

# Deceased donor kidney offer review schemes (ORSs): an update

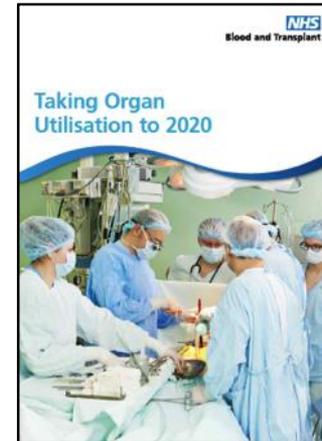
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# Outline

- Rationale
- Overview of Offer Review Schemes
- Detailed pathways
- Recent changes and future plans



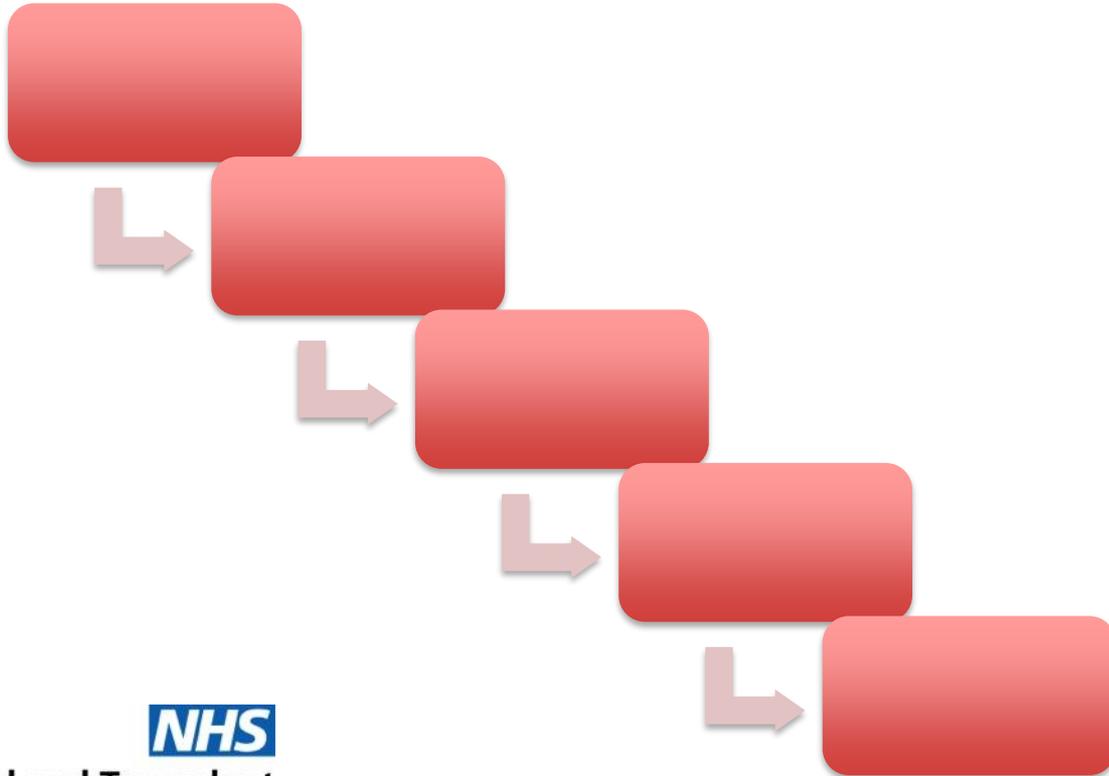
# Rationale

- Increasing emphasis on organ utilisation optimisation
- Large database analyses are useful, but are often unable to identify specific instances where OU practices can be improved
  - Lack of information from transplant centres
  - Concerns about inaccuracy of coding for reasons of offer decline / organ discard
- Case-by-case analysis of OU events is resource-intensive
- Therefore, 'higher quality' sub-groups of deceased donor kidney offers are analysed
  - Low rates of offer decline/ discard are reasonably expected

