

NHS BLOOD AND TRANSPLANT

KIDNEY ADVISORY GROUP

ACCESS TO TRANSPLANT FOR LIVER AND KIDNEY PATIENTS – REVIEW OF REVISED ODT HUB OPERATIONS PROCESS

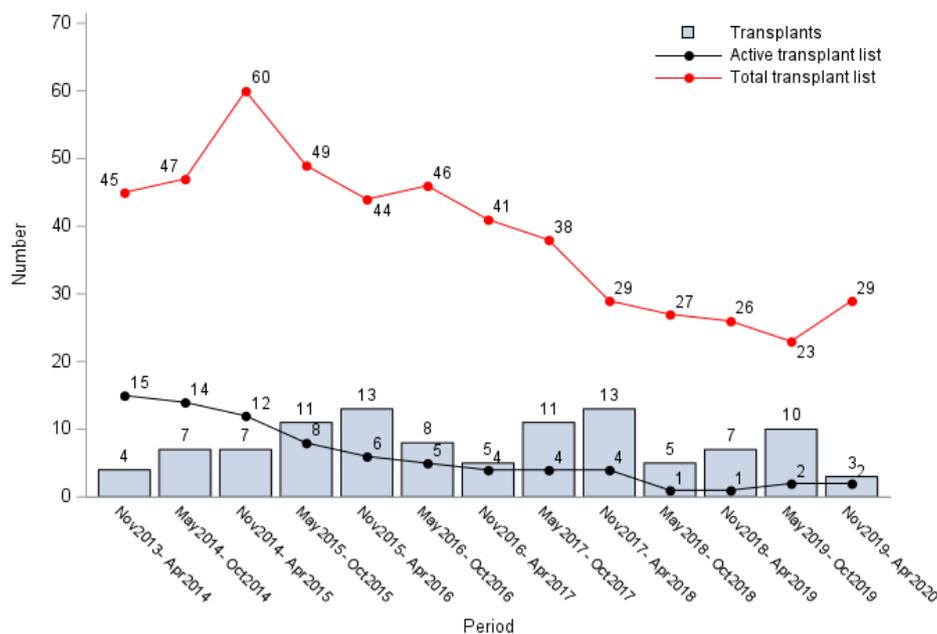
INTRODUCTION

- 1 Following concerns raised about potential disadvantage for patients needing a combined liver/kidney transplant, the Liver Advisory Group (LAG) and Kidney Advisory Group (KAG) agreed a slight change in the ODT Hub Operations processes to more readily facilitate combined liver/kidney transplant. At February 2015, 52 patients were awaiting such a transplant with 10 (19%) having waited more than two years.
- 2 On 5 May 2015, a new process was implemented on a trial basis. This was that the ODT Hub Operations would delay offering one kidney from a donor after brain death (DBD) for up to 60 minutes during which time the liver zonal centre could declare whether they wished to accept a kidney to accompany the liver. This has allowed liver zonal centres to consider their liver and kidney patients with the knowledge that a kidney will be available to them if needed (rather than already be committed to a kidney patient).
- 3 On 20 March 2018, the National Liver Offering Scheme was introduced which has changed how kidneys are offered with the liver. For adult DBD donors, one kidney is reserved for liver patients only if one of the top three ranking recipients on the elective list require a kidney. The kidney will become available for kidney patients after 60 minutes, or once it has been declined for the liver/kidney patient. The offer is provisional and subject to there not being high priority patients on the National Kidney Waiting List (Tiers A-C under previous scheme and Tier A in the new offering scheme).
- 4 This report gives an overview of waiting list and transplant activity for liver and kidney patients, from 1 November 2013 to 30 April 2020. The impact on kidney patients is also examined for potential disadvantage.

LIVER/KIDNEY ACTIVITY

- 5 **Figure 1** shows the number of liver and kidney transplants in the period since November 2013 along with waiting list activity. The number of transplants increased from November 2013 to April 2018 with a fall between May 2016 and April 2017. The number of transplants subsequently decreased before increasing between November 2018 and October 2019. In the most recent period (November 2019 – April 2020), there were 3 transplants performed. The number of patients actively awaiting a liver and kidney had fallen between April 2014 and April 2019. The number of patients actively waiting increased slightly with two patients waiting at the end of April 2020. Centre practice with regard to kidney listing status is not clear, with most patients transplanted since 1 May 2015 having a suspended kidney status at the time of transplant. Thus the total transplant list numbers are likely to be more indicative of the real need for liver/kidney transplantation.

Figure 1 Liver and kidney patient activity in the UK, 1 November 2013 – 30 April 2020
Number of transplants and patients on the transplant list at 30 April and 31 October



IMPACT FOR KIDNEY PATIENTS

- 6 To assess the impact on kidney patients who may have missed out on a transplant as a result of a kidney being used for a liver/kidney patient, the kidney matching runs for the 13 liver/kidney transplants since 1 May 2019 were examined. Under the previous kidney offering scheme, there were two cases with one high priority patient on the kidney matching run and one case where there were three high priority patients on the kidney matching run. Since the introduction of the new offering scheme, there have been 2 cases with 2 high priority patients and one case with 5 high priority patients on the kidney matching run.
- 7 Eleven of the high priority patients were ranked first or second on the matching run and did receive an offer of a kidney. Two of these patients were transplanted. Three patients did not receive an offer. Of these, two had already accepted offers from other donors. The other patient was ranked 3rd and was potentially disadvantaged. This occurred under the previous offering scheme.
- 8 In summary, the impact for kidney patients overall has been small. However, there was one case identified where the patient was disadvantaged. Under the new offering scheme there is a note as part of the offering process that should ensure that this is less likely to happen.

RECOMMENDATION

- 9 Since the introduction of the new liver offering scheme in March 2018, offers to centres have ceased. It is recommended that the 60 minute delay of one kidney should continue and be reviewed as part of the monitoring process of the new liver offering scheme.

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