NHS BLOOD AND TRANSPLANT ORGAN DONATION AND TRANSPLANTATION DIRECTORATE

PANCREAS ADVISORY GROUP

AUDIT OF STANDARD CRITERIA FOR LISTING

SUMMARY

INTRODUCTION

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

There were 270 registrations between 1 January - 31 December 2019. Nationally the return rates for the supplementary form have reached 71% for whole pancreas registrations and 92% for islet registrations.

STANDARD LISTING CRITERIA

- 3 Of the 123 new supplementary forms received between 1 June 2019 31 January 2020, 3 (2%) patients did not meet the standard listing criteria and were circulated and approved by the Pancreas Advisory Group Exemptions Panel.
 - Two SPK patients were not receiving dialysis and had an estimated GFR at time of registration of over 20
 - One SPK with type two diabetes and a BMI greater than 30

ACTIONS

- 4 Centres are asked to return the supplementary form as soon as a patient is registered on the transplant list. Any supplementary registration forms that are missing are chased on a monthly basis and centres are asked to return any that are identified as outstanding.
- 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 transplant list in order to preserve the patient's accrued waiting time.

Joseph Parsons
Statistics and Clinical Studies

February 2020

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INTRODUCTION

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 January - 31 December 2019 and patient listings between 1 June 2019 - 31 January 2020 that do not meet the agreed criteria.

FORM RETURN RATES

- 7 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 January 31 December 2019. **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 71% for whole pancreas registrations and 92% for islet registrations.
- 8 Of the whole pancreas centres, half have a 100% return rate and three more centres have a rate over 70% but Manchester has a return rate of 9%. Consequently, at this centre 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.

	Centre specific return rates for the standard listing criteria form, January - 31 December 2019								
Centre	Number of new	Forms re	turned	No. within criteria/ approved					
	registrations	N	%	N	%				
Vascularised									
pancreas									
Cambridge	16	16	100	15	94				
Cardiff	11	11	100	11	100				
Edinburgh	24	23	96	23	100				
Guy's	29	29	100	29	100				
Manchester	58	5	9	5	100				
Newcastle	4	4	100	4	100				
Oxford	81	71	88	69	97				
WLRTC	11	8	73	8	100				
Total	234	167	71	164	98				
Pancreatic islet									
Edinburgh	11	11	100	10	91				
King's College	1	1	100	1	100				
Manchester	17	14	82	14	100				
Newcastle	4	4	100	4	100				
Oxford	3	3	100	3	100				
Total	36	33	92	32	97				

STANDARD LISTING CRITERIA

- **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 June 2019 31 January 2020 and who met the standard listing criteria.
- Of the 123 new supplementary forms received, 3 (2%) did not meet the standard listing criteria. All three registrations were deemed clinical exemptions and approved by the appeals panel. The standard listing criteria are shown in **Appendix 1**.

Registration type	Number of new forms received	Ou	tside criteria	App	roved appeals	Outside criteria and not approved		
		N	(% of forms received)	N	(% of forms received)	N	(% of forms received)	
IAPK	2	0	(0%)	0	-	0	-	
SIK	10	0	(0%)	0	-	0	-	
SPK	88	3	(3%)	3	(100%)	0	(0%)	
PTA	4	0	(0%)	0	-	0	-	
PAK	2	0	(0%)	0	-	0	-	
ITA	10	0	(0%)	0	-	0	-	
Priority islet	7	0	(0%)	0	-	0	-	
Total	123	3	(2%)	3	(100%)	0	(0%)	

ACTION

- 12 Centres are asked to return the supplementary form as soon as a patient is registered on the transplant list. Any supplementary registration forms that are missing are chased on a monthly basis and centres are asked to return any that are identified as outstanding.
- 13 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 transplant list in order to preserve the patient's accrued waiting time.

Joseph Parsons Statistics and Clinical Studies

February 2020

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 <=30kg/m²
- 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 <=30kg/m²
- 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 <=30kg/m²

Islet transplant alone (ITA)

- a. All patients listed should have insulin treated diabetes
- Patients should have type 1 diabetes or diabetes secondary to pancreatectomy / pancreatitis. All should have confirmed C-peptide negativity in presence of glucose >10 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 >10 mmol/l
- 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.

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Appendix2: Registrations that did not meet standard listing criteria by registration type

(information highlighted indicates the information that does not meet the criteria)

Simultaneous kidney/ pancreas (SPK)
Simultaneous kidney/ islet (SIK)
Pancreas transplant alone (PTA)
Pancreas after kidney (PAK)
Islet transplant alone (ITA)
Islet after kidney (IAK)
Priority islet transplant (since 3 September 2014)

· ·	Patient	Transplant type	Registration date	Centre	Is the recipient insulin treated	Cause of diabetes	ВМІ	recipient receiving	more than	of	Hypoglycaemic episodes in last 24 months	Diabetologist Assessment Y/N	IFCC-HbA1c	Approved Y/N
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