

Understanding Psychosocial Outcomes for Living Liver Donors

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Introduction

- Donors accept medical/surgical risks as a potential cost for helping recipients understanding they receive no medical/surgical benefits.
- Benefits, if any, would be in the psychosocial realm. An example may be the positive feelings that come from helping another person.

Introduction (cont'd)

- Psychosocial risks may also be present and need to be understood as a part of the risk/benefit assessment.
- For these reasons it is important to understand the psychosocial factors involved in living liver donation.
- It is also important to understand these factors to help educate potential donors.

Methods

- In our efforts to both understand the psychosocial aspects of this surgery and help educate donor candidates, we devised a self-report questionnaire. This questionnaire was given to 20 consecutive donors.

Methods (continued)

- Self-report questionnaire included:
 - Demographics
 - Perception of post-donation health (3-point scale: worse, same, better)
 - Impact of the scar on body image (3-point scale: worse, same, better)
 - Duration of post-surgical pain/discomfort (in weeks)

Methods (continued)

- Self-report questionnaire included:
 - Perception of recipient health post-transplant (unknown, very good, good, poor, very poor, deceased)
 - Perceived change in the relationship with the recipient post-donation (no contact, worse, same, better)

Methods (continued)

- Self-report questionnaire included:
 - Satisfaction in 8 life realms (5-point scales from 'Much worse' to 'Much better')
 - Job
 - Social life
 - Activity level
 - Spirituality
 - Finances
 - Relationship with significant other
 - Relationship with children
 - Self

Results

- Demographics:
 - N = 20
 - Average donor age 37.1 years
 - 65% female, 35% male
 - 45% married, 25% single, 15% divorced, 5% separated, 5% widowed (1 donor did not respond to the question)
 - 13 had children

Results (continued)

- Demographics:

- Average length of time between surgery and questionnaire completion was 14.6 months; range 4 to 20 months
- 7 donated to sibs, 5 to adult children, 4 were unrelated, 1 to a spouse, 1 to a parent, 1 to a niece, and 1 did not respond to the question

Results (continued)

- Donors post-donation health perception - mean response = 1.9
(3-point scale: 1=worse, 2=same, 3=better)
- Impact of the scar on body image
mean response = 1.93
(3-point scale: 1=worse, 2=same, 3=better)

Results (continued)

- Mean duration of post-surgical pain/discomfort = 17.6 weeks
- Perception of recipient health post-transplant mean response = 2.66 (6-point scale with 2=very good & 3=good)

Results (continued)

- Perceived change in the relationship with the recipient after transplant
mean response = 1.9 (1=worse, 2=same)

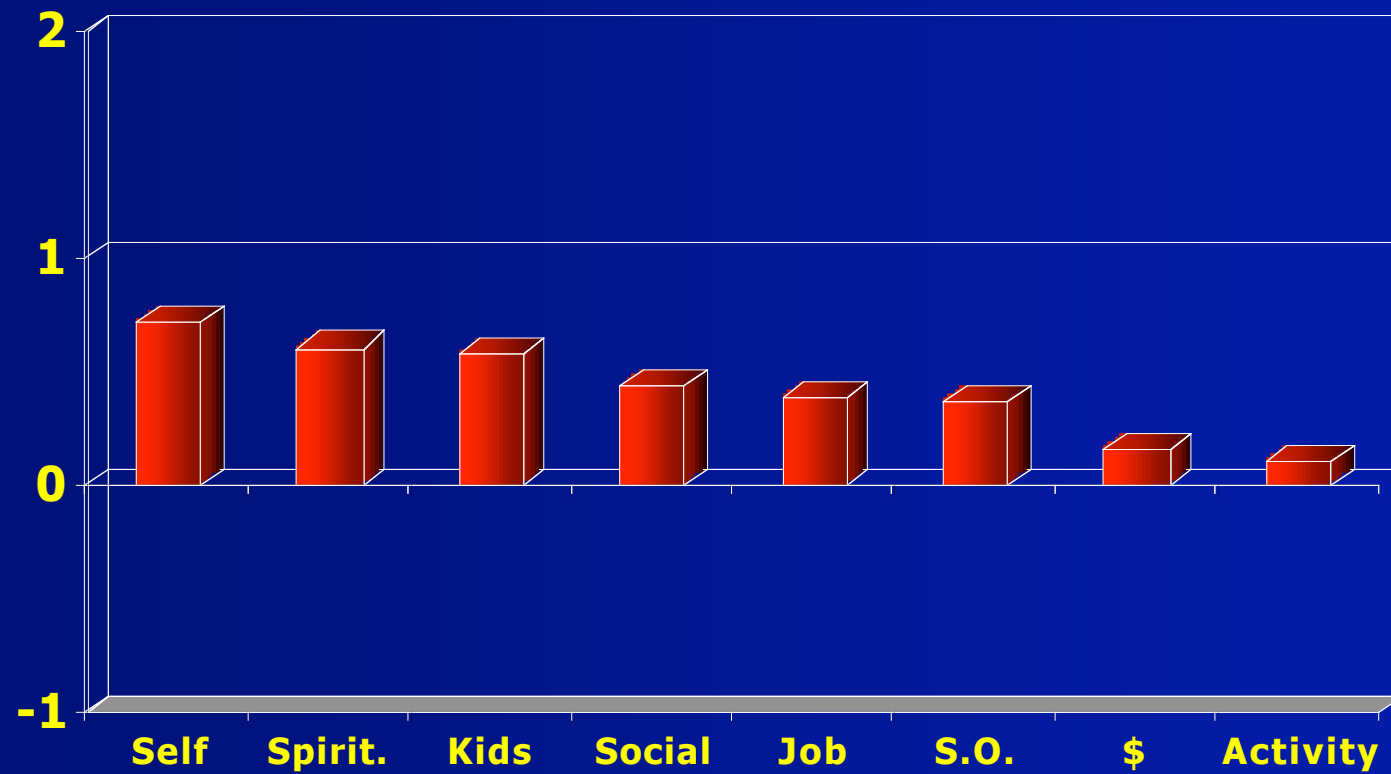
Results (continued)

