LETTER FROM THE PRESIDENT

Greetings Colleagues,

I hope you all are having a wonderful spring. Over the past week I’ve been engaging in termination with my MSW intern. As we discuss tools and tips that she can carry into her career, I’m reminded of the fact that we have the opportunity to shape transplant social work practice, to influence thought, and engage in a way that changes lives for our patients and communities. Our collective participation in STSW adds gravitas to our field, affords us opportunities to advocate, and allows our expertise to resonate through all areas of transplant.

I always encourage my interns to develop a network of peer support. Transplant in particular can feel like working in silos, and for me, peer support is perhaps that most valuable benefit that I get from membership. I encourage you all to regularly review the forum – to post, respond, and maintain the discourse that we enjoy so much when we’re together on calls and at conferences. I’ll note the board has explored a number of options, and the forum remains the easiest and most cost-effective way for us to stay connected in a way that best protects us from spam/bots that can frustrate and derail conversations.

Likely, you all have heard about National Foundation for Transplants (NFT) closing after 41 years of business. Certainly, this was a surprising announcement that has generated questions and uncertainty. Hopefully, this change will also bring opportunities. COTA and Help Hope Live remain steadfast supporters, and may serve as resources for us and our patients. I have talked with Rick Lofgren, President of COTA, and he has expressed interest in speaking directly to STSW’s membership. I have also reached out to Help Hope Live. Please look for an email within the next couple of weeks with more details. The tentative plan is for COTA and Help Hope Live to cohost a Zoom meeting where members can field questions, talk through concerns, and learn more about their agency’s resources and services.

In closing, I would like to acknowledge that NFT has been a longstanding supporter of STSW. Their partnership has helped us to put on conferences, and helped us connect our patients to resources that have facilitated their success with transplant. The Board and I are grateful for their many years of support, and we wish the team at NFT all the best as they transition to new opportunities.

Sincerely,

Clif

Clifton Hill, MSW, LCSW, CCTSW
President, STSW
Vidant Medical Center, Greenville NC

CLOSING OF NATIONAL FOUNDATION FOR TRANSPLANTS (NFT)

As Clif Hill reported in his Letter from the President, we regretfully have learned that the NFT, a great supporter of transplant patients and families for 41 years, is ceasing operations. You can read their statement here or by going to their website, Home ~ National Foundation for Transplants. They have also published a resource list that can be found on the web at A91eldukq_b825bb_eig.tmp.pdf (transplants.org).

Clif has written to them to express our regret at their closing and our gratitude for their years of service. His letter is reprinted below:

Dear NFT Staff and Board of Directors,

On behalf of the Society for Transplant Social Workers (STSW) Executive Committee and Board of Directors, I thank you for your long-time support of our mission and our conference. NFT has been a stalwart supporter of STSW for many years. We couldn't have a conference without the
support of exhibitors, and there has been a special synergy between NFT's mission, STSW’s mission, and the work transplant social workers do every day to support our patients.

I would be remiss if I didn't express surprise when my colleagues and I learned of your closing. These types of changes always bring opportunities for reflection; and when I think about NFT, feelings of gratitude far outweigh the bittersweet news. I well remember your presentation at my first conference, 14 years ago when I started working in transplant. I was excited and grateful to learn about your services, and to have such a fantastic resource to support my patients. STSW so appreciates the difference that your team has made in our professional lives, and most importantly in the lives of our patients. We thank you for the many years of partnership and wish you all the best.

Most Sincerely,

Clifton Hill, MSW, LCSW, CCTSW
President, Social for Transplant Social Workers
Clinical Transplant Social Worker

A JOINT LETTER TO STSW FROM COTA AND HELP HOPE LIVE

In April, we joined together to celebrate the significant strides made during National Donate Life Month and National Pediatric Transplant Week. Despite these positive moments, the closure of the National Foundation for Transplants (NFT) at the end of the month has left many concerned about the future of support for transplant families.

Understanding these concerns, Help Hope Live and the Children’s Organ Transplant Association (COTA) are pleased to attend an informative Q&A session on May 29th at 2 PM (EST). This virtual gathering will provide a space to discuss how we can continue to support your families effectively. Thanks to the gracious invitation from the STSW and TFCA (Transplant Financial Coordinators Association) board members, we look forward to addressing any questions you may have about our ongoing assistance and the resources available.

We want to reassure you that both Help Hope Live and COTA are in strong financial health and remain fully committed to supporting your patients and their families. We operate differently than NFT, and we are happy to discuss those specifics.

