Transplantation in Asia II - Update in Organ Transplantation in South Asia

Update in organ transplantation in Myanmar

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The first renal transplantation in Myanmar was performed by Prof G Williams (UK) in collaboration with Myanmar surgeons and physicians in 1993. The first successful renal transplant performed by Myanmar team took place in 1997. In 2004, Myanmar accomplished its first liver transplant, which was also the country's first deceased donor organ transplantation. Due to the absence of an HLA crossmatch facility, deceased donor renal transplantation has not yet been performed. Kidney, cornea, liver, and haemopoietic stem cell transplantations have been increasingly conducted with satisfactory outcomes. Thanks to dedicated training and experience in transplantation, particularly with the assistance of South Korea, there has been significant improvement in professional development. Furthermore, there has been an increase in transplant centers, the initiation of pediatric kidney transplantation, advancements in surgical techniques, laboratory facilities, and pharmacological availability. As of 2023, about 662 renal transplants have been performed in 11 hospitals (5 public, 4 military, and 2 private hospitals). Additionally, three private hospitals are awaiting approval. To enable data review, it is important to establish organ-specific registries for transplantation. Some transplant centers have already begun participating in the Asian Organ Transplantation Registry. According to data collected from various dialysis centers in 2010, approximately 45 dialysis patients sought transplantation abroad during that year. Many of their donors were second or third-degree relatives, while some were first-degree relatives, some were non-relatives and others were religious donors. Despite the increasing number of transplantations with reasonable outcomes, the current capacity still does not meet the population's needs. Obstacles such as a shortage of human resources, budget and funding limitations, insufficient facilities, inadequate government support due to other health priorities, poor teamwork, lack of public awareness, absence of an established program for deceased donor transplantation, and the absence of a proper registry hinder the establishment of National Organ Transplantation Program.