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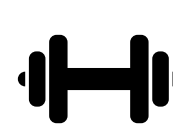
Transplant Assessment

Laura Stamp

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Holistic preparation





NHS

Transplant



Meeting listing criteria

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Indications for Heart Transplantation

- Advanced heart failure usually secondary to ischaemic heart disease or idiopathic dilated cardiomyopathy with severe systolic ventricular dysfunction
- Severe ventricular dysfunction secondary to valve disease
- Diastolic dysfunction usually secondary to idiopathic restrictive or hypertrophic cardiomyopathy

Heart failure secondary to congenital heart disease

Indications for Lung Transplantation

- Diffuse Parenchymal Lung Disease
- Obstructive lung disease
- Pulmonary vascular
- Suppurative lung disease
- Children's Interstitial Lung Disease
- Obliterative Bronchiolitis (Paediatric only)

Indications for Liver Transplantation

- Acute liver failure
- Chronic liver disease (Cirrhosis)
- Specific liver tumours
- Variant syndromes
- Congenital liver vascular malformations (paediatrics)
- Metabolic liver disease with life-threatening extra-hepatic complications (paediatrics)

Indications for Kidney Transplantation

- All patients with end-stage renal failure, who might benefit from transplantation, should be assessed for transplantation

Indications for Pancreas / Islet Transplantation

Pancreas transplant alone / islet transplant alone	Patients with severe hypoglycaemic unawareness and insulin treated diabetes, but normal or near-normal renal function
Simultaneous pancreas and kidney transplant / Simultaneous islet and kidney transplant	Patients with renal failure and insulin treated diabetes
Pancreas after kidney transplant / islet after kidney transplant	Patients with functioning kidney transplants and insulin treated diabetes

Contraindications to transplantation

Absolute Contraindications

- Uncontrolled cancer
- Active systemic infections
- Any condition with a life expectancy <2 years

Relative Contraindications

- Age related comorbidity
- Predicted patient survival of <5 years
- Predicted risk of graft loss greater than 50% at 1 year
- Patients unable or unlikely to adhere with immunosuppressant therapy
- Immunosuppression predicted to cause life-threatening complications