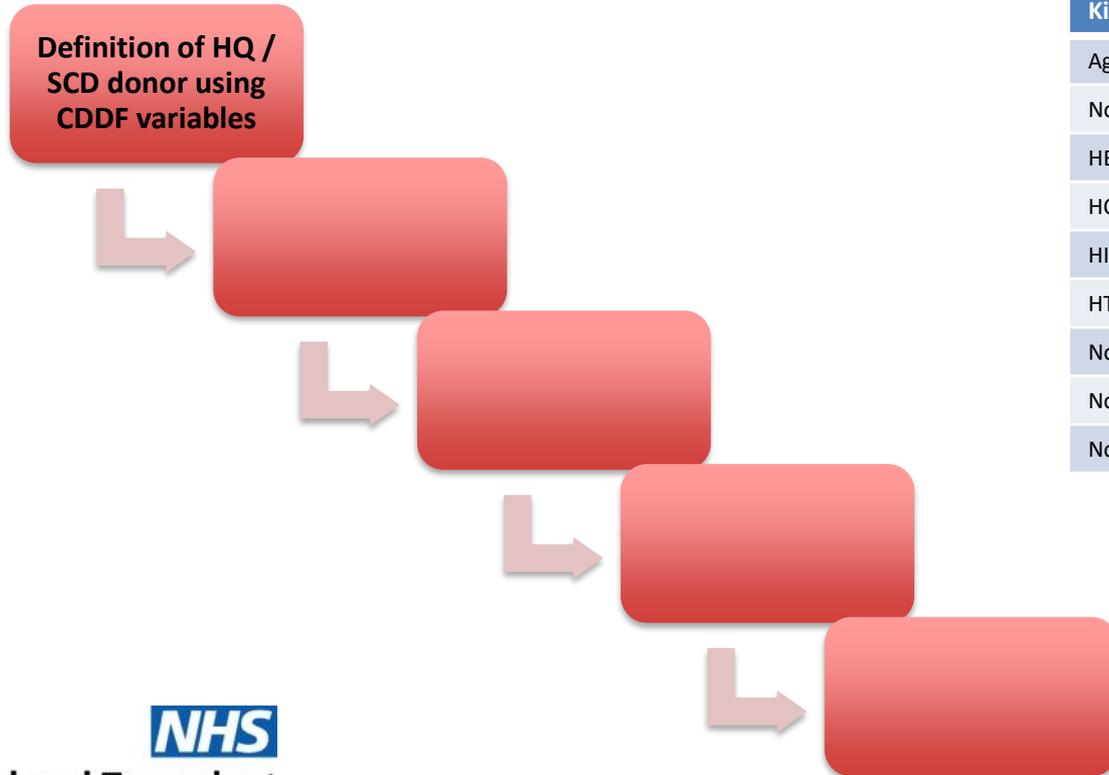
# Overview

- Offer Review Schemes x 3 in deceased donor kidney transplantation
  - ‘Higher quality’ donors
    - 1) Offer decline
    - 2) Organ discard
  - Standard criteria donors (SCD\*) offered to high priority recipients (HPR)
    - 3) Offer decline
    - HPR = MM 0-0-0 or cRF >85% or waiting time >7 years
- Inclusion criteria
  - Named-patient offers only (i.e. not KFTS)
  - Donor / organ / logistical reasons for decline or discard (i.e. not for recipient reasons, e.g. uncontactable, unfit, positive cross-match)

