Travel Grant Report Form

Name and origin of applicants
Jenni Kippola and Niina Peltonen. Living Donor Coordinators, Helsinki University Hospital, Finland

Purpose granted
Study visit to Tartu University Hospital, nephrology and transplantation unit
Study visit to Aarhus University Hospital, nephrology and living donor coordinators

Amount granted
16 000 DKK in total for visiting both Tartu and Aarhus (8000 DKK for each coordinator)

Time and place of visit
Tartu University Hospital Estonia 31.5.2023
Aarhus University Hospital 8.-9.11.2023

Report from Tartu

On one day visit to Tartu University Hospital we had an excellent possibility to meet and discuss with many professionals involved with living donor kidney transplantation in Estonia.

Neprologist Külli Kolvald hosted us around the hospital and had arranged meetings with director dr Virge Pall, transplant coordinators, nephrologists, surgeon Priit Veskimäe, laboratory specialists Astra Västrik and Kaie Lokk (immunology and tissue typing lab) and pediatrician Inga Vainumäe.

Following issues were discussed:
-how living kidney donors receive information about the possibility to donate and how they are informed about donation process and related risks

-how living kidney donors are evaluated in Estonia

-how living kidney donors are followed up after donation

Cooperation between our centers happens with pediatric kidney transplantation for children under 15kg. Our main interest is more specifically in cases where there is a living donor involved.

Basic process of living kidney donation is very similar in Tartu and Helsinki. Nephrologist can inform patients about the possibility of finding a donor within the family. According to Estonian law donor has to have an emotional connection with recipient. Anonymous living donation is not possible like in Finland.

Potential donors meet with nephrologist to receive information about donation process and risks related to living kidney donation. There is similar written information to living donors in Estonia and Finland.

Evaluation and examination process of donor includes same routines as in Helsinki (extensive laboratory testing, kidney ultrasound, combability testing and CT scan). Major difference is that in Finland living donors’ psychosocial evaluation is conducted by psychiatrist, in Estonia by psychologist. In Finland most living kidney donors are also checked with specific kidney functions tests; glomerular filtration test and renal function scintigraphy. In Estonia these are not done routinely.

**Report from Aarhus**

Program In Aarhus:

**Wednesday November 8th:**
9:00 Meeting with Ilse Duus Weinreich, Clinical Data and Office Manager, Scandiatransplant

Thorough discussion with Ilse on history and organisation of Scandiatransplant. Practical organisation of Scandiatransplant co-operation.

10.00 "Tour of Nyresygdomme", the ward, klinik and meeting our Transplant coordinators.

Visits to both kidney outpatient unit and ward. Meeting and some discussion with transplant coordinators.

13.00 Transplant conference

Possibility to observe how living donor cases are evaluated in Aarhus. Discussion with nephrologist and surgeon about similarities and differences on organizing living donor evaluation and transplantation in Finland and Denmark, also discussion on differences between different transplant centers within Denmark.

**Thursday November 9th:**
7.30: Sending of a donor to the OR. Meeting with living kidney donor in the morning, prior to donor operation.
8.00: Getting a family ready for Transplant. Following some pre-op routines with living donors coming to an operation.

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**Evaluation - Tartu**

We now have a better understanding about each other's routines and written list of documents that need to be provided when living donor from Estonia is operated in Helsinki.

At the end of the visit, we agreed that there is good co-operation between Tartu and Helsinki transplantation units and that we continue to develop our routines in common living kidney donor cases further.

Study visits like this are important between co-operating transplant centers, in order to enhance communication between professionals, enabling safer and more fluent experience for donors and patients.

**Evaluation - Aarhus**

We have living kidney tx co-operation between Nordic countries mainly within STEP program. There are also cases in which kidney patients' family members are living in another (Scandinavian) country. In order to offer these patients more equal access to transplantation and potential donors safe and easy access to evaluation, we should have better understanding about each other's guidelines and routines.

Interesting discussions were shared on different principles concerning anonymous (altruistic) kidney donation.

In Denmark, there is specialized unit for managing anonymous living donors, but more limitations on accepting anonymous donors (age limit). In Finland anonymous living donors are evaluated just as all other living kidney donors, with same criteria of acceptance.

Fluent co-operation between transplant hospitals and professionals is important in order to offer safe and high-quality donation processes. Especially within STEP program when logistics can be complicated and many parties are involved, knowing your colleagues helps to tackle challenges.

We appreciate greatly these opportunities to meet colleagues in other Scandinavian transplant centers. There is better communication and more confidence in co-operation after meeting people face-to-face.