- Satisfaction in 8 life realms (5-point scales from -2='Much Worse' to +2='Much Better')
 - Job: mean response = 0.39, range 0 to +2 (n=19)
 - Social Life: mean response = 0.44, range 0 to +2 (n=19)
 - Activity level: mean response = 0.11, range -2 to +2 (n=19)
 - Spirituality: mean response = 0.61, range 0 to +2 (n=19)

Results (continued)

- Satisfaction in 8 life realms (5-point scales from -2='Much Worse' to +2='Much Better')
 - Finances: mean response = 0.17, range -1 to +2 (n=19)
 - Significant other: mean response = 0.38, range -1 to +2 (n=14)
 - Children: mean response = 0.58, range 0 to +2 (n=13)
 - Self: mean response = 0.72, range -1 to +2 (n=19)

Satisfaction in 8 Life Realms



Results (continued)

- Donor perceived health was examined as a function of recipient health, change in the relationship with the recipient, duration of pain/discomfort, impact of the scar, and the 8 life realms measured. Chi-Square analysis showed no associations with the first 4 of these:
 - Recipient health ($p=0.64$)
 - Change in the relationship with the recipient ($p=0.21$)
 - Duration of pain/discomfort ($p=0.14$)
 - Impact of the scar ($p=0.55$).

Results (continued)

- Donor perceived health was examined as a function of the 8 life realms measured. Chi-Square analysis showed no associations with 7 of the 8 realms but a positive association with Spirituality ($p=0.05$, Pearson Correlation 0.50). This suggests a positive health rating was associated with better post-donation spiritual satisfaction.

Results (continued)

- Impact of the scar on body image was examined as a function of perceived recipient health status, duration of pain/discomfort, and change in the relationship with the recipient. Chi-Square analysis showed no correlations:
 - Recipient health ($p=0.55$)
 - Duration of pain/discomfort ($p=0.38$)
 - Change in relationship with the recipient ($p=0.93$)

Results (continued)

- Impact of the scar on body image examined as a function of the 8 life realms. Chi-square analysis showed significant positive associations with financial status ($p=0.01$), activity level ($p=<0.01$) and self-satisfaction ($p=0.03$). That is, greater negative impact on body image was associated with worse satisfaction in these areas.

Results (continued)

- The duration of the post-donation pain/discomfort was examined as a function of recipient health, change in relationship with the recipient, and of satisfaction in the 8 life realms measured.
 - Recipient health: Chi-square analysis was significant for this association ($p=0.02$, Pearson correlation = 0.55) suggesting longer pain correlated with worse perceived recipient health.

Results (continued)

- The duration of the post-donation pain/discomfort:
 - Relationship change: Chi-square analysis showed no significant association ($p=0.18$).
 - 8 life realms: Chi-square analyses showed no significant associations (p values ranging from 0.20 to 0.93).

Results (continued)

- The change in the relationship with the recipient was examined as a function on the 8 life realms measured. Chi-square analysis showed no significant associations with any of the 8 realms (p values ranging from 0.09 to 0.93).

Conclusions

Donors may well derive emotional benefits from donation. These benefits may be especially apparent in their satisfaction with their spirituality, with themselves and in their relationships with their children (and may include increased satisfaction with relationships in general).

Conclusions

Psychosocial outcomes are mainly unrelated to recipient outcomes. Pain/discomfort duration post-donation, which may last for several months, may be longer if recipient health is perceived to be poorer.

Conclusions

Donors' health after surgery is generally perceived as the same before surgery but may be slightly worse¹. Perceived health this is not related to perceived recipient health, changes in the relationship with the recipient, the scar, or the duration of pain/discomfort. It may be positively related to satisfaction with post-donation spirituality.

¹values just below 'neutral'

Conclusions

The impact of the scar is generally neutral but may have a slightly negative impact on body image.¹ This is not associated with perceived recipient health, relationship changes with the recipient, or duration of pain/discomfort. Impact on body image may be worse with poorer post-donation satisfaction with financial status, activity and self.

Conclusions

Similarly, the relationship with the recipient is generally unchanged but may be slightly worse than prior to surgery.¹ It is not associated with satisfaction in any of the 8 life realms measured.

Conclusions

Pain/discomfort duration may last months after surgery. Its duration is not related to satisfaction in any of the 8 life realms measured, but may be longer if recipient health is felt to be poor.

Conclusions

The psychosocial impact of donation appears to be independent of perceived recipient health with the possible exception of pain duration post-donation.

Conclusions

- This information, and new data that emerges, helps further understand outcomes and better educate potential donors about possible outcomes.
- It is also important to begin understanding longer-term psychosocial outcomes in liver donors.

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