

**NHS BLOOD AND TRANSPLANT
ORGAN DONATION AND TRANSPLANTATION DIRECTORATE**

PANCREAS ADVISORY 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 499 registrations between 1 January 2016 - 31 December 2017. Nationally the return rates for the supplementary form have reached 98% for whole pancreas registrations and 100% for islet registrations.

STANDARD LISTING CRITERIA

- 3 Of the 142 new supplementary forms received between 1 September 2017 and 31 January 2018, one (1%) patient did not meet the standard listing criteria and was not circulated to the Pancreas Advisory Group Exemptions Panel.
 - One PTA patient was recorded as not being assessed by a diabetologist to have disabling hypoglycaemia.

On checking with the centre involved, it was found that this was a data recording error and the patient had met the standard listing criteria.

ACTION

- 4 Members are reminded to fully complete and return the supplementary registration form.
- 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 Hub 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.

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INTRODUCTION

- 6 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 January 2016 - 31 December 2017 and patient listings between 1 September 2017 - 31 January 2018 that do not meet the agreed criteria.

FORM RETURN RATES

- 7 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 January 2016 - 31 December 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 98% for whole pancreas registrations and 100% for islet registrations.
- 8 The majority of centres have 100% or close to return rates for whole and islet registrations and since the last paper Manchester's return rate has improved to 87% for whole pancreas registrations. 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 January 2016 - 31 December 2017

Centre	Number of new registrations	Forms returned		No. within criteria/ approved	
		N	%	N	%
Vascularised pancreas					
Cambridge	51	51	100	50	98
Cardiff	22	22	100	22	100
Edinburgh	49	49	100	49	100
Guy's	74	74	100	74	100
Manchester	69	60	87	60	100
Newcastle	23	23	100	23	100
Oxford	138	136	99	129	95
WLRTC	24	24	100	24	100
Total	450	439	98	431	98
Pancreatic islet					
Edinburgh	21	21	100	18	86
King's College	2	2	100	2	100
Manchester	9	9	100	9	100
Newcastle	6	6	100	6	100
Oxford	10	10	100	9	90
Royal Free	1	1	100	1	100
Total	49	49	100	45	92

STANDARD LISTING CRITERIA

- 9 **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 September 2017 - 31 January 2018 and who met the standard listing criteria.
- 10 Of the 142 new supplementary forms received, one (1%) did not meet the standard listing criteria. This one registration was not circulated to members of the Pancreas Advisory Group appeals panel. The standard listing criteria are shown in **Appendix 1**.

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)
SPK	107	0	(0%)	0	-	0	-
PTA	6	1	(17%)	0	(0%)	1	(100%)
PAK	10	0	(0%)	0	-	0	-
IAPK	2	0	(0%)	0	-	0	-
ITA	9	0	(0%)	0	-	0	-
SIK	5	0	(0%)	0	-	0	-
Priority islet	3	0	(0%)	0	-	0	-
Total	142	1	(1%)	0	(0%)	1	(100%)

- 11 **Table 3** shows, by registration type, the criterion that was not met for the one registration that was not reviewed by the exemption panel. Further details are given in **Appendix 2**. On checking with the centre involved, it was found that this was a data recording error and the patient had met the standard listing criteria

Registration type	Criteria not met	Number of registrations
PTA	Not been assessed by a diabetologist to have disabling hypoglycaemia.	1
Total		1

ACTION

- 12 Members are reminded to fully complete and return the supplementary registration form.
- 13 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 Hub 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.

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 listing.

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)

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	IFCC-HbA1c	Approved Y/N
1	PTA	19 October 2017	Oxford	Y	Type 1	25.8	N	90.0	30	N		