

**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 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 512 registrations between 1 April 2016 - 31 March 2018. Nationally the return rates for the supplementary form have reached 95% for whole pancreas registrations and 100% for islet registrations.

STANDARD LISTING CRITERIA

- 3 106 new supplementary forms were received between 1 February 2018 - 31 July 2018, and all patients meet the standard listing criteria.

RECOMMENDATIONS

- 4 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 to liaise with ODT Hub Information Services when removing the patient from the priority list and activating them on the routine islet transplant list in order to preserve the patient's accrued waiting time.

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INTRODUCTION

- 5 Selection criteria for patients onto the national pancreas transplant list were agreed to accompany the 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 2016 - 31 March 2018 and patient listings between 1 February 2018 - 31 July 2018 that do not meet the agreed criteria.

FORM RETURN RATES

- 6 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 April 2016 - 31 March 2018. **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 95% for whole pancreas registrations and 100% for islet registrations.
- 7 The majority of centres have a 100% return rate however, Manchester only has a return rate of 72%. Consequently, at Manchester it is not possible to monitor whether all 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 2016 - 31 March 2018					
Centre	Number of new registrations	Forms returned		No. within criteria/ approved	
		N	%	N	%
Vascularised pancreas					
Cambridge	47	47	100	47	100
Cardiff	25	25	100	25	100
Edinburgh	49	49	100	49	100
Guy's	77	77	100	77	100
Manchester	75	54	72	54	100
Newcastle	20	20	100	20	100
Oxford	139	139	100	137	99
WLRTC	26	25	96	25	100
Total	458	436	95	434	100
Pancreatic islet					
Edinburgh	22	22	100	20	91
King's College	2	2	100	2	100
Manchester	14	14	100	14	100
Newcastle	7	7	100	7	100
Oxford	8	8	100	7	88
Royal Free	1	1	100	1	100
Total	54	54	100	51	94

STANDARD LISTING CRITERIA

- 8 **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 February 2018 - 31 July 2018 and who met the standard listing criteria.
- 9 106 new supplementary forms were received, and all patients met the standard listing criteria. The standard listing criteria are shown in **Appendix 1**.

Table 2 Registrations outside standard listing criteria, 1 February 2018 - 31 July 2018

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	1	0	(0%)	0	-	0	-
SIK	11	0	(0%)	0	-	0	-
SPK	77	0	(0%)	0	-	0	-
PTA	2	0	(0%)	0	-	0	-
PAK	2	0	(0%)	0	-	0	-
ITA	4	0	(0%)	0	-	0	-
IAK	3	0	(0%)	0	-	0	-
Priority islet	5	0	(0%)	0	-	0	-
Total	106	0	(0%)	0	(0%)	0	(0%)

ACTION

- 10 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 to liaise with ODT Hub Information Services when removing the patient from the priority list and activating them on the routine islet transplant list in order to preserve the patient's accrued waiting time.

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September 2018

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