

COVID - 19 Bulletin Number 22

Organ and Tissue Donation and Transplantation Directorate

24th September 2020

SARS-COV2 UPDATE:

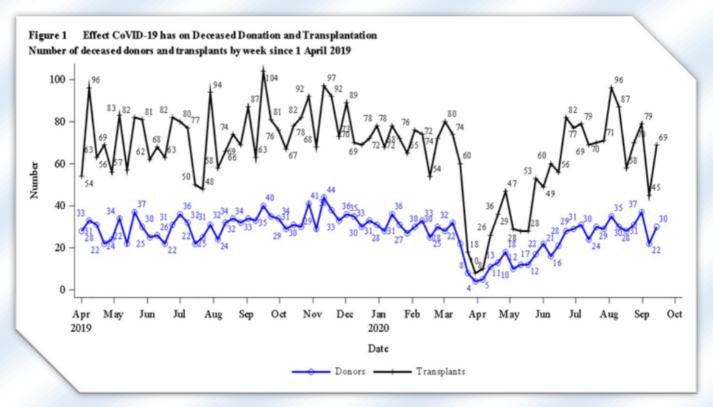
Updates on the resurgence of SARS-COV2 fill every news bulletin. We have multiple sources to monitor the second surge and thought that it would be useful for you to see examples of this information in the context of Donation and Transplantation (please note any examples are date stamped as the situation changes rapidly) and we also provide links for you to gain up to date information rapidly.

Thanks to Lisa Mumford, Ines Ushiro-Lumb, John Asher and Dale Gardiner for what you see below.

Lisa Burnapp also gives important direction on Living Donor Programmes.

First, an update on donor and transplant numbers since April 2019 including, of course, the downturn associated with the pandemic in March/April 2020 but demonstrating the recovery up until earlier this week.

Please continue to report transplants in a timely fashion to keep the monitoring as accurate as possible.



LIVING DONOR KIDNEY TRANSPLANTATION

We know that there are contingency plans in place to protect living donation activity during a second COVID wave. Together with the revised Royal College of Surgeons guidance, which now includes transplantation, we hope that these will support discussions within individual Trusts to maintain both living and deceased donation activity and avoid programme closures. We recognise that local limitations may still impact on activity during this period and would be grateful if individual centres could keep us informed if they are experiencing difficulties.

The October UK Living Kidney Sharing Scheme matching run is still scheduled to proceed. Given the current climate, please consider the clinical complexity of donors and recipients included in this matching run so that, should patients need to wait or move elsewhere for surgery, this is easier to accommodate.

If we can support you in any way, please do not hesitate to contact Lisa Burnapp at lisa.burnapp@nhsbt.nhs.uk or Rommel Ravanan at rommel.ravanan@nbt.nhs.uk

We have been monitoring SARS-Cov2 activity indicators and as the cases of SARS-CoV-2 continue to increase in the UK, we wanted to provide a brief summary and remind you of where these data can be readily found.

SAGE have recently shared with us their three planning scenarios showing a potential increase in new infections, patients in hospital and deaths staring in November 2020 and reaching a peak in March 2021. It is important to understand that these are scenarios, <u>not</u> forecasts or projections, and so there is no estimate of probability/likelihood associated with them.

We also are regularly monitoring the available data provided by the government, which should be checked via this link for the most up to date information https://www.gov.uk/guidance/coronavirus-covid-19-statistics-and-analysis

The latest R number is estimated to be above 1 (1.1 - 1.4) and varies by nation and region within England. The estimated growth rate ranges between +2% to +7% per day. These data, correct as of 18th September, are regularly updated and can be accessed here: https://www.gov.uk/guidance/the-r-number-in-the-uk

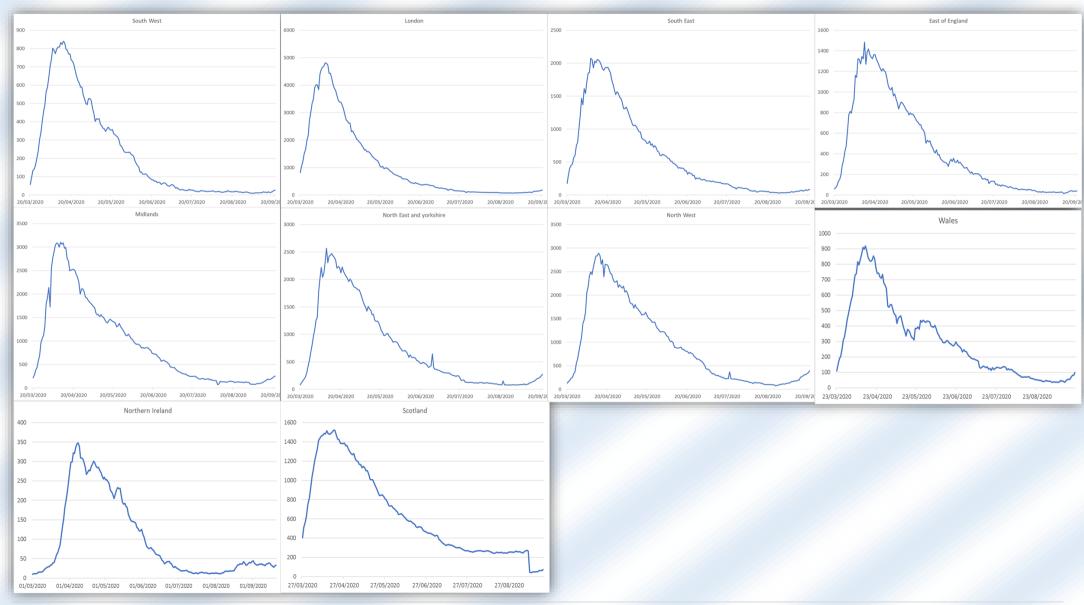
As an example, please see regional information at Appendix 1, you will be able to find your own region.

A summary of testing and positivity rate, hospital admissions, and deaths can be found here: https://coronavirus.data.gov.uk/. We are monitoring this information so that we are aware of any increases in specific nations or regions. Given the increased testing capacity and testing of non-hospitalised individuals, the positivity rate has increased across most age groups and is highest in the 20-29-year age bracket. In England, case rates are highest in the North West, North East and Midlands. Wales has also seen an increase in numbers of cases. Hospital admissions have also gone up, with a slight increase in ICU/HDU admissions in the 45-64-year-old group.

We are hopeful to have individual trust level data in England to monitor at a donor and transplant hospital level with access to ICU bed numbers and availability.

For Scotland, we are grateful to John Asher for comprehensive data monitoring covering a number of aspects of health care delivery. A date stamped example is shown at appendix 2 and any more information is available from John via email: <u>i.asher@nhs.net</u>

APPENDIX 1



APPENDIX 2

