Dr. Francis L. Delmonico of Harvard Medical School notes that this and other shifts in WHO transplant policy have been driven by the realities of modern transplantation practice. From 1991 to 2004, experience has shown that there will never be enough cadaver organs to meet the demand, while living-donor organs actually provide a higher chance of success. Where

WHO once required living donors to be genetically related to recipients, unrelated donor kidney transplants are now routinely achieved.

The previous statement prohibited any payment for organ donors, whereas at least one country (Iran) has initiated a successful government-sanctioned program in which donors are paid. Dr. Delmonico endorses WHO's call for action to protect the poorest and most vulnerable populations from "transplant tourism." He also urges continued efforts to develop xenogenic organs—specifically, "a reliable line of pig organs"—to obviate problems related to the use of living donors and to the sale of donor organs.

Dr. Megan Sykes of Massachusetts General Hospital applauds the call for controls to prevent transmission of infections from animal donor organs to human recipients. However, she points out that xenotransplants are already being carried out in countries that lack recommended guidelines and oversight. She urges industrialized nations to provide the resources needed to develop worldwide xenotransplantation policies and procedures.

Dr. Jeremy R. Chapman of Westmead Hospital, Australia, expresses concern that WHO's call for Member States to "cooperate and harmonize global practices" for transplantation may prove unachievable. He points out that countries continue to follow differing policies for blood transfusion, "for both good and bad reasons." Efforts to regulate transplantation will meet with unfamiliar obstacles, such as the need to regulate individual laboratories and hospitals.

Dr. Chapman highlights the special need for global cooperation in regulating hematopoietic stem cell (HSC) transplantation between matched bone marrow donors and recipients. He cites a recent World Marrow Donor Association report estimating that failure of Member States to

"urgently and actually harmonize" their regulatory approaches could lead to an immediate 35 percent reduction in access to HSC transplantation worldwide.

Peter Morris and Tony Monaco, Special Features Editors of the Journal, feels that the updated WHO statement has appeared at an appropriate time in that the transplant community is now probably more receptive than ever for the development of international standards in transplantation. This could be done under the umbrella of the WHO and the Transplantation Society, who could help to coordinate the efforts of national and regional transplant organisations. In this context the recent international forum on the Living Donor in Amsterdam ( sponsored by the Transplantation Society - see supplement attached to this issue of Transplantation) shows how consensus can be reached in one area of concern to the WHO. This provides a model which could be expanded to carry forward the WHO recommendations.