

UK LKD Network Newsletter

INTRODUCTION

Dear Colleagues

Welcome to the Summer 2019 edition of the UK LKD network newsletter. We were pleased to see members of the network at the pop-up session at UKW in Brighton. Thank you to all our speakers. We heard updates from clinical leads in the regions who have picked KQuiP 'Transplant First' projects and discussed the potential challenges of 'opt out' on the living donor programme in the UK. Below are summaries of the data and there are links to the presentations.

KQuiP Transplant First update

Dr Steve Dickinson, South West KQuiP lead

The regional team are meeting regularly and have identified the following common priorities:

- Need to reduce work up times...18 weeks from start, and need to start to collect this data rigorously (with aim to reduce time)
- Increase theatre availability for live kidney transplants e.g. Bristol have negotiated a weekly theatre slot with potential for 33 live transplants in 2018/19
- Systematically review patients with eGFR <20
- Standard protocol for referral to Transplant Assessment Clinic- Bristol & Plymouth
- <https://www.odt.nhs.uk/living-donation/uk-living-kidney-donation-network/>

KQuiP Transplant First update

Dr Smeeta Sinha, North West KQuiP lead

The KQuiP transplant first leads have identified areas of strength for shared learning

- QI Expertise – Aintree and Salford
- Access to local/regional data – MFT and Liverpool transplanting centres
- Patient & staff education - Royal Preston and Liverpool
- Early referral – Salford (Talk @25)
- Cardiology Work up – Aintree
- <https://www.odt.nhs.uk/living-donation/uk-living-kidney-donation-network/>

A common theme in the discussion afterwards was the difficulty in defining the timeframe for donor work up, so that regional units can audit and compare donor work up. The time frame shown in the table below is used in the Teesside LKD service as a guide to audit and evaluate the programme and can be modified and used by regions. The target time frames are for non-complex donors, donors can pause in the pathway at the end of each time frame.

Teesside donor work up audit time frame

1	First enquiry to identification as primary donor	Includes basic health screening questionnaire, blood group and HLA	Target 4 weeks
2	Medical assessment pathway	This includes all standard medical and tests to identify donor fitness	Target 4 weeks
3	Surgical pathway	From referral to the surgical team to transplant surgery	Target 10 weeks

Dr Adnan Sharif Opt-out and living kidney donation

Adnan shared international evidence that opt-out countries have lower rates of living donors and early data from Wales has suggested this may also be the case in the UK.

<https://www.odt.nhs.uk/living-donation/uk-living-kidney-donation-network/>

Dates for the diary

- NHSBT/BTS Recipient and Living Donor Co-ordinator Induction, 25th-26th September 2019, Stoke Gifford, Bristol
- BTS Living Donor Forum and Winter Ethics Symposium, 28th November 2019 Park Inn by Radisson, York
- UK Living Kidney Donation Network meeting, 13th February 2013, Jury's Inn, Birmingham

Resources for UK Living Donor Kidney Transplantation Network

A list of up to date resources and how to access them is attached.



LDKT useful
resources v5 May 20

Kind regards

A handwritten signature in black ink, appearing to read 'Caroline Wroe'.

Dr Caroline Wroe
Chair of the UK Living Kidney Donation Network
Consultant Nephrologist
South Tees NHS Foundation Trust

A handwritten signature in black ink, appearing to read 'Katie Vinen'.

Dr Katie Vinen
RA Lead for Living Kidney Donation
Consultant Nephrologist,
Kings College Hospital