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EXPANDING HOPE: ORGAN TRANSPLANTS FROM DONORS WITH HIV OR HCV INFECTION

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Background: For those living with end-stage organ disease, transplantation provides a clear survival benefit. However, due to a critical shortage of donated organs, many individuals awaiting organ transplantation will die before every receiving an organ offer. As such, innovative strategies to expand the organ donor pool are needed. One such strategy is the use of organs from donors with chronic viral infections. More specifically, the use of organs from HIV-infected (HIV+) donors for HIV+ transplant candidates and the use of organs from hepatitis C virus-infected (HCV+) donors for HCV-uninfected transplant candidates is currently under investigation. HIV-to-HIV kidney transplantation was pioneered in South Africa in 2010 with good results in a small cohort. Inspired by this experience, in the United States the HIV Organ Policy Equity (HOPE) Act was enacted in 2013 and reverses the federal ban on HIV-to-HIV transplantation. Pursuant to the HOPE Act, HIV-to-HIV transplants have been allowed within research protocols since 2015. The first HIV-to-HIV kidney and liver transplants were performed at Johns Hopkins in March of 2016 and a national multicenter study of HIV-to-HIV kidney and liver transplantation is ongoing. This session will discuss the potential risks and benefits of HIV-to-HIV transplantation and transplant outcomes to date. Since HIV remain an incurable illness even with effective antiretroviral therapy, the use of HIV+ donors for those without HIV is not being considered. However, for chronic HCV infection, direct acting antivirals (DAAs) provide a definitive cure for HCV including for transplant recipients. Moreover, in the United States high-quality organs from HCV+ donors are currently underutilized and represent a neglected public health resource. Pilot studies have investigated the use of DAAs as pre-emptive or prophylactic treatment in combination with kidney transplantation from HCV+ donors for HCV- recipients. This session will also review the results of these trials and discuss the potential that HCV+ to HCV- transplantation has to expand organ options more broadly.