Tests and Consultations

Blood work, Virology, ABO type

ECG, Echo, Right Heart Catheter, CPEX

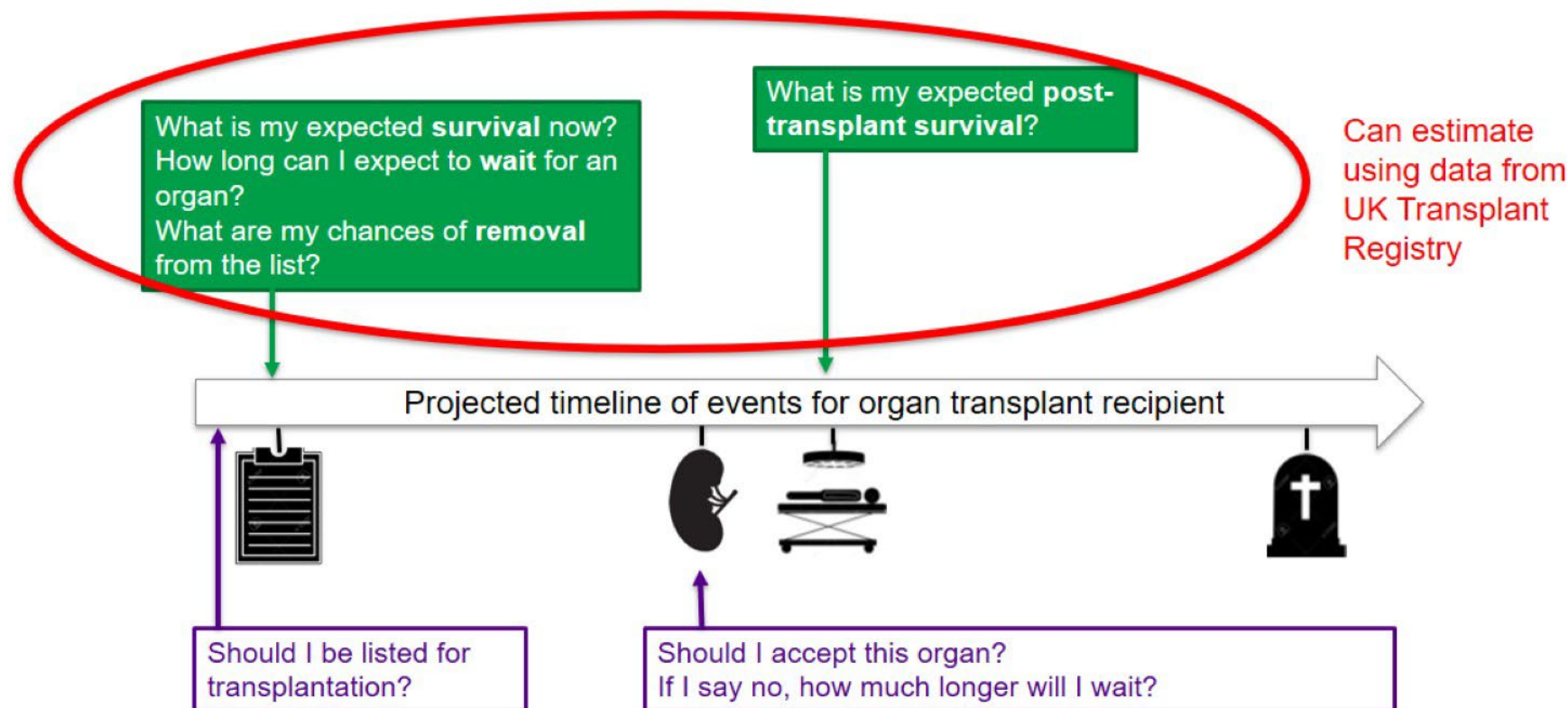
CXR, Chest CT, MRI, Lung function

Physicians, Surgeons, Anaesthetists, Transplant Coordinator, Social Worker, Psychologist/Psychiatrist, Dietician

Transplant Risk Communication (TRAC) tools

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What might patients want to know?



Tools, policies and guidance

Find and download further resources specific to transplantation

Calculators

Access calculators specific to organ transplantation

» Access the tools

Risk communication tools

These tools are to help decision-making when considering a transplant.

» Access the tools

Policies and guidance

Policies and guidance relating to organ transplantation

» Download now

SaBTO Aide Memoire

To aid decision making around donors with potentially transmissible diseases

» Access the guide

SaBTO

Further information about guidance from SaBTO

» Find out more

Allocation zones

Information about current zonal organ allocation systems

» Find out more

Multidisciplinary Team Meeting Outcomes

Too Early

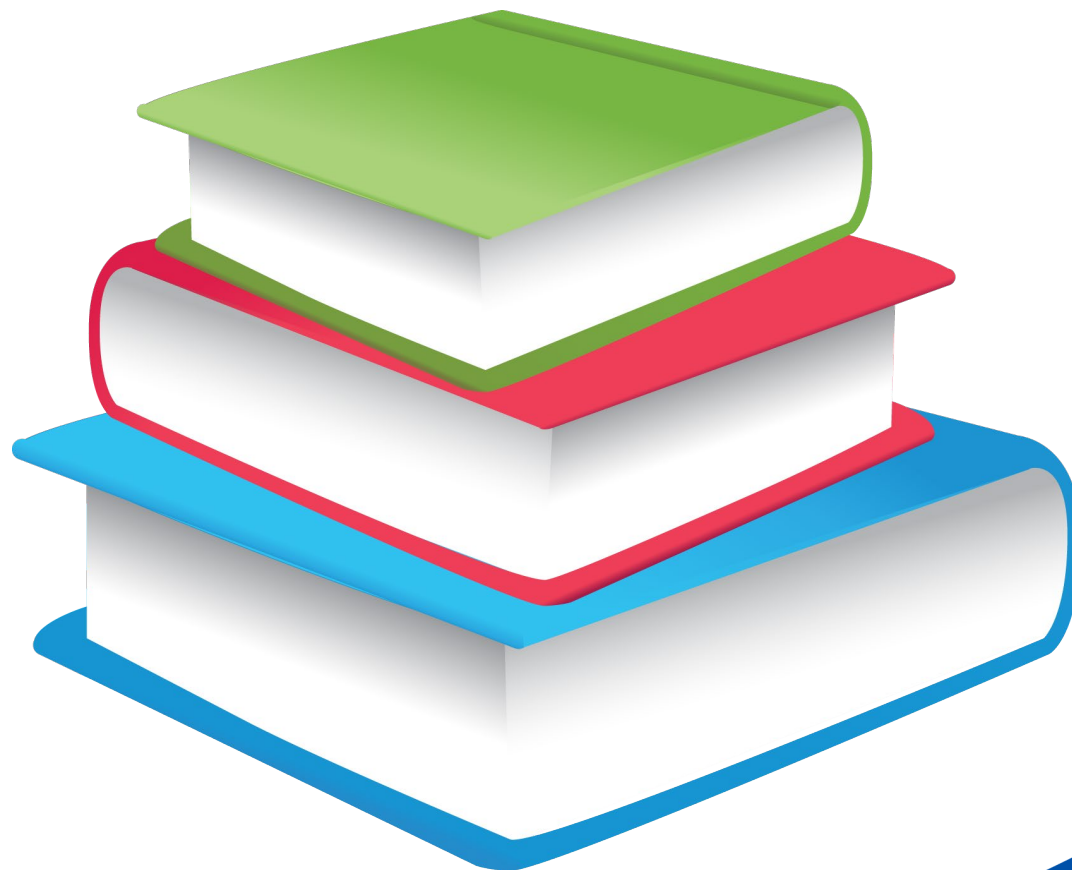
Needs further investigations
/ review / assessment

