

People on Transplant Lists May Be Unwilling to Receive HCV-Infected Organs

Transplantees can be treated safely and effectively for hep C, so greater education regarding such methods is in order.

February 13, 2019 By [Benjamin Ryan](#)

Individuals waiting for a transplant are often unwilling to receive an organ from a donor who had hepatitis C virus (HCV), Infectious Disease Advisor reports.

Transplantees who receive an HCV-infected organ from a deceased donor can apparently be [safety and effectively](#) treated for and cured of the virus. Accepting such an organ may reduce the time people spend on organ transplant waiting lists.

Publishing their findings in *The American Journal of Nephrology*, researchers conducted a survey of 50 organ transplant candidates at an urban Chicago clinic between May and December 2017.

The participants had an average age of 54.5 years old and ranged between 32 and 77 years old. Eighty-eight percent of them were awaiting a kidney transplant and 12 percent were waiting to receive other organs. They had spent between 1.7 and 203 months and a median of 39.8 months on transplant lists.

Ninety percent of the study members were aware of what hep C was, but only 60 percent knew that the virus was curable. Forty-six percent were willing to receive an HCV-positive organ, while 30 percent were unsure about doing so and 23 percent were unwilling to do so.

Compared with those who were unwilling to accept or were unsure about accepting an HCV-positive organ, those who were willing were more inclined to be older, white, have spent less time on an organ waiting list and to have greater trust in physicians. All three groups expressed similar concerns about the potential incurability of hep C, insurance coverage, the potential of the organ not working and posttransplant death.

“The availability of HCV-positive organs may expand the donor pool and decrease waitlist times and mortality,” the study authors stated. “These data highlight the need for patient education toward use of these organs.”

To read the Infectious Disease Advisor article, [click here](#).

To read the study abstract, [click here](#).

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