# Offer Review Schemes



# Offer Review Schemes



## Kidney 'higher quality' donor CDDF criteria

Age >10 and <50 years AND

No malignancy AND

HBs Ag neg AND

HCV Ab neg AND

HIV neg AND

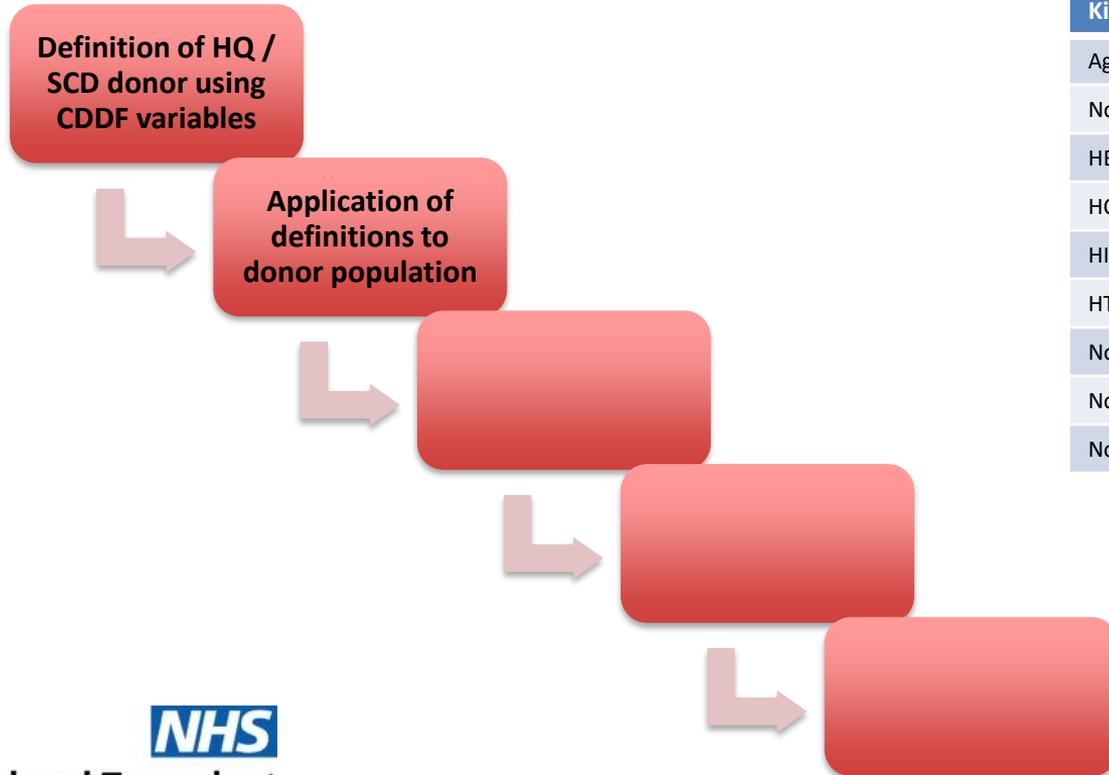
HTLV neg AND

No hypertension AND

No diabetes AND

No UTIs in current admission

