

**NHS BLOOD AND TRANSPLANT
ORGAN DONATION AND TRANSPLANTATION DIRECTORATE
PANCREAS ADVISORY GROUP ISLET STEERING GROUP**

AUDIT OF STANDARD CRITERIA FOR LISTING

SUMMARY

INTRODUCTION

- 1 Selection criteria for patients onto the national pancreas transplant list were agreed to accompany the new pancreas allocation scheme and ensure equitable access to pancreas transplantation in the UK. Adherence to the criteria has been audited via the Supplementary Pancreas/Islet Registration form since 1 May 2012. This paper reports form return rates and any patient listings that do not meet the agreed criteria.

FORM RETURN RATES

- 2 There were 485 registrations between 1 April 2015 and 31 March 2017. Nationally the return rates for the supplementary form have reached 86% for whole pancreas registrations and 97% for islet registrations.

STANDARD LISTING CRITERIA

- 3 Of the 110 new supplementary forms received between 1 March and 31 August 2017, 4 (4%) patients did not meet the standard listing criteria and were not circulated to the Pancreas Advisory Group Exemptions Panel.
 - One PAK Patient was recorded as not being insulin treated
 - One PTA patient was recorded as not being assessed by a diabetologist to have disabling hypoglycaemia and has only had one severe hypoglycaemic episode in the last 24 months
 - One PTA patient was recorded as only having one severe hypoglycaemic episode in the last 24 months
 - One ITA patient had no severe hypoglycaemic episodes in the last 24 months

RECOMMENDATIONS

- 4 Members are asked to review the registrations that did not meet the standard listing criteria.
- 5 Members are reminded that patients who no longer meet the requirement for a priority islet listing (e.g routine graft has failed or reactivation to priority list following period of suspension is more than 12 months after routine transplant) will need ODT Information Services to remove the patient from the priority list and list them on the routine transplant list in order to preserve the patient's waiting time.
- 6 Members are further reminded of the importance of completion and return of supplementary forms to ODT Information Services as it monitors the registrations within or outside the approved standard listing criteria.

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INTRODUCTION

- 1 Selection criteria for patients onto the national pancreas transplant list were agreed to accompany the new pancreas allocation scheme and ensure equitable access to pancreas transplantation in the UK. An audit of new registrations was proposed to ensure these criteria are being met and data collection commenced 1 May 2012. This paper reports form return rates between 1 April 2015 - 31 March 2017 and patient listings between 1 March - 31 August 2017 that do not meet the agreed criteria.

FORM RETURN RATES

- 2 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 April 2015 - 31 March 2017. **Table 1** also shows the number of registrations that were within criteria or were approved by the Pancreas Advisory Group Exemptions Panel. Nationally the return rates reached 86% for whole pancreas registrations and 97% for islet registrations.
- 3 The majority of centres have 100% (or close to) return rates, however, Manchester only has a return rate of 8% for whole pancreas registrations and 67% for islet registrations. Consequently at Manchester it is not possible to monitor whether patients registered are within the approved standard listing criteria. Lists of registered patients with outstanding supplementary forms are sent out to centres each month.

Table 1 Centre specific return rates for the standard listing criteria form, 1 April 2015 - 31 March 2017

Centre	Number of new registrations	Forms returned		No. within criteria/ approved	
		N	%	N	%
Vascularised pancreas					
Cambridge	62	62	100	60	97
Cardiff	19	19	100	19	100
Edinburgh	43	43	100	43	100
Guy's	80	80	100	79	99
Manchester	64	5	8	4	80
Newcastle	20	20	100	20	100
Oxford	134	132	99	122	92
WLRTC	28	27	96	27	100
Total	450	388	86	374	96
Pancreatic islet					
Edinburgh	17	17	100	15	88
King's College	1	1	100	1	100
Manchester	3	2	67	2	100
Newcastle	4	4	100	4	100
Oxford	9	9	100	8	89
Royal Free	1	1	100	1	100
Total	35	34	97	31	91

STANDARD LISTING CRITERIA

- 4 **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 March - 31 August 2017 and who met the standard listing criteria.
- 5 Of the 110 new supplementary forms received, 4 (4%) did not meet the standard listing criteria. None of these registrations were circulated to the Pancreas Advisory Group Exemptions Panel. The standard listing criteria are shown in **Appendix 1**.

