

Publication

A model of risk and protective factors influencing the postoperative course of living liver donors

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Living donor liver transplantation is increasing as an effort to overcome the organ shortage for patients with terminal liver diseases. To maintain high medical and ethical standards, donors are evaluated before and after donation to assess their suitability, monitor their postoperative courses, and minimize risks. A psychological/psychosocial evaluation is included in the assessment at most transplantation centers. Due to the high risk and the challenging process of recovery and integration of the experience into one's life, it is important to identify donors with suitable psychological/psychosocial profiles. The psychosocial evaluation is performed on the basis of medical ethical standards, common sense, professional experience, and only a few systematic observations. Some studies have identified factors, such as complications for the recipient, as a possible influence on the donor's postoperative course, while others have sought to link donor outcomes with scores on psychometric instruments prior to donation. We suggest that it is not one, but the interplay of several factors that affects the donor's postoperative course, including decision autonomy and embedding the donation into a meaningful context, in addition to coping skills and recipient outcome. Based on pilot data, clinical observations, and a study of the literature, we developed a model of risk and protective factors influencing the donors' postoperative courses, which could be used to assess living liver donors psychosocially before and after donation, thus enhancing selection and support.

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