

**Retrieval Advisory Group,
28th September 2021**

Increasing the Number of Organs Available for Research (INOAR)

1. Status – Public

2. Executive Summary

2.1 On the 13th January, 2021 the INOAR project ‘went live’. SNODs in QUOD-licensed hospitals in England, Northern Ireland and Wales and all hospitals in Scotland now discuss the opportunity with donor families to consent or provide authorisation to the removal and storage of the Heart, Lungs and Diabetic Pancreas for research.

2.2 Data from the INOAR project had been collected and analysed from 1st February, 2021 – 31st July, 2021. A total of 40 organs (Hearts, Lungs and Diabetic Pancreas) have been removed for research.

3. Action Requested

3.1 Note the data pertaining to INOAR organs offered, accepted and removed to date.

3.2 Note the recommendations made to RINTAG, actions completed and progress to date.

4. Background

4.1 Utilising the Liverpool Research HTA Licence to remove organs for research has increased the number of organs available for research.

4.2 In addition, the following benefits are achieved:

- Reduction in the complexities of the consent process for families
- Reduction in the complexities of the consent process for SNODS
- A more consistent and transparent research allocation system
- Reduction in the complexities for researchers by reducing the requirement for specific HTA licences

5. Update

5.1 A report was provided to RINTAG 25th May, 2021 and included 2 recommendations:

- Scope the feasibility of including blood samples for INOAR organs to mirror those that are currently sent with transplantable organs which are subsequently declined and used for research.

- Open dialogue between Researchers and NORS leads to assess how to improve acceptance of hearts when being retrieved by abdominal NORS teams, while ensuring the NORS teams were not asked to work outside of their scope of practice and with no additional clinical risk to abdominal organs.

5.2 Further discussions with relevant researcher's post RINTAG have ascertained the requirement for blood samples to accompany INOAR organs to be negligible and therefore no further action taken.

5.3 Heart acceptance has improved since May following the launch of INOAR. Some researchers are now able to accept hearts packaged in saline, retrieved by the abdominal NORS teams. The opportunity to increase a 2nd offering point for INOAR hearts is being explored when hearts accepted for transplant, unsuitable for valves are declined for transplant in the donor theatre on investigation/ inspection.

5.4 INOAR organs offered, accepted and removed 1st February – 31st July 2021. QUOD Hospitals (England, Wales, Northern Ireland) and Scotland. Please see Appendix 1. for breakdown by organ type

<i>INOAR Organs</i>	Offered	Accepted	Accepted/ Removed	Accepted/ Not Removed
February	14	6	4	2
March	25	9	2	7
April	24	10	7	3
May	28	15	9	6
June	33	16	11	5
July	14	10	7	3
Total	138	66	40	26

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Appendix 1.

INOAR organs by organ type offered, accepted and removed 1st February – 31st July 2021.

QUOD Hospitals (England, Wales, Northern Ireland) and Scotland.

<i>INOAR Hearts</i>	Offered	Accepted	Accepted/ Removed	Accepted/ Not Removed
February	8	1	0	1
March	13	1	0	1
April	14	2	0	2
May	16	6	5	1
June	18	7	5	2
July	6	3	2	1
Total	76	20	12	8

<i>INOAR Lungs</i>	Offered	Accepted	Accepted/ Removed	Accepted/ Not Removed
February	6	5	4	1
March	11	7	1	6
April	7	5	4	1
May	8	6	3	3
June	7	5	3	2
July	4	4	2	2
Total	43	32	17	15

<i>INOAR Diabetic Pancreas</i>	Offered	Accepted	Accepted/ Removed	Accepted/ Not Removed
February	0	0	0	0
March	1	1	1	0
April	3	3	3	0
May	4	3	1	2
June	8	4	3	1
July	4	3	3	0
Total	20	14	11	3