

Retrieval Advisory Group, 11th October 2022

Increasing the Number of Organs Available for Research (INOAR)

1. Status – Public

2. Executive Summary

January, 2021 the INOAR project 'went live'.

SNODs in QUOD-licensed hospitals in England, Northern Ireland and Wales and all hospitals in Scotland 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.

Data with regards to the number of organs offered, accepted and removed for research through the INOAR initiative has been collected and analysed from 1st January, 2022 – 31st August 2022.

A total of 47 organs (Hearts, Lungs and Diabetic Pancreas) have been removed for research.

3. Action Requested

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

Note the action in progress to increase the acceptance and removal of INOAR hearts for research studies.

4. Background

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

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

Lungs

The INOAR initiative has increased the number of lungs available for research. 91% of lungs available for research are via the INOAR initiative. There are currently 3 lung studies active on the ODT research registry.

Fig 1.







Diabetic pancreas

The INOAR initiative has enabled diabetic pancreas to be available for research. There are currently 2 diabetic studies active on the ODT research registry. 71% of diabetic pancreas offered for research via the INOAR initiative have been accepted and removed for research.

Fig 3.



Hearts

The INOAR initiative has increased the number of hearts available for research. 96% of hearts available for research are via the INOAR initiative. There are currently 3 heart studies active on the ODT research registry.





Heart acceptance and removal remains a concern since the launch of INOAR.

Some researchers report that hearts retrieved by abdominal NORS teams (un perfused) are not suitable for their research studies.

Researchers report that their preference is for perfused hearts retrieved by the cardiothoracic NORS team (same standard as hearts removed for the purposes of transplantation).



Options have been considered to increase the number suitably perfused hearts removed for research via INOAR. It has been agreed that 2 Abdominal NORs teams (Addenbrookes and Edinburgh) will be trained to perfuse and hearts for research studies in the absence of a CT NORS team.

This pilot will enable 10 hearts to be perfused for research studies in the absence of a CT NORS team.

The suitability of these hearts will be ascertained in conjunction with the heart researchers.

Addenbrookes and Edinburgh will be reimbursed for additional perfusion fluid required for the perfusion of INOAR hearts by NHSBT (OTDT Medical Director).

Should the pilot be successful and RAG approves the continuation of this initiative, consideration will need to be given ongoing costs and SMT approval.

Author

Liz Armstrong, Head of Transplant Development