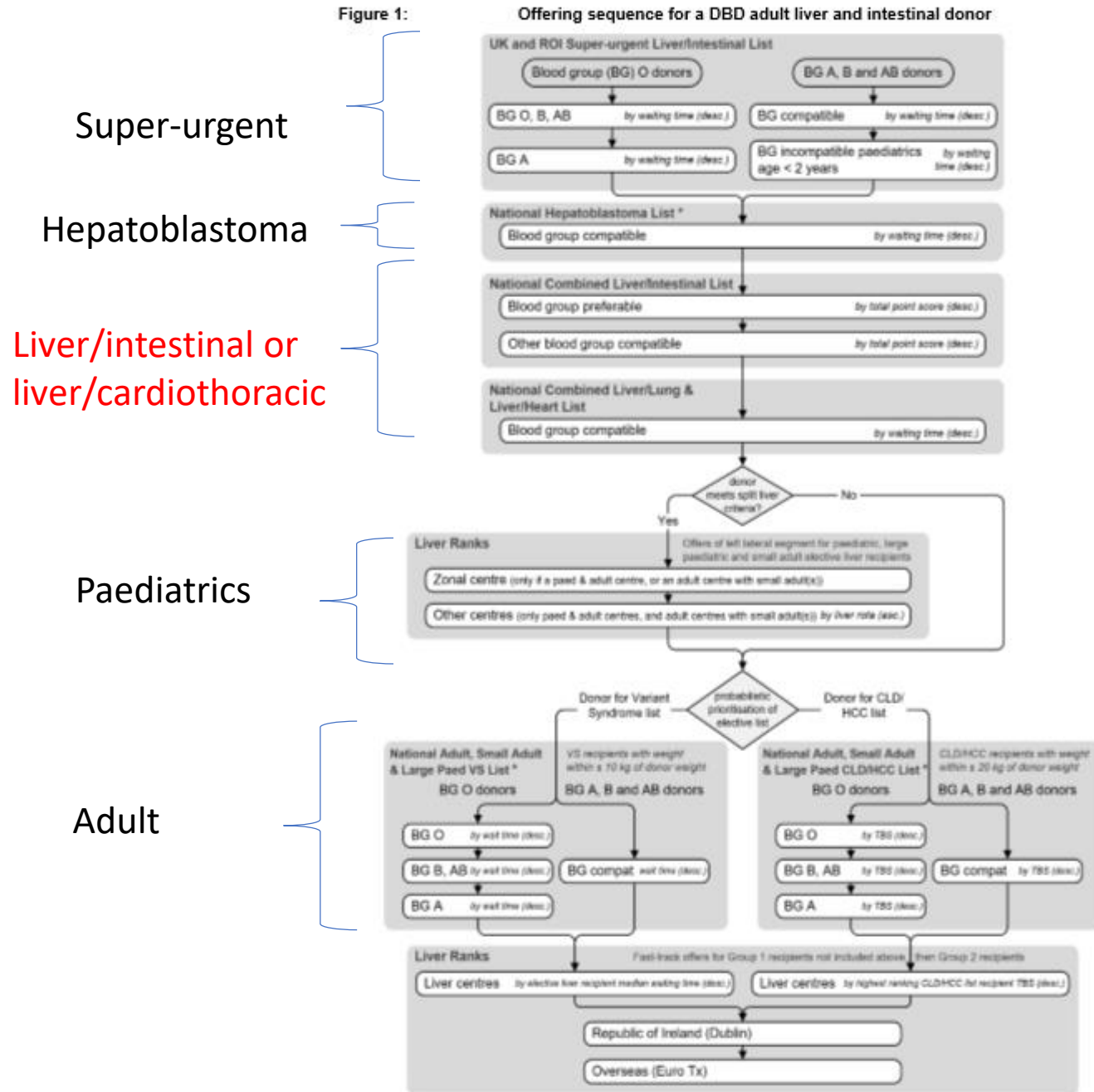




Further refinements to the National Liver Offering Scheme – Offering to multi-organ patients