Please feel free to visit our websites at helphopelive.org and cota.org for more information. We are here to discuss how we can alleviate concerns related to fundraising and the broader impact of NFT’s closure.

We sincerely look forward to connecting with you during the Q&A and helping you navigate these challenging times with hope and support.

With hope and gratitude,

Kelly L. Green, Help Hope Live
and
Rick Lofgren, COTA

2024 CONFERENCE UPDATE

Kay Kendall, MSW, LISW-s, CCTSW-MCS
National Conference Chair
Cleveland Clinic, Cleveland OH

Preparation continues for the 39th annual STSW Conference that will be held in Madison, Wisconsin the week of October 7th, 2024. We are finalizing plans for our keynote speaker and our pre-conference workshop. This 3-hour workshop will be held on Monday, October 7th and the first full day of the program will be on Tuesday, October 8th. We were very pleased with the abstracts that were
submitted and are excited about the program. We think many attendees will appreciate the location of the conference—a beautiful and vibrant University community.

Information will be on the STSW website soon with details about reservations for the hotels and we hope to open registration in late May, 2024. Please continue to check the STSW website for updates.

**COMMITTEE REPORTS**

- **Credentialing Committee**
  
  Molly Dugan, Chair
  Children's Healthcare of Atlanta at Egleston, Atlanta GA

  The Credentialing Committee is staying busy with 2024 recertification applications coming in. Please remember that the **deadline** for submitting your application for recertification is **June 1, 2024**. Feel free to reach out to credentialing@stsw.org with any questions.

  We continue to process new applications and love to help members achieve their credential. We are looking for additional credentialed members to join our committee and assist with the review of credentialing applications, and credentialing policy. Please reach out to credentialing@stsw.org if you are interested in joining this amazing committee!

- **Tech Committee:**
  
  Katie Newton, VP STSW, Chair Tech Committee
  Baystate Medical Center, Springfield MA

  Greetings from the Tech Committee! As always, we are looking to grow our team. If you are interested in learning about the Tech Committee and all the things we do, please send an email to tech@stsw.org. It's a great opportunity to connect with social workers from all over to get a behind the scenes look at all things STSW. No experience required!

  We are happy to report that there has been increased activity on our forum pages! The more activity on these pages, the more we can all benefit from our community of knowledge and support. Please continue to use the forums as your go-to source for connecting with other transplant social workers on questions and discussions.

  As a reminder - We currently have twelve forums: general, living donor, liver, lung, kidney/pancreas, heart, pediatric, VAD/MCS, OPO, mentor program and multicultural issues. In the forums, you can pose a question, start a discussion or share a resource. You can upload files if desired. You can subscribe to any forums and have a summary of new posts/replies sent to your email.

  Link to forums: [https://stsw.wildapricot.org/Forums](https://stsw.wildapricot.org/Forums)

  How To guide for assistance on how to use the forums and subscribe

  [https://stsw.wildapricot.org/resources/Documents/Online%20instructions/STSW%20FORUM%20HOW%20TO.pdf](https://stsw.wildapricot.org/resources/Documents/Online%20instructions/STSW%20FORUM%20HOW%20TO.pdf)

- **Research Committee**
  
  Colleen Satarino, University of Michigan, Ann Arbor MI (left)
  Gloria Chen, University of Texas at Austin (right)

  The STSW Research Committee has had a fantastic start to the year! We are holding monthly meetings to discuss Research Committee initiatives including the STSW Speakers Bureau, STSW Annual Survey, and STSW Annual Survey Dissemination project. Research Committee Co-Chairs have also been busy reviewing external survey requests and STSW Research Grant applications.

  We're also proud of share that one of our STSW members, Dori Muench LCSW, NSW-C, FNKF, CCTSW, has been awarded a $10,000 research grant through the National Kidney Foundation Council of Nephrology Social Workers to fund research investigating quality of life amongst deceased donor
The study will utilize quantitative instruments including the KDQOL, Caregiver QOL, Modified Caregiver Strain Index, SF-12, depression screen, and an economic hardship questionnaire that will be given at different intervals to transplant recipients and caregivers within a 3-month study period. The study aims to enroll 10 transplant recipient and caregiver dyads and is a secondary arm to a larger study examining quality of life amongst living donor transplant recipients and caregiver dyads. Dori Muench serves as the Primary Investigator of this study and is collaborating with Dr. Colleen Jay and the Atrium Health Wake Forest Baptist Abdominal Organ Transplant Research team. Dori has been a nephrology social worker for over 15 years and has been a part of STSW for the past 5 years. Please join us in congratulating Dori on her grant award and embarking on the research journey! dmuench@wakehealth.edu

If you are interested in exploring research or joining the STSW Research Committee, please contact the Research Committee Co-Chairs: research@stsw.org

- **Mentor Committee**  
  Beth Piotrowicz, Interim Chair  
  Cleveland Clinic, Cleveland OH

Our steadfast Chair, Alex, is currently on leave to bring a beautiful new being into the world. We wish her all the best. She will be returning in September.

