

Solid-Organ Transplantation Services

in the Veterans Health Administration

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Since the pioneering work of Thomas E. Starzl at the Denver Veterans Affairs Medical Center (VAMC) in the 1960s, the Veterans Health Administration (VHA) has been actively involved in solid-organ transplantation. This service is available at designated centers throughout the United States for all veterans who are eligible for care through the VHA system.

The 2-part qualifying process begins with a pre-VHA Central Office (VACO) evaluation at the potential recipient's primary VHA hospital. Upon completion of testing and approval from the hospital's chief of staff, applications are submitted electronically to the transplant center of the patient's choice, to determine the appropriateness of in-person evaluation. This post-VACO evaluation resembles what patients in private centers experience, except for a more detailed psychosocial analysis and no limitation of access on the basis of the veteran's financial resources.

The Michael E. DeBakey VAMC (MEDVAMC) has had a transplant program for livers since 2006 and for kidneys since 2014. Both programs provide their patients 100% in-house evaluation, transplantation, and care. Referrals are national, mostly from the southern U.S. Patients listed for transplantation at the MEDVAMC tend to be older and more predominately male than are adult patients at non-VHA centers. Transplant volumes at the MEDVAMC have increased annually; in 2017, 42 transplants were performed—21 each of livers and kidneys. The causes of end-stage kidney and liver disease at the MEDVAMC are consistent with those identified nationally; however, a larger percentage of MEDVAMC liver recipients (77%) have hepatocellular carcinoma. The MEDVAMC liver and kidney transplant programs have survival rates comparable to those of other VHA programs and Baylor College of Medicine–affiliated liver and kidney transplant programs.

Obstacles to providing transplantation in the VHA system include duplicative processes and testing, late referral, and inconvenient access to immediate specialized care (depending on a patient's distance from a major VHA medical center). Nevertheless, the VHA enables transplantation for veterans regardless of their ability to pay, along with potentially long-term savings in medication expenses, access to the entire network of VHA services, and no difference in quality of care.¹

References

1. Rana A, Cotton R, O'Mahony CA, Goss JA. Veterans Administration liver transplant programs perform as well as their affiliated academic institutions. *Ann Surg* 2016;264(2):239-40.