

This brief list of contraindications to donate for corneal transplant purposes is intended to act as a guide only. Please call a Transplant Coordinator on 0408 370 148 to discuss a patient's medical suitability prior to raising donation.

1. General Exclusion:

- Death of unknown cause

May be acceptable if death certificate or autopsy report is only pending an unresolved differential cause of death where all the alternatives are NOT contraindications

2. Infectious Disease:

- AIDS or HIV seropositive
- Encephalitis – *bacterial cause ok*
- Endocarditis – *bacterial cause ok*
- Hepatitis - active
- HTLV-I or HTLV-II
- Leprosy
- Malaria
- Meningitis – active, or of unknown origin
- Progressive multifocal leukoencephalopathy

- Reye's syndrome
- Rubella – congenital
- Smallpox
- Subacute sclerosing panencephalitis
- Syphilis – active
- Tuberculosis – active
- Typhoid – active

Bacterial disease may be acceptable

3. Infection:

- Septicaemia (fungaemia, viraemia)

Bacteraemia is generally acceptable

4. Haematological Malignancy:

- Hodgkin's disease
- Leukaemia
- Lymphoma
- Lymphomatoid granulomatosis
- Lymphosarcoma

- Myeloma
- Myeloproliferative disease
- Polycythaemia vera – primary
- ***Other cancers acceptable EXCEPT disseminated melanoma***

5. Neurological Disorder:

- Chronic idiopathic demyelinating polyneuropathy
- Creutzfeldt-Jakob disease (CJD) – in potential donor or immediate family member
- Multiple sclerosis

- Motor neurone disease (amyotrophic lateral sclerosis)
- Alzheimer's Disease
- Parkinson's Disease

6. Neurodegenerative – High Risk:

- Death with neurologic disease of unknown diagnosis
 - Dementia or recent unexplained neurological symptoms e.g. ataxia, myoclonus, memory loss
- Other causes of dementia e.g cerebrovascular disease, brain tumour/trauma, or toxic- or metabolic induced may be acceptable*

- Recipients of human pituitary-derived growth hormone (PIT-HGH) from 1963 to 1985
 - Recipients of human-derived dura mater tissue
- Recipients of synthetic growth of synthetic growth hormone or dura mater are acceptable*
- UK travel risk: >6 months stay (cumulative) 1980-1996 inclusive

7. Infectious Disease – High Risk: (exclusion periods)

- Intravenous drug use for non-medical reasons (within previous 5 years)
- Been incarcerated in prison (within 12 months)
- Engaged in prostitution or sex for money or drugs (within 12 months)
- Male-to-male sex (within 12 months)
- Sexual contact with persons known to have HIV or hepatitis
- Known exposure to blood from person with HIV or hepatitis
- Tattoos or body piercings (within 4-6 months)
- Organ recipients (within 12 months)

8. Eye Disorders, Infection and Surgery: Please discuss all eye history with the Transplant Coordinator

- Ocular/intraocular infection – active at time of death (e.g. endophthalmitis, keratitis, conjunctivitis, uveitis, retinitis, choroiditis, iritis, vitreitis, scleritis)
 - Malignant tumours of the eye and anterior segment (e.g. retinoblastoma, melanoma, adenocarcinoma etc)
 - Corneal disorders (e.g. keratoconus, keratoglobus, dystrophy)
 - Corneal opacity, scarring, or pterygium, which involves the central area of the corneal button
 - Corneal surgery - please discuss with Transplant Coordinator
- Surgery/laser treatment for disorders other than corneal acceptable***
- Other eye disorders e.g. cataract, glaucoma, AMD, retinopathy acceptable***

For any questions regarding these contraindications please call 9929 8708 or 0408 370 148 to discuss with a transplant coordinator