

SUCCESSFUL LIVING KIDNEY DONATION AFTER ABLATION OF ACCESSORY CONDUCTING PATHWAY IN THE DONOR. Faisal Zaeem, Arvind Datla, Nitesh Sood, Jeffrey Kluger, Ravi Yarlagadda, David Hull, K. Vinay Ranga. Medicine / Transplantation., Hartford Hospital/ UCHC, Farmington, Connecticut.

Kidney transplantation has been shown to have the best outcomes for patients with end-stage renal disease (ESRD), compared to other modes of renal replacement therapy. The number of ESRD patients is growing worldwide, and there has not been a proportionate increase in the number of kidneys recovered from deceased donors. Indeed, there has been an increase in the number of living donor transplants performed each year. Studies have shown that recipients of living donor kidneys do very well, and half-lives of their kidney transplants are longer than those of deceased donor kidneys. At the same time, the welfare of the living donor is of utmost importance.

We report the case of a 33 year old African American man who had been accepted as a living donor for his father, who had ESRD. His history was essentially unremarkable, having a normal physical exam and lab values which were all normal. However at pre-operative testing, he was found to have an abnormal EKG, with a shortened PR interval and a delta wave, suggestive of pre-excitation syndrome consistent with Wolf Parkinson White type A. The surgery was postponed, in the interests of the donor, and he was referred to the Electrophysiology Dept. Patient himself denied ever having any palpitations, syncopal or presyncopal episodes. During the electrophysiological study, a right Para-hisian accessory pathway was found, with orthodromic reciprocating tachycardia on minimal stimulation. The accessory pathway was ablated at the right paraseptal space, using a Freezor ablation catheter to apply cryoenergy. Intraprocedure testing with adenosine and isoproterenol showed a successful AV/VA block. Patient subsequently underwent a successful left donor nephrectomy a month later.

We believe this is the first ever report in the literature of successful living renal donation by a donor after ablation of the accessory pathway, and essentially, cure of his WPW syndrome. It is paramount to place donor safety and welfare topmost, while trying to increase the chances of a patient with ESRD to get a living donor kidney.