Currently, the Mentor Program currently has 9 Mentor/Mentee matches. With our 11 Mentors, we have the capacity to match 10 more Mentees in the areas of adult kidney/pancreas and liver. We are always looking to grow in terms of having more matches, and being able to offer more Lung, Intestine/Multi-visceral, and Pediatric Mentors.

With that said, we are extending an invitation to all those seasoned social workers in our membership to share their experience and knowledge and consider becoming a Mentor. We are fortunate to have this available to new transplant social workers, or those who have changed paths. If you are interested in applying, please visit the Mentor Program's section of the website [https://stsw.wildapricot.org/Mentor-Program](https://stsw.wildapricot.org/Mentor-Program) or send questions to mentor@stsw.org.

- **Living Donor Committee**  
  Darshit Bakhai, Chair  
  Michigan Medicine, Univ of MI Health System, Ann Arbor MI

The Living Donor Committee (LDC) recently underwent a change of chair position. Darshit Bakhai, LMSW with Michigan Medicine, was appointed the new chair for the LDC in February 2024. Our prior chair, Chrissi White, led the LDC for the past two years and I would like to express our appreciation to her for all the growth and support she provided for the committee. Chrissi continues to be part of the LDC committee, and we look forward to continuing to grow the LDC as a platform for members with all things related to Living Donors.

I am excited and equally appreciative to be leading this committee. We had our first meeting of the year on March 13th and about 13 members joined. We are hoping that LDC meetings allow for more case presentations and discussion, conversation around ethical aspects of living donation, and clinical growth for all of us in working with living donors. Through the LDC, members benefit from sharing of resources (including financial support for living donors and community-based organizations working for advancing living donor transplants), collaborating with peers, understanding how the living donor process works, and advocating for and gaining support for our work within our programs. The Living Donor Committee has active participation and input on the STSW online forum.
We have quarterly meetings to discuss a variety of topics related to living donation. The committee plans to continue to collaborate and help each other work through unique and difficult cases. We are always looking for new members to join our committee. If you would like to join, please contact Darsh at darshitb@med.umich.edu. Happy Spring!

Public Policy and Resource Updates:

- **OPTN Modernization Appropriations**: Asks Congress to provide at least $100 million to increase efficiency and performance for the modernization of OPTN.

In honor of National Donate Life Month, you may want to consider supporting three important bills aimed at supporting living donors. The links below will take you to the “Voices for Kidney Health Action Center” where you can get information and advocate for these bills.

- **The Honor Our Living Donors (HOLD) Act (H.R. 6020)**: This would allow potential donors to apply for NLDAC benefits regardless of the recipient’s income. Under current regulations, the income of the organ recipient is considered when determining the donor’s eligibility for reimbursement. The HOLD Act, a bipartisan bill, seeks to remove this requirement and ensure that financial assistance is determined solely based on the donor’s income level, easing the financial burden on living donors.

- **Living Donor Protection Act (H.R. 2923 / S. 1384)**: This legislation aims to protect donors from discrimination in pricing and access to life, disability and long-term care insurance. Also guarantees that living donors can use FMLA protections for donation. By supporting this bill, we can ensure that living donors are not penalized for their life-saving gift.

- **Living Organ Donor Tax Credit Act (H.R. 6171)**: This bill proposes a federal tax credit of up to $5,000 for living donors to cover out-of-pocket expenses such as travel, lodging, follow-up care, and lost wages. By supporting this bill, we can provide much-needed financial relief to those who selflessly give the gift of life.

Liver Committee:

The liver committee continues to meet every other month. There is great participation and collaboration amongst liver transplant social workers across the country. We continue to have robust conversation regarding transplant and addiction treatment, ethical dilemmas, psychiatric issues in transplant recipients, and take time to discuss complex cases.

Our next meeting is May 20th @ 1pm PST. On the agenda is discussing an article related to the definition and measurement of alcohol-associated insight in early liver transplant. You don’t want to miss it! Please e-mail liver@stsw.org if you would like to be added to our meeting invite.

