

Absolute Contraindications to Kidney Transplantation

1. Active infection (e.g., TB)
2. Active Malignancy
 - Candidates with a previous history of malignancy should be successfully treated before proceeding with transplantation
 - Most renal transplant candidates with a history of malignancy should wait a period of time between successful treatment and transplantation. The length of time will depend on the type of malignancy
 - Most patients with multiple myeloma should not undergo renal transplantation
 - Excluding localized squamous cell and basal cell carcinoma
3. Severe respiratory conditions
 - Patients requiring home oxygen therapy
 - Uncontrolled asthma
 - Severe cor pulmonale
 - Severe COPD/pulmonary fibrosis or restrictive disease with any of the following parameters:
 - Best FEV1 < 25% predicted value
 - PO2 room air < 60 mmHg with exercise
 - SaO2 < 90%
 - > 4 lower respiratory infections in the last 12 months
 - Moderate disease with the evidence of progression
4. Severe ischemic Heart Disease Including
 - Patients with progressive symptoms of angina
 - Patients with a myocardial infarction within 6 months
 - Patients without an appropriate cardiac workup
 - Patients with severe diffuse disease especially with non-invasive tests in whom intervention is not possible and in whom expected survival is sufficiently compromised that their life expectancy is < 5 years
5. Severe Peripheral Vascular Disease including:
 - Large uncorrectable abdominal aneurysms
 - Severe occlusive common iliac disease
 - Gangrene
6. Transplant candidates with cirrhosis (unless being considered for a combined liver/kidney transplant)
7. Severe Cognitive impairment
 - Cognitive impairment is not an absolute contraindication to kidney transplantation. However; particular care must be taken to ensure that informed consent can be obtained and that a support system is in place to ensure adherence to therapy and patient safety
8. Active Drug or Alcohol Addiction
 - Patients with addiction should be in an established recovery program and stable for a minimum of one year
9. Patient non-adherence to therapy
 - Patient non-adherence to therapy is a contraindication to kidney transplantation, given the use of immunosuppressive agents with a narrow therapeutic window, the impact of non-adherence to therapy on risk of acute rejection and premature graft loss, and the scarcity of organ donors
10. Early loss (multiple transplants)
 - Early loss (less than 2 years) of two previous transplants to rejection or recurrent disease

For further clarification on a case by case basis, please contact the Transplant Program:

- St. Paul's Hospital (ph: 604 806 9027/ 1-877-922-9822; donornurse@providencehealth.bc.ca); or
- if Vancouver General Hospital (ph: 604 875-5182/1-855-875-5182; kidneydonornurse@vch.ca)