Table 2 Registrations outside standard listing criteria, 1 March 2017 - 31 August 2017

Registration type	Number of new forms received	Outside criteria		Approved appeals		Outside criteria and not approved	
		N	(% of forms received)	N	(% of forms received)	N	(% of forms received)
IAPK	2	0	(0%)	0	-	0	-
SIK	1	0	(0%)	0	-	0	-
SPK	84	0	(0%)	0	-	0	-
PTA	6	2	(33%)	0	(0%)	2	(100%)
PAK	4	1	(25%)	0	(0%)	1	(100%)
ITA	9	1	(11%)	0	(0%)	1	(100%)
IAK	2	0	(0%)	0	-	0	-
Priority islet	2	0	(0%)	0	-	0	-
Total	110	4	(4%)	0	(0%)	4	(100%)

- 6 **Table 3** shows, by registration type, the criteria that were not met for those 4 registrations. Further details are given in **Appendix 2**.

Table 3 Registrations outside standard listing criteria, by registration type, 1 March 2017 - 31 August 2017		
Registration type	Criteria not met	Number of registrations
PAK	Not insulin treated	1
PTA	Had only 1 hypoglycaemic episode in the last 24 months and was not assessed by a diabetologist to have disabling hypoglycaemia	1
PTA	Had only 1 hypoglycaemic episode in the last 24 months	1
ITA	Had no severe hypoglycaemic episodes in the last 24 months	1
Total		4

ACTION

- 7 Members are asked to review the registrations that did not meet the standard listing criteria.
- 8 Members are reminded that patients who no longer meet the requirement for a priority islet listing (e.g routine graft has failed or reactivation to priority list following period of suspension is more than 12 months after routine transplant) will need ODT Information Services to remove the patient from the priority list and list them on the routine transplant list in order to preserve the patient's waiting time.
- 9 Members are further reminded of the importance in completion and return of supplementary forms to ODT Information Services as it monitors the registrations within or outside the approved standard listing criteria.

Appendix1: Standard listing criteria by registration type

The standard listing criteria are:

Simultaneous kidney/ pancreas (SPK) and simultaneous kidney/ islet (SIK)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30\text{kg/m}^2$
- c. Patients listed must be receiving dialysis or have a GFR of ≤ 20 mls/min

Pancreas transplant alone (PTA)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30\text{kg/m}^2$
- c. At least 2 severe hypoglycaemic episodes in the last 24 months and be assessed by a diabetologist to have disabling hypoglycaemia

Pancreas after kidney (PAK)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30\text{kg/m}^2$

Islet transplant alone (ITA)

- a. All patients listed should have insulin treated diabetes
- b. Patients should have type 1 diabetes or diabetes secondary to pancreatectomy / pancreatitis. All should have confirmed C-peptide negativity in presence of glucose >4 mmol/l
- c. At least 2 severe hypoglycaemic episodes in the last 24 months and be assessed by a diabetologist to have disabling hypoglycaemia

Islet after kidney (IAK)

- a. All patients listed should have insulin treated diabetes
- b. Patients should have type 1 diabetes or diabetes secondary to pancreatectomy / pancreatitis. All should have confirmed C-peptide negativity in presence of glucose >4 mmol/l
- c. A history of severe hypoglycaemia within the last 24 months or HbA1c ≥ 53 mmol/mol

Priority islet transplant (since 3 September 2014)

- a. All patients should be listed within 12 months of routine graft
- b. All patients should have a functioning routine graft (C-peptide ≥ 50 pmol/L) at the time of priority transplant.

Appendix2: Registrations that did not meet standard listing criteria by registration type
(information highlighted indicates the information that does not meet the criteria)

Pancreas transplant alone (PTA)

Pancreas after kidney (PAK)

Islet transplant alone (ITA)

Patient	Transplant type	Registration date	Centre	Is the recipient insulin treated	Cause of diabetes	BMI	Is the recipient receiving dialysis	Estimated GRF at time of registration	Hypoglycaemic episodes in last 24 months	Diabetologist Assessment Y/N	Approved Y/N
1	ITA	10 March 2017	Edinburgh	Y	Type 1	31.2	N	52.0	0	Y	Y
2	PAK	31 March 2017	Oxford	N	Type 1	26.1	N	62.0	1	N	N
3	PTA	23 May 2017	Oxford	Y	Type 1	23.5	N	66.0	1	N	N
4	PTA	17 July 2017	Oxford	Y	Type 1	22.3	N	59.0	1	Y	Y