

My Choices: Talk Transplant – Getting Matched

Whether you are considering kidney transplant as a treatment option, are currently being evaluated, or have been approved for a transplant, you may have questions about how the donated kidney gets matched to the person who needs the kidney. Unless you have a donor already, you will join the wait list for a donor kidney from someone who has died. Since everyone is different, waiting times can vary, and how the kidneys get matched is based upon many factors.

Who helps with
kidney matching?



UNOS can help.



Who is UNOS?

The United Network for Organ Sharing (UNOS) is a nonprofit charitable organization that maintains a central computer network linking all the organizations that get donated organs (or OPOs) and transplant centers in the United States. When a kidney becomes available, this system helps find the best match.

Terms to Know

- Allocation – Process used to decide who gets matched with a donated kidney
- Candidate – Person on the transplant waiting list
- CPRA – Calculated Panel Reactive Antibody
- HLA – Human Leukocyte Antigen
- OPO – Organ Procurement Organization

For more information, including a waiting list calculator, go to www.unos.org or contact a transplant center near you. Look for the “Talk Transplant” poster in your clinic for contact information.

What Is Looked at to Make a Match?

In the kidney allocation process, longevity matching is used to match kidneys that are likely to function for many years with patients that are likely to need them for many years. Here are some of the key parts used to help make kidney matches:

Estimated Post Transplant Survival (EPTS) Score

The EPTS score is a percentage score used to estimate how long a kidney transplant candidate is expected to benefit from a working kidney. The EPTS score is determined based on: age, time on dialysis, number of previous transplants and diabetes status. A low EPTS score shows a better expected outcome.

Kidney Donor Profile Index (KDPI)

The KDPI is a measure that determines the quality of a deceased donor kidney compared to others. The KDPI score is determined based on: age, height, weight, ethnicity, cause of death, history of high blood pressure and diabetes, contact with hepatitis C and serum creatinine (kidney function). The lower the KDPI, the better the quality of the kidney. The KDPI does not apply to living donor kidneys.

Time on Dialysis

The time spent on dialysis counts toward transplant waiting time. Your transplant waiting time goes back to the date you started dialysis.

Priority for Sensitized Candidates

Candidates are given sensitization points due to medical factors that make them harder to match. CPRA and HLA are used to help determine the points.

My Questions

Ask Your Care Team:

- Where can I find out more information?
- Who do I ask to find out where I'm on the waiting list?
- What if I did not want to consider a transplant until I had been on dialysis for many years, how much of that time counts?