Kidney/ Pancreas Committee:

The Kidney/Pancreas Committee continues to meet monthly (with rotating dates/times) with a wide range of topics discussed at each meeting. So far this year we have had a thorough discussion about the SIPAT with a case study, discussed evaluation of incarcerated patients, differentiated between medical trauma and PTSD in transplant patients, and much more.
An email distribution list is used for meeting calendar invites, agendas, and minutes. Meeting dates, times, and links are also on the Events page of the website. Please reach out (kbennett6@pennstatehealth.psu.edu) if you would like to be added to our group!

Lung Transplant Committee

Mike Bielaczyc, Chair
Northwestern Medicine, Chicago IL

Our lung committee continues to welcome new members to the group as we meet every 2 months, which has been a great opportunity to support newer transplant social workers as they learn their programs and build up processes. We continue to review evidence-based practices and ethical considerations for this unique population. Most recently we have been discussing ethical approaches for caring for patients with prolonged hospitalizations and identifying and support transplant caregiver needs. The committee looks forward to continuing to support and learn from one another moving forward!

Heart Transplant Committee

Shay M. Rogilio, Chair
Ascension Seton Medical Center, Austin, TX

The Heart Transplant committee continues to meet on a monthly basis. In February, we had a timely discussion about different center’s marijuana policies. In March, we discussed many topics including social media, Medicaid Expansion in some states and working with undocumented patients. In April we have extended an invitation to Dr. Nasrien E. Ibrahim, MD, MPH, founder of The Equity in Heart Transplant Project to join us to tell us more about this program. I can honestly say that we continue to have sincere conversations, unwavering support, and dedicated participation in every meeting.

We continue to have our monthly meetings on the 4th Wednesday of each month at 1pm - Central Standard Time.

STSW Heart Committee Monthly Call
- 4th Wednesday of each month
- 1:00 – 2:00 pm, Time zone: Central Standard
- Google Meet: https://meet.google.com/opa-vtky-kam
- Phone: (US) +1 574-404-3607 PIN: 854 790 053

MCS / VAD Committee:

Kristin Malaer, Co-Chair
Memorial Hermann Hospital, Houston TX
Jennifer Nixon, Co-Chair
UT Southwestern Medical Center, Dallas TX

We continue to meet monthly on the third Friday of every month at 3:00p.m. CST. Please email kristin.malaer@memorialhermann.org if you would like the zoom information.

We also would like to welcome Jennifer Nixon as Co-Chair of the committee. She comes from a program in Dallas with vast experience in MCS work and has been a great additional to our group!

Also, don’t forget if you need additional MCS education, it only costs $25 to join ICCAC (International Consortium of Circulatory Assist Clinicians) and there has been many collaborative efforts between STSW and ICCAC’s Social Work Taskforce!

Pediatric Committee:

Tina Cole, Chair
Nationwide Children’s, Columbus OH

Please join us for the next STSW Pediatrics web call is scheduled for Tuesday May 7, 2024, from 3pm-4pm EST. To join the call please email us prior to 5/7/ 24 at Pediatrics@stsw.org
Bylaws Committee
Joe Reilly, Chair
University of Colorado

The Bylaws Committee is responsible for updating the bylaws that govern the STSW Board, connecting with new Board Members for review/acknowledgement of the bylaws, as well as collecting all conflict-of-interest forms on an annual basis. You can review our bylaws on our website, here.

Social Media and Marketing Committee
Tiffany Coco, Chair
Mayo Clinic, Phoenix AZ

Our Instagram account continues to progress. We are up to 300 followers! Please make sure you follow the STSW Instagram Page and share with your friends/co-workers, @The_STSW.

Don’t forget to share content, interact with stories, leave comments, answer story questions. If you have any suggestions for content, want to highlight work you are doing, or would like to assist with page content creation, reach out to socialmedia@stsw.org.

#STSWSocialMedia

** DON’T FORGET **
Recertification applications for CCTSW, CCTSW-MCS, and CCSW-MCS credential holders that expire this year are due on or before 6-1-24.

SPOTLIGHT CORNER

We are pleased to spotlight long-time STSW member, Beth Mosele, member emeritus.

“I was born bossy and noisy. When I grew up, I became a social worker and was paid for being bossy and noisy.”

I was born in Borger, Texas at the tail end of the infamous Dust Bowl. My memories of the landscape growing up in the Panhandle are painted in Sepia tones because of the lack of green vegetation, the dry parched earth and frequent dust storms.

