

Travel for transplantation

Guidance for healthcare professionals

What is travel for transplantation and why is it important to talk about it?

Most people who travel to another country to receive a transplant or to donate an organ do so for legitimate reasons. However illegal transplants still happen, despite laws to stop people putting themselves and others at risk through this activity.

This guidance covers what you need to know about travel for transplantation as a healthcare professional and **it will be updated as new information is made available.**

Travel for transplantation describes:

1. Anyone who travels outside the UK for a transplant abroad, from a living or deceased donor.
2. Anyone who travels to the UK from another country to donate an organ as a living donor.

What are the laws in the UK relevant to travel for transplantation?

- **Under the Human Tissue Acts** in the UK, buying and selling organs for transplantation is illegal and is regulated by the Human Tissue Authority (HTA). This means that anyone who gives, receives, seeks, or offers payment or reward for donating organs for transplantation is breaking the law and can be prosecuted.
- **Since July 2022, the HTA is obliged to act** on any suspicion of illegal activity involving payment for a transplant where the transplant has taken place outside the UK – in the same way as they do for transplants within the UK. The HTA needs to be made aware of cases of concern and they may decide to refer them to the UK Police Force for further investigation.
- **Under Modern Slavery Legislation**, it is a criminal offence if someone is trafficked, at home or abroad, to donate an organ to someone in need of a transplant. In May 2023, people involved in a case of human trafficking for this purpose into the UK were prosecuted and received maximum prison sentences.
- **People who break the law to make a transplant happen** may face three years imprisonment for a Human Tissue Act offence and life imprisonment if they are found guilty of a modern slavery offence. Crimes related to organ donation and transplantation affect public confidence, which means that fewer people may volunteer to donate their organs, after death or when they are alive, and everyone waiting for a transplant loses out.

Why is it important now?

In the 12 years prior to the pandemic, the number of organs donated after death in the UK significantly increased and there were more opportunities for people waiting for a transplant, from both living and deceased donors. This meant that fewer people were waiting for a transplant and their wait had become shorter. Through these years, the incentive to travel abroad to receive a transplant was low. Post-pandemic, waiting lists have gone up, as has the freedom to travel, which has encouraged people to consider travel for transplantation as a possible solution to getting the transplant they need more quickly.

Why is illegal transplantation a problem?

Apart from the risk of criminal charges and potential prosecution, the outcome of organ transplants performed illegally outside the UK is often inferior in comparison with transplants performed in the UK, where the Quality and Safety of Organs is regulated. This is because recipients will often travel 'at risk', against the advice of their transplant team, without a medical referral or access to their health records to inform any decisions made for them in other countries.

When recipients who have received an illegal transplant return to the UK, the information about the type of donor (living or deceased) and transplant surgery and recovery is often missing or incomplete and transplant teams must piece together what has happened. When complications arise, which are common, it is difficult for healthcare professionals to understand the cause and how best to treat them, which puts the recipient at risk as well as the success of the transplant.

If a recipient comes back to the UK having received a transplant abroad and they are entitled to NHS care, they have access to the same medical care as they would if they were transplanted in the UK but the outcome for them and their transplant is, inevitably, less certain.

When people are found guilty of crimes related to organ donation and transplantation, public confidence is damaged and there is a real risk that fewer people will volunteer to freely donate their organs, after death or when they are alive. This impacts on all patients on the transplant list.

What can be done to avoid travel for transplantation and warn people about the risks?

Everyone involved in the organ donation and transplantation programme in the UK is committed to increasing the supply of organs for transplant for patients who are waiting, within legal and ethical boundaries but, like most other countries in the world, the number of patients in need of a transplant has increased due to the COVID-19 pandemic.

Getting a transplant more quickly is a big driver for patients to embark on risky strategies to find one but 'quicker' does not necessarily mean 'better'. There are some things we can do to help reduce the risks associated with travel for transplantation.

Potential recipients need to be aware of the risk of prosecution and the health risks associated with travelling abroad to receive a transplant in certain circumstances. Anyone who plans to travel outside the UK for a transplant is advised to discuss it with their transplant team before they make a decision and to read the leaflet at this link www.declarationofistanbul.org/resources and look at the recommended websites (see below) so that they are fully informed about their options

Transplant professionals need to:

- Inform recipients and family members about the health and legal implications of seeking a transplant abroad and provide educational resources/website links to up to date information (see below).
- Explore all other transplant options in the UK (living and deceased) with the recipient and their family.
- Consult with their hospital information governance team if a recipient requests access to their healthcare records (including HLA typing) to facilitate a transplant outside the UK or requests information that is consistent with a wish to do so.
- If a potential living donor is deemed unsuitable to donate, healthcare professionals should be alert to any healthcare record requests from other authorities (in consultation with their information governance team).
- Contact the HTA at transplants@hta.gov.uk as soon as possible if a patient returns to the UK having received a transplant abroad so that appropriate documentation can be completed.

Potential donors travelling to the UK

If a patient has the offer of a living donor transplant from someone who lives abroad, it is better if the donation and transplant can be carried out in the UK, provided that the person wishing to donate is suitable to donate from a medical, psychological, ethical and legal perspective.

Anyone wishing to travel to the UK to be considered as an organ donor can only be considered if:

- All other possible living donor options in the UK have been explored first.
- The person offering to donate from abroad is donating to an identified recipient in the UK with whom they have a genetic or close personal relationship. Anyone who

comes forward to donate from abroad in response to a social media/media call, or any case where the relationship cannot be clearly evidenced will not be accepted into the programme.

- The required evidence of relationship and documentation is available to satisfy UK Visas and Immigration (if a UK Entry visa is needed) and legal (HTA) requirements. The HTA will advise on the evidence of relationship that is required to satisfy the legal requirements in the UK.

Patients and potential living donors are responsible for providing required evidence of relationship and should expect their living donor coordinator (LDC) to ask them for this information prior to arranging travel and/or application for a UK Entry Visa.

Transplant professionals need to:

- Inform recipients and their potential donors about arrangements in the UK for living donor transplantation to manage their risks and expectations.
- Ask the recipient and their intended living donor to see evidence of relationship prior to travel so that the clinical team can decide if they are willing to accept a donor referral and/or write a letter of support to apply for a UK Entry Visa if required.
- Arrange for preliminary screening tests (as per UK Guidelines) and aim to gain some idea of suitability of a non-resident living donor prior to travel and/or agreeing to accept the referral. Involve relevant members of the multi-disciplinary team in decisions about acceptance/decline of referrals.
- Act upon any safeguarding concerns, in line with hospital policy, for the potential living donor if they are deemed unsuitable to donate following further assessment in the UK.

Further information

Declaration of Istanbul on Organ Trafficking and Transplant Tourism

www.declarationofistanbul.org/

Human Tissue Authority- Travelling Overseas for Illegal Transplantation

www.hta.gov.uk/guidance-public/body-organ-and-tissue-donation/living-organ-donation/travelling-overseas-illegal

UK Visas and Immigration

www.gov.uk/standard-visitor/visit-for-medical-reasons

NHS Blood and Transplant:

Living donor information

www.organdonation.nhs.uk/become-a-living-donor/

Recipient information

www.odt.nhs.uk/information-for-patients/

Clinical Information

www.odt.nhs.uk/transplantation/tools-policies-and-guidance/policies-and-guidance/

British Transplantation Society - UK Living Donor Guidelines (liver and kidney),

www.bts.org.uk/guidelines-standards/