# Offer Review Schemes



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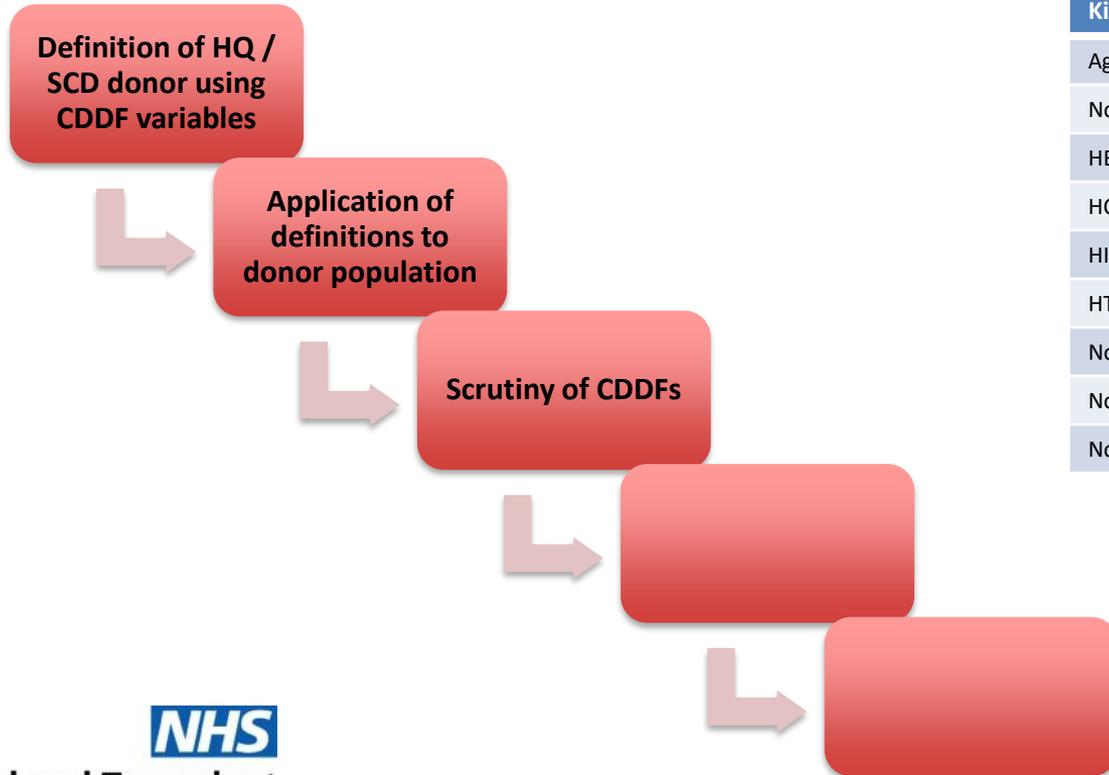
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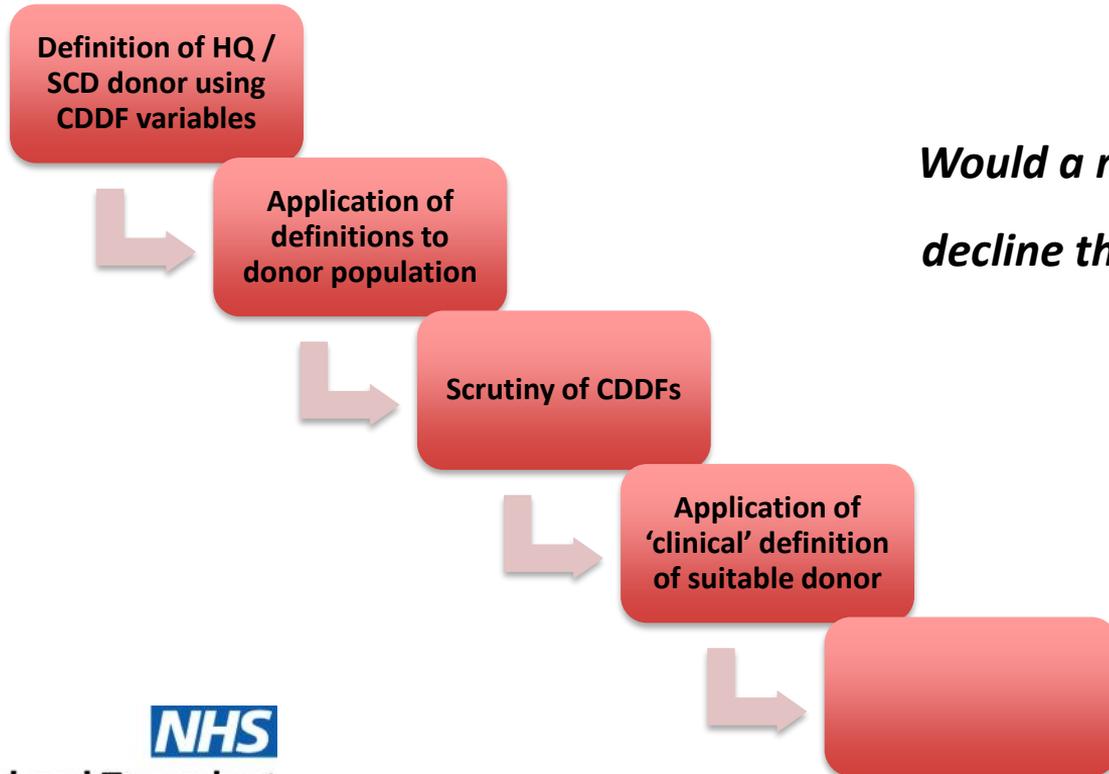
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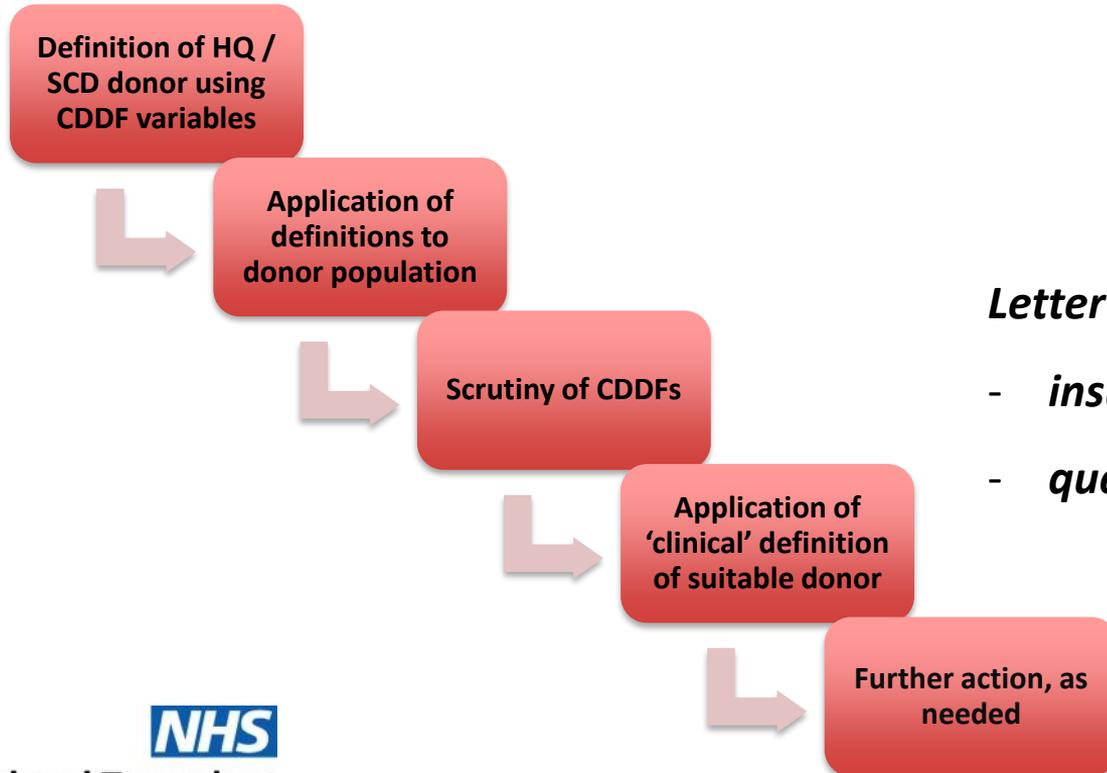


