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

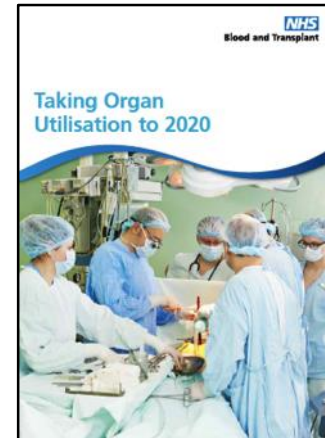
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Outline

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



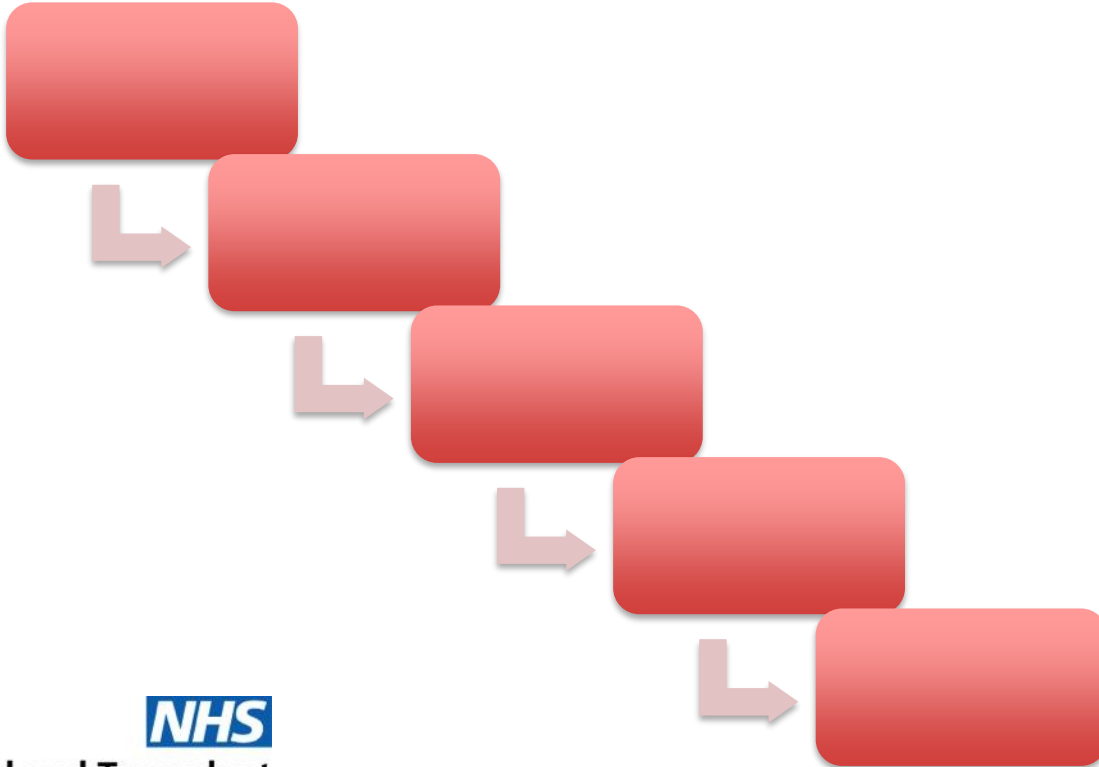
Rationale

- 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

