

Friends and family,

December 2020

I'm not good at asking for help, but this is something my physics equations can't seem to solve. Unfortunately, my kidneys have decided to fail (during a pandemic, how rude!), and I'll need a kidney transplant. My prognosis should be excellent, and a live donor means better longevity for the kidney than a deceased donor. [I am on the kidney database waiting list for deceased donor kidneys, but that is 4-6+ year average wait time for my blood type.] There are over 100,000 people on the kidney recipient wait list – a live donor would be a better option (and shorter wait).

I might be able to get a kidney from a living donor within a year if we can find a compatible match. The blood type (mine is O) has to match, but strangely it doesn't matter the +/-, as it does with blood donations .. kidneys are weird, go figure. Additionally, kidney donors can't have diabetes, unmanaged high blood pressure, or kidney problems themselves (that last one should be obvious). The donor doesn't have to be biologically related to me, just needs to be type O and healthy enough to donate (and willing, obviously). [Since I'm a professor, and my social media happens to have a fair number of students connected, for what should be obvious moral and ethical reasons, the donor **cannot** be a current student.]

A direct O-type donation is most likely the best. There are possibilities of a paired-donation. (Say Donor Sally is type A, so she can't donate to me (type O). Recipient Jim is type A, and Donor Billy is type O so can't donate to him. But, if Donor Billy is a match for Recipient Scott (me), and Donor Sally is a match for Recipient Jim .. then the team can "swap" those donations. That is a little more rare {because of all the pieces that have to fall into place}, but it happens, and the longest chain had over 30 patients/donors!) I think initially, the team would like to find a type O donor if possible.

The transplant team takes great care to ensure the safety and longevity of the donor, and have a rigorous screening process to protect the donors. My brother and my sister immediately volunteered to get tested. They are both fine, but for various reasons, they won't be able to donate. As much as I would gladly accept one of their kidneys, I'm grateful that the donor team was looking out for their best interests, and had exacting standards to meet. But, **it is a serious commitment on the part of a donor**. They will not let you donate if it will affect your longevity. (Your remaining kidney will actually "ramp up" its filtering to compensate for the missing kidney.) Additionally, it is a surgery, and there would be a recovery time of about 4-6 weeks, and a no-driving restriction for about 2-3 weeks, in addition to a 2-3 day hospital stay.

One resource to learn more about being a donor would be here : www.ExploreTransplant.org and the Beaumont Royal Oak Transplant team that I'm working with is here : <https://tinyurl.com/yarnoze4> (this is a shortened URL for the Beaumont link) with a phone number of : 800-253-5592, Option 4. There is a questionnaire for potential donors, and various links for information, as well as a donor booklet that is required for you to read prior to filling out the questionnaire. I can try to answer any questions about this, but if you want to ask more privately to the team, use those links/numbers.

The decision to be a donor is a very personal one, and there are many factors to consider. I'm grateful for all the support and encouragement I've received. I'm grateful for any potential donor that might step forward to be considered. But, I will make no judgement over anyone that does NOT wish to come forward to donate. I'm grateful enough if people can share this message with potential donors or other advocates.

The universe, in its completely uncaring nature, decided to throw this at me during a pandemic, which complicates everything. But, I've been able to gather a wonderful collection of humans around me that are very gracious in their support – and words fail me as I type this (getting very dusty in here right now).

[At the moment, though my kidney function is very low, I'm reasonably stable and don't yet need to have dialysis. But, I think that is in my near future, so I'm grateful that dialysis will be an option (a "bridge to the transplant") when I need it.]

I have plenty of stuff to do here on this third rock from the sun, and am only halfway through Clone Wars (to get ready for Mandalorian) .. I'm not planning on going anywhere!

Thank you for any support or passing along of this information! **Please share this anywhere you think it might help, and don't hesitate to contact me with any questions!**

Dr. Scott Schneider (sschneide@ltu.edu cell: 248-880-7177)