Rhiannon Taylor

Current liver offering scheme – DBD adult liver and intestinal donor



Liver and cardiothoracic patients

- Number of patients requiring combined liver and cardiothoracic transplants increased over time
 - Currently two urgent heart/ elective liver patients and one elective liver/lung patient
- Patients will appear as named patients on blood group compatible liver matching runs in liver/cardiothoracic tier
- Patients will appear as named patients on cardiothoracic matching runs **only** if urgently registered and within size criteria
- Following feedback from transplant centres, ODT Hub Operations only offer to liver/cardiothoracic patients if they appear as named patients on **both** matching runs

Liver and cardiothoracic patients

- Incident raised in August 2020 regarding offering to an elective liver and lung patient
 - Patient appeared as a named patient on compatible liver matching runs
 - Did not appear on lung matching run
 - Lungs offered to transplant centres for all elective cardiothoracic patients not named individual patients
- Offering data reviewed by Clinical Governance
 - Patient did not appear to be disadvantaged
 - Centres were also contacted to determine whether they consider the patient for a group or fast-track offer
- Raised with Chairs of CTAG and LAG
 - Agreed named patients would be offered after cardiothoracic organs offered to super-urgent patients but prior to elective offering
- New liver/cardiothoracic tier on cardiothoracic matching runs agreed at CTAG
 - IT change required
 - Implemented manually ahead of IT change

Liver and intestinal patients

- Change in intestinal donation criteria agreed at the last MCTAG
- The current bowel weight and age donation criteria are
 - Donor after brain-stem death (DBD),
 - Donor age less than, or equal to, 55 years
 - Donor weight less than 80 kg.
- MCTAG has proposed to increase the bowel donor criteria to;
 - Donor after brain-stem death (DBD),
 - Donor age less than, or equal to, 59 years
 - Donor weight less than 90 kg.
- Potentially an additional 4.5 intestinal transplants per year
- **Members are asked to endorse this change in bowel donor criteria.**

Liver and intestinal patients

- Discussion recently held regarding a hepatoblastoma patient who required liver and intestinal organs
 - Hepatoblastoma is not an agreed indication for liver and intestinal patients
 - Will need to contact the Chair of the Intestinal National Appeals Panel
 - Hepatoblastoma tier on liver and intestinal matching runs only includes liver only patients
- MCTAG agreed that hepatoblastoma patients should be prioritised in the liver/intestinal tier above all other intestinal patients
 - Will be offered after the hepatoblastoma liver tier
- Intestinal transplant centres may wish for the patient to be included in the hepatoblastoma tier
 - Centre would need to contact Chairs of MCTAG and LAG as well as all liver and intestinal transplant centres after the National Appeals panel has approved in order to agree

Liver and intestinal patients

- Discussion recently held regarding a liver and intestinal patient where the transplant centre wished to also receive liver only offers
 - Patients can not be registered on both liver only and liver/intestinal lists
- Patient discussed with all liver and intestinal transplant centres
 - Agreed that patient should be removed from the intestinal list and registered on the liver only list
 - Future cases: centre would need to contact Chars of MCTAG and LAG as well as all liver and intestinal transplant centres in order to agree offering sequence

Liver/ cardiothoracic patients

- Patients electively registered on both liver and cardiothoracic transplant lists
 - Centres can contact the Cardiothoracic National Adjudication panel for urgent listing
 - Patients will be offered after super-urgent and urgent cardiothoracic tiers but before elective offering

Liver/ intestinal patients

- Changes in Bowel Donation criteria to be agreed
- Hepatoblastoma liver/intestinal patients offered through liver/intestinal tier
 - Prioritised above other liver/intestinal patients
- Offering pathway for liver/intestinal patients who would also like liver only offers to be determined on a case by case basis