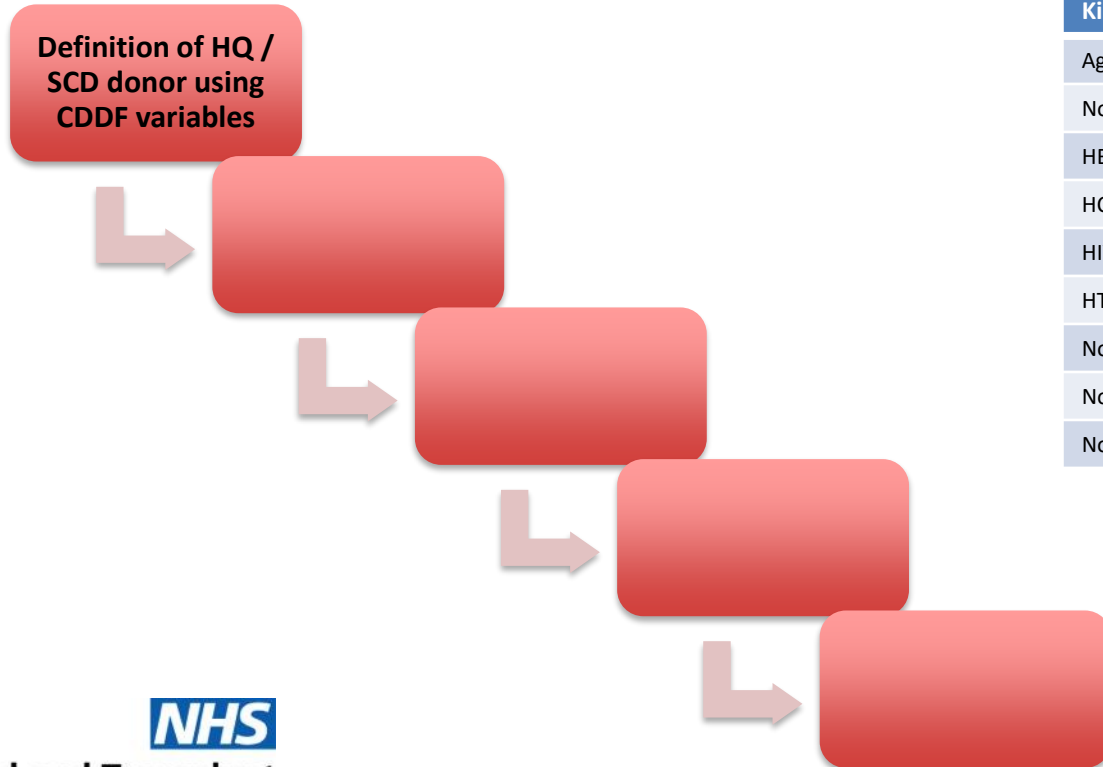
Overview

- 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

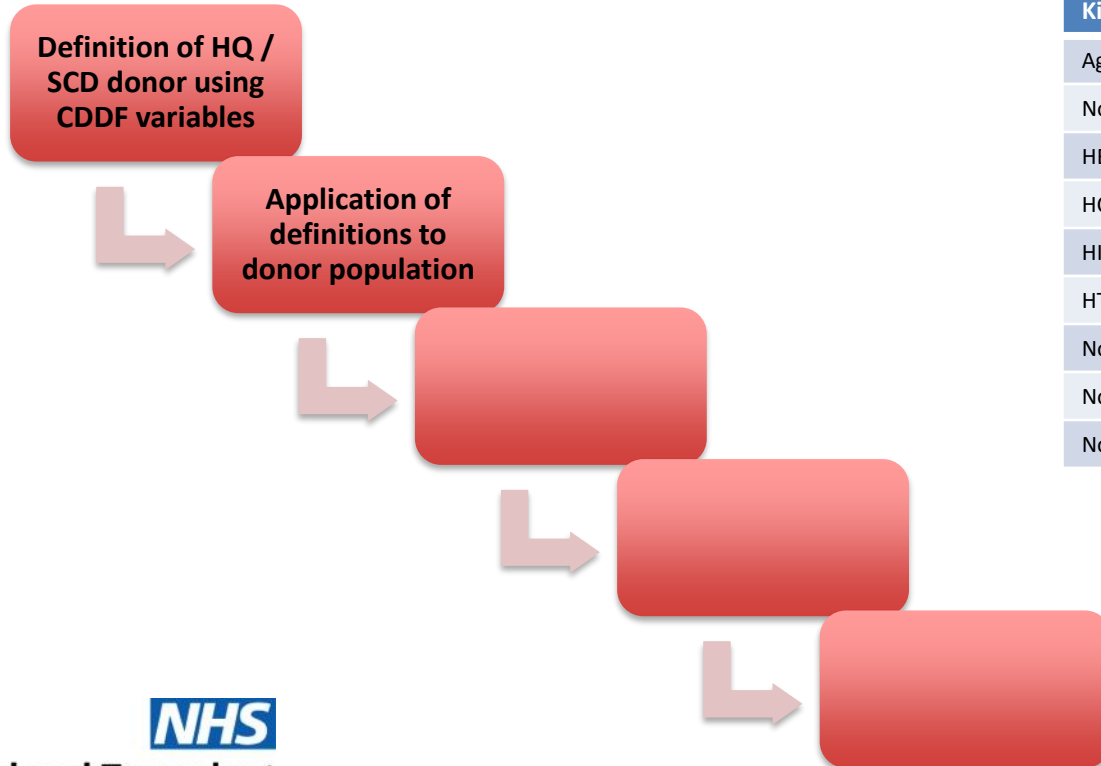
HTLV neg AND

No hypertension AND

No diabetes AND

No UTIs in current admission

Offer Review Schemes



Kidney 'higher quality' donor CDDF criteria

