

Deceased donor organ transplantation: A good start for a promising future

Sir,

I read with great interest the promising article recently published in your most valuable journal titled “Deceased donor organ transplantation: A single center experience” by Gumber *et al.*^[1] This retrospective study focused its message on drawing the attention of the outcomes of deceased-donor kidney transplantation in India. The results of this study indicate a favorable outcome

in short-term period for deceased-donor kidney transplantation. Interestingly, their graft survival rate is comparable with those reported for deceased kidney transplantations in United States.^[2] Thus, it seems that the outlook for kidney transplantation from deceased donor in India is encouraging. Furthermore, we evaluated the short-term outcomes of 121 adult deceased-donor recipients who underwent kidney transplantation at our transplant center between 2008 and 2009 (unpublished data). One and 2-year graft survival rates were 94.0% and 86.8%, respectively. One and two-year patient survival rates were 97.4% and 91.9%, respectively. Our study also showed a favorable improvement in the short-term graft and patient survivals of recipients using kidneys from deceased donors. Mahdavi *et al.*^[3] have also reported a good short-term outcome of deceased-donor kidney transplantation from Mashhad, Iran.

It is of interest that Gumber *et al.*^[1] reported a short cold ischemia time (5.56 ± 2.04 h). Since our organ procurement in Iran is local, cold ischemia time in our patients was also short that may be the key to better graft survival. The mean cold ischemic time in our recipients was 3.16 ± 0.83 h (ranging 1.5 and 4.7 h), that is, it was relatively short. Cold ischemia time is a known risk factor for delayed graft function and worsen transplant outcome.^[4] Vacher-Coponat *et al.* showed a reduction of cold ischemia time from 21.45 to 13.27 h is associated with a significant decreasing in delayed graft function rate from 34.7% to 20.7%.^[4]

I agree that having a legislation to procure deceased-donor organs is one of steps for a successful deceased-donor organ transplantation program; for example, by the year 2000, only a very limited number of renal transplants from deceased donor had been performed in Iran. In April 2000, the Iranian parliament allowed deceased organ donation after brain death.^[5] Since then, the annual number of deceased-donor kidney transplants rose from less than 1% of all kidney transplants at the end of 2000, to 13% in 2006.^[6] Kidney transplantation using deceased donors was started at our center in 2002 and its annual number has increased from 0.4% in 2002 to 31% in 2008.^[7]

Finally, a favorable of short-term patient and graft survivals in kidney transplants using deceased-donors should be encouraged in view of organ shortage.

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