My father was a Methodist minister and I grew up as a “Preacher’s Kid.” “PK” is a very specific designation that is well recognized in small towns in Texas. You are stereotyped and have community expectations placed upon you because, you cannot hide in anonymity when there is only one elementary, junior and high school for the entire county.

I attended a small liberate arts college, Southwestern University in Georgetown, Texas and received my Bachelor of Arts in 1974. My chief academic achievement was researching and writing an original historical document: The Integration of the Georgetown Independent School District.

My social work career stated at age 22 when I was hired to be a social services worker for child welfare in Abilene, Taylor County, Texas. I lasted 19 months which was the typical “lifespan” of a CPS worker at that time.

I learned from CPS that it was not the outcome that I loved; but, The Process. The engagement, assessment and developing of a care strategy and therapeutic relationships was vital because the outcome was often unsatisfactory or traumatic.

In 1976 after CPS, I began my medical social work career at the West Texas Rehabilitation Center as a caseworker. During my brief time at WTRC I was
assigned a project to interview 25 of the original patients/family from this remarkable facility. Their treatment was in the late 1950’s to early 1960’s. After the completion of this project, I was forever bonded to medical social work and I never looked back.

I recognized that in order to be a medical social worker, I had to receive a Master’s degree in Social Work. I attended the Tulane University Graduate School of Social Work (Class of 1978). Being a small-town preacher’s kid I experienced major culture shock moving from the safety of the Protestant Bible Belt of Texas to the “foreign culture” of New Orleans, The Big Easy.

My husband Tom was a “transplant” to New Orleans from Chicago. We lived in the same apartment complex but did not meet until one year later. (What do you get when you pair a Methodist preacher’s kid with the oldest of 12 from an Irish-Italian Catholic family? Answer: Total Chaos and Joy!)

Tom and I moved to Houston in 1979 at the height of one of Houston’s oil booms. We have had the fortune of having three wonderful children (Aileen born in 1983; Julia born in 1985; and, John born in 1993). Additionally, Tom and I have four grandchildren under the age of four!

I have had three Medical social work specialties in my 48 years as a social worker: Physical Rehabilitation, Neonatology and Thoracic Transplantation. Each specialization built upon the next with Transplant becoming my “heart and soul” for over 20 years. In spite of the changing specializations, The Process remained. The ability and skills needed to engage, assess and provide were the stable force for me professionally. Both Neonatology and Transplant are stressful and traumatic. Both can be terminal services where the social worker is the anticipatory grief guide for the patient, family and staff.

As a seasoned clinical social worker, I knew when I stepped into Thoracic Transplant that I was out of my element. When I first began working at Houston Methodist Transplant Center, I was the sole social worker for LVAD, heart transplant and lung transplant. (In 2003 LVAD was only utilized as a bridge to transplant with all LVAD patient’s remaining in hospital to await a transplant. How times have changed in the world of LVADs.)

I left Houston Methodist in 2012 to start the Social Work Department for the newly formed Center for Advanced Heart Failure (CAHF) at Memorial Hermann Texas Medical Center. This was the job of my dreams! The program went from one sole clinical social worker (me) to five clinical social work positions by the time I retired January 2024. I must applaud the professionalism of my colleagues at Memorial Hermann CAHF for establishing a respected and clinically sound program. Thanks to Janice Taylor, Linda Pham, Kristin Malaer, Stephanie Francis, Jennifer Dague, Jose Ramirez, Denetrius Hunter and Robin Kremer.

When I began my transplant social work career in 2003, I turned to STSW for help and attended my first conference in Austin, Texas. I must thank Kay Kendall and Jan Hart for taking me under their wings and mentoring me.

STSW has given me the following opportunities:

- Board Member at Large for LVAD Social Work
- Member of Credentialing Committee
- To present multiple times at STSW Conferences
- To present at the American Society of Transplantation
- Mentored and encouraged many colleagues
- Recipient of the 2015 Lee Suszycki Award
- Along with colleague Janice Taylor, we developed Body Image Assessment Tools (find them in STSW resources). This tool resulted in Memorial Hermann Thoracic Transplant Social Workers receiving Best Practice designation from JCAHO in 2015.
STSW is a living breathing organism made up of experience, love and sharing.

In 2003 I started out as a rookie transplant social worker. At this point I am considered an Elder. I am honored to have been a contributing member of STSW.

**Words of Wisdom from an Elder:**

1. Regarding starting a new social work job/assignment: It takes one year to be accepted and a second year to be respected.