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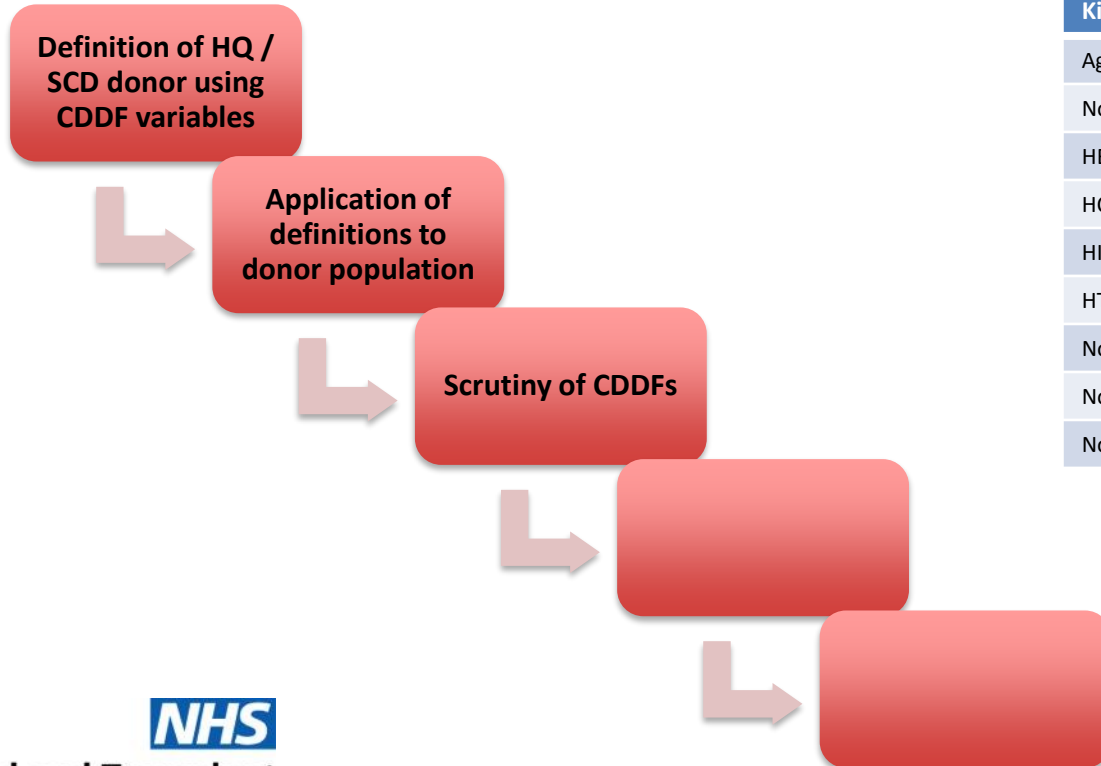
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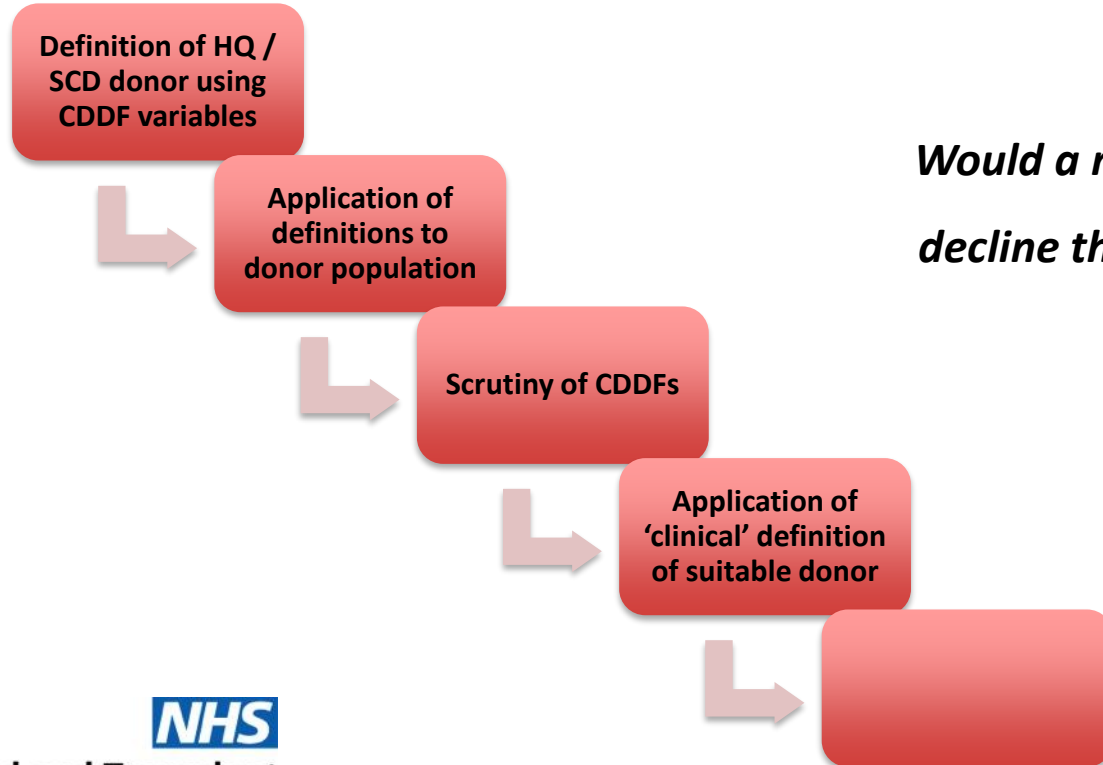
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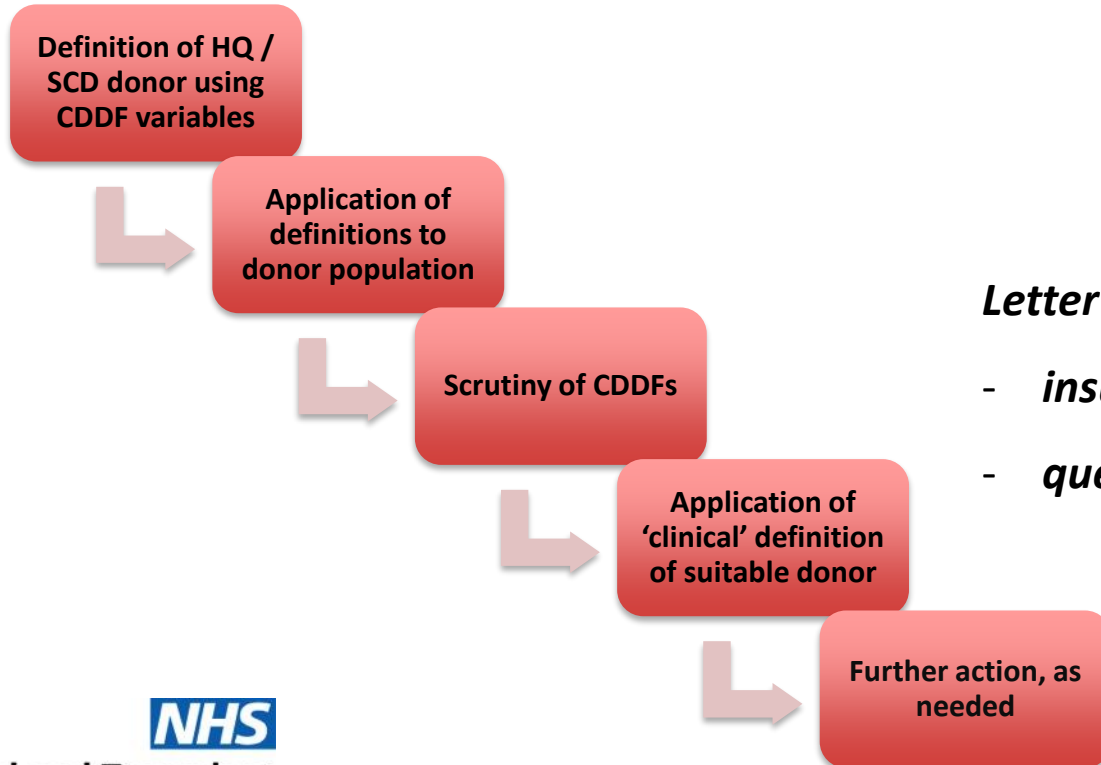
No UTIs in current admission

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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KAG

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ORS Oversight Committee

Lorna Marson
Imran Saif
Adam Barlow
Gareth Jones
Julia Mackisack

Responding unit leads