

NHSBT Board Meeting
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A Patient Story: Corinne Hutton, Limb Transplant Recipient

The Vascular Composite Allograft programme has been running since Autumn 2013. Developed by Prof. Simon Kay in Leeds Teaching Hospitals in conjunction with NHSBT it offers hand / arm transplants to a mix of limb absent or non-functioning limb patients. Transplants only take place in Leeds and potential donors are sourced from Donation after Brainstem Death (DBD) patients under 60 years of age being cared for in Intensive Care Units within 60-80 minutes travel time of the Transplanting Unit. Donation after Circulatory Death (DCD) patients are not considered as blood flow and circulation following DCD donation is not optimal to support limb transplants. The Yorkshire and North West Organ Donation Teams have Units within the travel boundaries for donation and support the programme. Following initial training to outline the benefits of limb transplants, the family approach is the same as for any organ with the Specialist Nurse for Organ Donation (SN-OD) considering approaching on a family by family basis with those consenting to all organs or indicating a general desire to help as many people as possible being most likely to consent.

There have been 6 limb transplants all of which are still functioning. There are currently no patients on the transplant waiting list but patients are being worked up continuously so this is likely to change. One of the patients who have benefitted from limb transplantation is Corinne Hutton and this is her story:

“I lost my hands and my legs to sepsis in June 2013 at the age of 43. After a series of surgeries I had been through so much and so many operations that I felt hand transplants were not for me. Gradually my views on hand transplants started to change and I started to see how this could really affect my day-to-day life and give me the chance to function with hands again. You don’t appreciate what you’ve got until it’s gone! I knew at that point that I wanted them and was prepared for the risk, the drugs and the effort.

I was accepted on to the hand transplant list in September 2014 and at that point I was the only person on the list and likely to be the first person in the UK to get a double hand transplant. It had been explained though that because of blood transfusions I had due to my sepsis, I had extra antibodies in me that could not be present in the donor, thereby making finding a matching donor more difficult.

The call came for the first time in November 2014 about 7pm. After 4 hours of nervous waiting, he told me that they were not a match. I was so disappointed but also greatly aware of someone's family grieving and how I wouldn't die from not getting hands, unlike many organ transplant recipients.

I'd like to praise the Specialist Nurses in Organ Donation who ask that awful question of a grieving family and thank them for trying so hard for me. In the meantime other patients received hand transplants, including my friend from clinic who received her double hand transplant before me! In June 2016 we were discussing the parameters when Prof Kay asked if I understood why it was so difficult to find a donor. I'd had 25 blood transfusions and therefore there were far more antibodies to avoid. That suddenly sounded like we were looking for a needle in a haystack and I started to believe that a donor was highly unlikely to be found.

You know what's coming next as I was completely ill-prepared and of course that's when the phone call for surgery would come. This time all the tests have been completed and we knew they were positive results. The family had agreed in writing to organ donation including hands and it was going to happen.

Post-surgery Prof Kay and the team were very good at keeping me up-to-date, actually everybody involved couldn't wait to tell me how well the operation had gone and what a success it had been! I had received the donors wrists as I'd hoped for and they were hopeful of a fantastic outcome. I could not believe the sheer scale of the production; There are so many people involved in making sure this operation goes well and every single one of them is very very important and I was very grateful and proud they were looking after me.

I was constantly aware of the decision that some family had made, in the worst possible circumstances, grieving for their loved one. They made the decision to donate her hands and I think many organs to save people's lives and change mine. I can never thank them enough and I'm so grateful for their bravery. I made a promise that I would really look after these hands and put them to really good use. I fully intend to travel the world with them doing good things and hoping to improve the lives of amputees and related illnesses and making a difference with them. I hope they think her hands went to a good home and that it gives them some comfort to know that part of her lives on in such a positive way.



My hands are awesome too; they are the perfect match and performing so well. I can't believe how lucky I am to be given these gifts, the science and expertise that went into it and I won't ever forget where they came from. Thank you. RIP brave lady."

Author

Corinne Hutton, Patient

Responsible Director

Anthony Clarkson, Director of Organ Donation and Transplantation