

## **POLICY STATEMENT**

### **TISSUE PROCUREMENT FOR CORNEAL TRANSPLANTATION**

#### **Policy:**

It is the position of the American Academy of Ophthalmology that any initiatives developed under the auspices of the National Organ Transplant Act or other authorizing legislation, should clearly distinguish between donor organs (kidney, heart, liver, lungs, pancreas) and donor tissue, particularly, ocular tissue. In addressing the need to increase organ donation, federal and state initiatives must recognize the long-standing and ongoing success of existing eye banks in the private sector and must balance the varying criteria regarding suitability for transplant among organs, tissues and eyes. Policies and practice should be adopted that ensure this.

#### **Background:**

The National Organ Transplant Act was created in an effort to improve organ procurement and transplantation, but organ procurement organizations continue to face great challenges. The technology is available to perform the transplant surgery, but organ availability and the costs of maintaining donor recipients are barriers to widespread organ transplant programs. Public awareness of the loss of human life due to these deficiencies has prompted the federal government to seek mechanisms to minimize these problems.

Although organ procurement organizations continue to face great challenges, eye banks have successfully provided donor eye tissue for over half a century. By establishing systems for effective procurement, enacting strict medical standards, developing networks to enhance distribution, and working with other tissue and organ procurement organizations, eye banks stand as a model for other procurement and distribution agencies. Prolonged waiting periods for corneal tissue no longer exist. In 2004, the Eye Bank Association of America member eye banks provided in excess of 51,500 corneas for transplant as well as an additional 20,632 eyes for research and training.

#### **Evaluation:**

Composition of any federal advisory bodies established to implement the directives of the National Organ Transplant Act should always include an individual who represents corneal tissue procurement and transplantation. This is necessary to ensure that recommendations about organ procurement from these advisory bodies do not promote sweeping changes that would negatively impact the eye banking system.

#### **Recommendations:**

**The following recommendations are aimed at maintaining the current eye bank system and enhancing its effectiveness while at the same time supporting the efforts to improve vital organ procurement and transplantation.**

1. Subsequent legislation should make clear distinctions between organs (kidney, liver, lungs, heart, pancreas) and tissues, particularly ocular tissue as its criteria for transplant differs markedly from that of other tissue. Time is of the essence in eye procurement, distribution and transplantation.
2. No legislation or system of centralized organ procurement organizations should isolate tissue or eye banks from donors and other essential contacts.
3. Eye tissue and organ procurement organizations should coordinate and cooperate in their public relations, procurement, and other efforts.
4. Current quality control efforts in eye banks should be maintained and enhanced as needed and should not be supplanted by more general standards and costly federal certification.
5. While there are legitimate costs involved in collecting and distributing donor corneas, costs should be kept reasonable; no patient should be denied corneal transplant surgery because of an inability to pay for appropriate services.
6. Donor cornea procurement through eye banks or through combined efforts with other tissue or organ procurement organizations should protect recipients from diseases or infections that are potentially transmissible by corneal transplantation.

**Approved by:** Board of Directors, June 1985

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