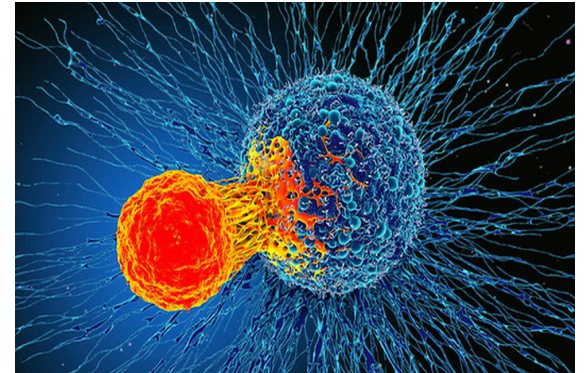
Decline on contraindications
or risk/benefit profile (offer a
second opinion)

List for transplant



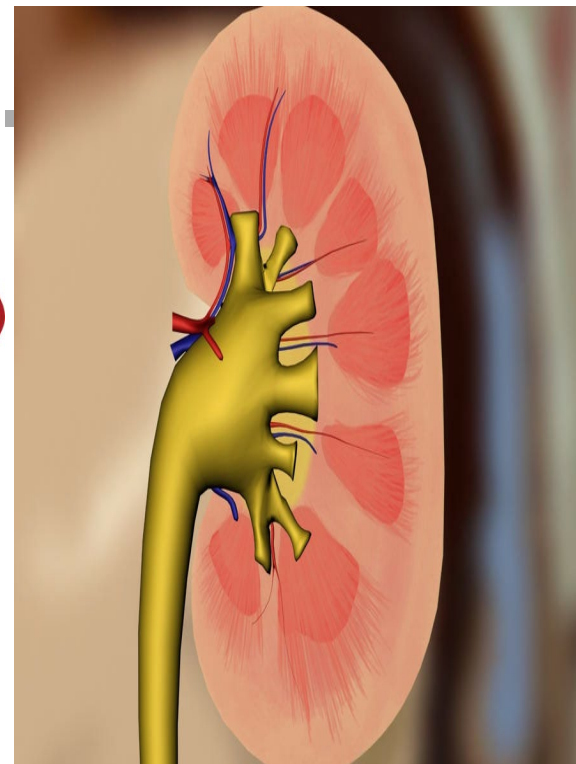
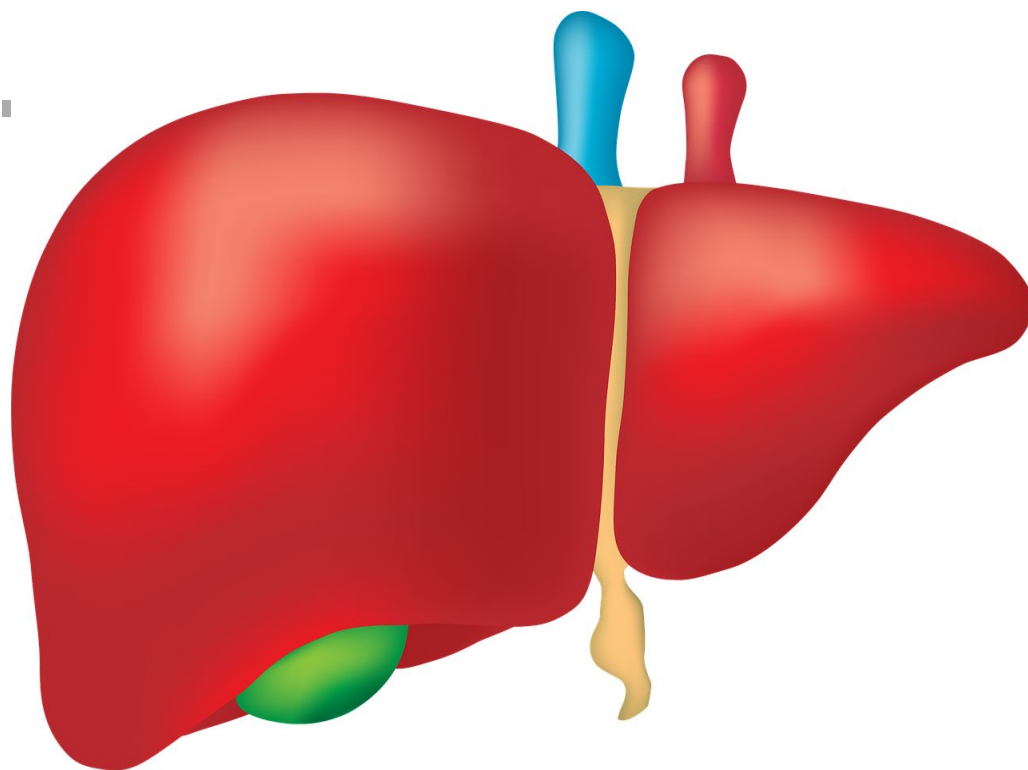
**Early
education /
information**





Donor choices

Live donor option?





Guiding Principles

- Transplantation is not contraindicated
- Suitably matched organ and need for organ
- Good chance of surviving the transplant operation
- Adequate blood supply and 'space' for new organ
- The patient will be able to look after their new organ(s)

Questions?