2. Nurses are your primary client. Without their support, you will never be able to do your job.

3. Your relationship with nurses, transplant/LVAD coordinators, PA’s, NP, doctors is long term. With some of our professional colleagues, we are able to form quick and lasting relationships. With others, it may take months to years. On a few occasions, I methodically spent years developing a working relationship with some of my more difficult, challenging and irritating physicians. The resulting positive working relationship can be one of the most satisfying accomplishments of your career.

4. Our relationships with patients and their families are a revolving door. Our skills as clinical social workers allow us to engage quickly, form a relationship, make a professional assessment and nurture the patient’s and family’s needs during their sojourn within our transplant world.

5. Trust The Process

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**THE IMPORTANCE OF SOCIAL WORK RESEARCH IN TRANSPLANT**

Gloria Chen and Colleen Satarino

STSW Research Committee Co-Chairs

“If they don’t give you a seat at the table, bring a folding chair.” -Congresswoman Shirley Chisolm

Being a transplant social worker can come with a lot of challenges. The job often feels like a constant uphill climb, advocating for patients amongst a multidisciplinary team that has varying discipline elevations. Multidisciplinary teams within healthcare have been proven to effect health outcomes by approaching patient care through an inclusive team approach. The Center for Medicare and Medicaid Services have even embedded the multidisciplinary team model into its federal regulations for transplant, mandating specific disciplines, such as transplant social workers, to be incorporated into transplant care teams. However, despite the value placed on interdisciplinary teamwork, transplant social workers do not always have an equal voice.

Transplant social workers can learn from Congresswoman Shirley Chisolm, who despite serving in a male dominated arena became an inspiration and strong advocate for women and minorities. Congresswoman Chisolm long championed the adage, “If they don’t give you a seat at the table, bring a folding chair.”

Psychosocial research led by transplant social workers is the vehicle that can catalyze change for the transplant social work profession. Research conducted by the very clinicians who perform patient care is critical to driving research inquiries that are relevant and applicable to clinical practice. Meaningful research is valuable only through discoveries that can directly benefit humans and society. As such, transplant social workers who can apply their clinical practice experience into research can impact healthcare and patient health outcomes, thereby influencing individual and societal level change.

As a clinically oriented profession, transplant social workers often perceive research as either intimidating to approach or not applicable. Lack of robust research training within social work graduate programs can influence this and cause transplant
social workers to feel ill equipped and perceive research as inaccessible. However, there are numerous research training programs, society level support, and psychosocial adjacent colleagues who can provide support and allow research to become more accessible to those interested in pursuing research.

Furthermore, research is unequivocally a byproduct of strong clinical practice. Evidence-informed clinical practice should be the cornerstone to transplant social work in order to maintain high, standardized levels of care that prove equitable to all individuals. Our clinical decision-making and expertise should be informed by evidence and patient values.

Psychosocial research should be led by relevant clinicians. There is a paucity of psychosocial social work led research within transplant indicating a need for transplant social workers to bring their chair and share their clinical expertise to a system that needs to hear us speak.

Reach out to the STSW Research Committee Co-Chairs (research@stsw.org) if you are interested in research!


Editor's note: To view research articles written by STSW members (former and current), see this page on our website.

IN THE NEWS

First Successful Pig to Human Kidney Transplant in the USA

The first successful transplantation of a genetically-modified pig kidney into a 62 year-old Boston gentleman was performed in Boston at Massachusetts General Hospital. The genetically modified pig was provided by eGenesis, which used gene editing technology to remove harmful genes and added some human genes to boost compatibility to protect the human recipient. The kidney was reported to have “immediately pinked up” and begin to produce urine. The longer-term results of the transplant are not yet clear. This was a compassionate-use, one-patient study.

Read more about this here and here, as well as other internet sources.

National Donate Life Month

April was National Donate Life month, a nationwide initiative created to spread awareness about organ, eye, and tissue donation and honor those who gave the gift of life. Read President Biden’s March 29, 2024 Proclamation in honor of this month, here.

Articles for STSW Newsletter

Do you have an idea for an article you’d like to see written, or that you’d like to write, for STSW Society Pages? Send your ideas or suggestions to help@stsw.org.

UPCOMING LOCAL CONFERENCES

Please keep STSW posted about local professional, transplant related conferences in your area, by emailing help@stsw.org with the details. We would like to keep our website updated with these educational opportunities, and if the dates align, can also promote it in this newsletter. See this page for more information.