

Kidney and Liver Transplants OK'd Between People With HIV

People with HIV can now receive liver and kidney transplants from donors who are also HIV positive, according to federal health rules.

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People with HIV who need kidney or liver transplants have a reason to be thankful: They can now receive organs from donors who are also HIV positive, which also means that people living with HIV can donate their organs for others in the HIV community. Until this week, such transplants were only allowed as part of clinical studies.

On November 26, federal health officials with the Department of Health and Human Services (HHS) announced that such transplants can be permitted outside clinical research.

“We continue to do everything in our power to increase access to lifesaving organs while addressing health inequities faced by people with HIV,” [said HHS Secretary Xavier Becerra in a statement](#). “This rule removes unnecessary barriers to kidney and liver transplants, expanding the organ donor pool and improving outcomes for transplant recipients with HIV. This evidence-based policy update demonstrates our commitment to ensuring all Americans have access to the care they need.”

Last month, researchers at Johns Hopkins University School of Medicine, published [findings from a study](#) that concluded “transplantation from donors with HIV appeared to be noninferior to that from donors without HIV.”

“This study really shows without a doubt that there’s no differences between receiving a kidney from a donor with HIV versus without HIV,” lead scientist Christine Durand, MD, [told The Washington Post](#). “In addition to reducing stigma, this can help reduce inequities for people with HIV.”

The HHS ruling expands on the HIV Organ Policy Equity (HOPE) Act, which was signed into law in 2013. The HOPE Act lifted a ban on research related to transplants between people with HIV. As a result, more transplants involving people with HIV were allowed and evaluated. As data accumulated, it became apparent that such transplants were safe and effective, resulting in this week’s ruling.

As the HHS notes, “The final rule applies specifically to kidney and liver transplants, for which the evidence is robust, and shows the power of biomedical evidence to inform policy. The HOPE Act expansion was driven by a large body of evidence, much of which was funded by the National Institutes of Health (NIH) and HHS, including recent findings from an NIH-funded [study](#) demonstrating noninferiority of kidney transplants between donors and recipients with HIV compared to transplants from donors without HIV to recipients with HIV.”

“This final rule builds on the Biden-Harris administration’s commitment to advancing health equity and reducing barriers to care for people with HIV,” the statement continued. “By increasing the pool of available organs and streamlining the transplantation process, this policy can save lives, reduce stigma and discrimination associated with HIV and lower costs and wait times.”