# Offer Review Schemes



*Would a reasonable transplant clinician decline this offer (or discard this organ) for this patient?*

# Offer Review Schemes



*Letter of enquiry to unit lead if:*

- *insufficient NHSBT data and/or*
- *queries about utilisation decisions*

# Further details

- Information from NHSBT made available to OU Clinical Lead
  - Date / time of offer and decline / discard
  - Transplant unit
  - Coded reason for decline / discard (via Hub: primary / secondary / other)
  - Offering pathway (KOS / KFTS)
  - ‘Recipient’ details (age, cRF, ‘waiting time’, matchability points)
  - Final destination of organ (discarded, accepted and used, etc)
- Information not available to OU Clinical Lead
  - Name of declining clinician
  - Voice recording of discussion with Hub
  - Clinical outcome of organ (DGF / PNF, eGFR)
    - Offering data is examined within 2-4 weeks of the event, so these data aren’t available to NHSBT

# Recent changes / plans

- Modification of definition of 'high priority recipient' for SCD offers
  - Tier A criteria (cRF 100% or MP 10 or waiting time >7 years)
- Introduction of Offer Review Scheme Oversight Committee
  - Acknowledgement of the subjective nature of these decisions
  - Will examine responses from units and give an opinion on OU decision-making
    - Green – no significant concerns about OU decision
    - Amber – significant concerns about OU decision
    - Red – major issue identified, requiring escalation to Professor Forsythe
  - A statistically valid means of collating **amber** events and comparing event rates between transplant units is currently being explored

# Conclusions

- Increasing recognition of the importance of organ utilisation
- Complex (and time-intensive) pathways are needed to examine individual OU decisions in a sub-group of deceased donor offers
- Statistical techniques to identify centres with outlying OU practices are being developed

# Acknowledgements

## **NHSBT**

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Frederick Smith

## **KAG**

Chris Watson, Rommel Ravanan

## **ORS Oversight Committee**

Lorna Marson  
Imran Saif  
Adam Barlow  
Gareth Jones  
Julia Mackisack

## **Responding unit leads**