

**KIDNEY ADVISORY GROUP**

**December 2016**

**UPDATE**

**NON-SIMULTANEOUS SURGERY IN THE UK LIVING DONOR KIDNEY SHARING SCHEMES**

**1. BACKGROUND**

The preferred option within the UK Living Kidney Sharing Schemes (UKLKSS) is simultaneous donor surgery for all living donor transplants identified in the quarterly matching runs. In 2015, KAG approved the introduction of non-simultaneous surgery in the UKLKSS to:

- Facilitate the introduction of long altruistic donor chains and increased activity within the schemes
- Accommodate more identified transplants, for all exchange types, within the designated weeks of surgery (sharing fortnight)
- Reduce delay for donors and recipients due to logistical barriers
- Improve the proportion of centres meeting the 8 week clinical standard for scheduled dates of surgery

Following presentation at the June 2016 meeting on the first 150 cases, it was agreed that a regular update would be provided to KAG on the impact of non-simultaneous surgery in the UK Living Kidney Sharing Schemes (UKLKSS) to include cases:

- Presented for approval to Chair of KAG on an exception basis because the time proposed between first and final transplants was greater than two weeks (equivalent to sharing fortnight) within the same exchange
- Non-proceeding transplants and outcomes for potential recipients of non-proceeding transplants

This paper provides an update on non-simultaneous surgery from June 2016 to date.

**2. ANALYSIS**

Since June 2016, 7 exchanges were scheduled for non-simultaneous surgery, which is comparable with the previous reporting period (17 exchanges reported between April 2015 and May 2016).

5 long altruistic donor chains were completed, resulting in 15 transplants all of which proceeded within the agreed two week timeframe in sequence, initiated by the non-directed altruistic donor. Of these, 3 transplants proceeded within 1 day of the first transplant in the chain; 2 within 5 days (within the same chain); 1 within 7 days and 1 within 8 days ( both within the same chain).

Two additional altruistic donor chains were partially completed, 1 long chain with the final transplant scheduled to take place 14 days after the first transplant and 1 short chain (defaulted from a long chain) with the final transplant scheduled to take place 18 days after the first transplant. If all of these exchanges proceed to plan, an additional 5 transplants will be achieved and a total of 20 transplants will have resulted through non-simultaneous surgery within the reporting period.

The transplant due to be performed after 14 days was referred to the Chair of KAG for approval. This was an exceptional case, deferred on immunological grounds to allow for optimisation of the recipient. The non-directed donor and paired recipient in the first part of the chain were deferred, allowing the latter part of the chain to proceed to plan.

The transplant scheduled 18 days after the first transplant was not referred for Chair of KAG approval due to oversight and reporting arrangements have subsequently been clarified with the relevant centre.

### **3. SUMMARY AND RECOMMENDATIONS**

Non-simultaneous surgery remains a safe and effective option to maximise utilisation within the UKLKSS and to overcome logistical barriers to facilitate transplants, particularly in long altruistic donor chains.

The risk of non-simultaneous exchanges not proceeding to completion when they are deferred for non-clinical reasons remains low in comparison with the potential transplant benefit that can be achieved.

It is recommended that, in addition to the existing safeguards, all cases where clinical considerations impact on the decision to consider non-simultaneous surgery must be referred for approval to the Chair of KAG.

The policies will continue to be monitored and reviewed through KAG.

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