



MASSACHUSETTS GENERAL HOSPITAL Our new world: COVID-19 and transplant

Nahel Elias, MD

Surgical Director of Renal Transplantation Massachusetts General Hospital, Harvard Medical School





I have no relevant financial relationships with commercial interests to disclose

My presentation does include discussion of off-label or investigational use.

COVID-19, Kidney disease and Transplant

MASSACHUSETTS GENERAL HOSPITAL

TRANSPLANT CENTER

Caused by SARS-CoV-2

Initial outbreak in Wuhan, China

Human-to-human transmission confirmed in January 2020

Transmission occurs primarily via respiratory droplets



The lungs are the organs most affected by COVID-19

- Respiratory failure through diffuse alveolar damage
- also affecting the CNS (brainstem), GI, CVS (thrombosis), and the KIDNEYS

Highest risk is in those with "pre-existing conditions"

 Both Kidney disease (as well as its causes) and Transplant (immunosuppression) are considered increased risks

TRANSPLANT DURING COVID-19 SURGE Trend of transplants by week



TRANSPLANT CENTER





TRANSPLANT DURING COVID-19 SURGE **All transplants**





TRANSPLANT DURING COVID-19 SURGE



TRANSPLANT CENTER



UNOS.org/COVID

TRANSPLANT DURING COVID-19 SURGE **Deceased donors**



TRANSPLANT CENTER





UNOS.org/COVID



UNOS.org/COVID

Why transplants stopped?







CMS, CDC, and US Surg. Gen. recommended cessation of elective surgery:

- To conserve critical resources (ventilators, PPE,...etc.)
- Limiting exposure of patients and staff to the SARS-CoV-2 virus

	Recipient	Living Donor	Deceased Donor
Risk	Immunosuppression Donor Derived Nosocomial	Nosocomial	None
Resource preservation	OR/?ICU	OR	ICU/OR/PPE
Testing	Pre- and Post-Tx	Pre-donation	Pre-donation
Isolation	Pre- and Post-Tx	Pre-donation	N/A (ICU cohort)

Covid considerations for post-transplant patients

- Recommendations to Transplant patients became universal to all
- Transplant recipients need to be more vigilant about risks of contracting the virus
- Mixed data on overall risk, slightly higher rates of detrimental outcomes in transplant patients
- Multiple reports from China, Italy, and early US experience (NY and WA) data:
 - Mortality 10-25% Mostly Kidney recipients
- Ongoing registries of patients and their outcomes throughout the US



In the operating room, clinics and hospital:

34

Operating room: Risks: Unknown patient status and Aerosol generation Testing: Rapid test on patients if time permits Precautions: Staff protection through PPE and other practices

Hospital: Risks: Nosocomial transmission, exposure of visitors Testing: All admitted, at risk staff Precautions: PPE, avoid mixed units for at risk population, no visitors

Clinics: similar to above, screening all staff and patients, virtual care

MGH safe care to everyone





E-checking in through patient gateway prior to your appointment



Screening all who enter our facilities (patients and providers; no visitor policy)



Masks are worn by all (patients and providers)





Limited numbers of patients per clinic to allow social distancing



Rooms and surfaces are being disinfected more frequently



Separate section of the hospital for COVID-19 patients or suspected cases

Thank You! www.massgeneral.org/transplant

