

170 SUCCESSFUL MULTIORGAN TRANSPLANT AFTER DONORS DEATH CAUSED BY SUICIDAL METHANOL INGESTION

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Objectives: "Brain death" after accidental or suicidal intoxication is not so rare. Different toxins have specific organ toxicity. After a potential donor's death caused by poisoning, it is possible to remove and transplant organs without a higher risk of rejection. The specific toxicity of methanol is primarily due to central nervous effects and metabolic disorders. If the metabolic acidosis can be treated successfully, resulting organ damages are rare and the prognosis for an organ function without complications after transplant is good. **Case Report:** Procuring hospital: Cliniques Universitaires St. Luc, Bruxelles Belgium; Donor: female, 39-year-old, brain death after suicidal methanol intoxication; initial serum methanol concentration 0.44 mg/dL; treatment of the methanol intoxication with hemodialysis and ethanol therapy; initial blood gas analysis: pH 6.6; base deficit 36.4 mmol/L. After substitution of 600 mL sodium bicarbonate, the acid-base disorder was corrected and function of liver and kidneys was preserved. **Recipients:** Left kidney: successful transplant at Transplantation Centre of Martin-Luther-University Halle-Wittenberg, Germany; male, 40-year-old; hemodialysis since 6 years due to chronic glomerulonephritis, lost organ function 5 years after first kidney transplant because of chronic rejection. Result: good function to present. Right Kidney: successful transplant at Cliniques Universitaires St. Luc, Bruxelles Belgium; no detailed information about the recipient available; good function to present (telephone information from Eurotransplant). Liver: successful transplant at Hospitalier Universitaire Liege, Belgium; no detailed information about the recipient available; good function without complications until present (telephone information from Eurotransplant). Heart: provided for transplant of valves (no report). **Conclusion:** Death involving toxins does not seem to be a contraindication for donation of liver and kidney for transplant. Regional Poisons Control Centers can assist clinicians and organ procurement organizations in the appropriateness of toxic patients as organ donors. Organ donation from fatal methanol poisoning victims has been reported to be successful, with no long-term sequelae as a consequence of methanol poisoning. Organs reported for transplant included lungs, kidneys, liver and heart(1,2). **References:** (1)Evrard P, Hantson P, Ferrant E et al. Successful double lung transplantation with a graft obtained from a methanol-poisoned donor. *Chest* 1999;115:1458-1459. (2) POISINDEX® System: Toll LL & Hurlbut KM (Eds): POISINDEX® System. MICROMEDEX, Inc., Greenwood Village, Colorado (Vol. 110 expires 12/2001).