

NHS BLOOD AND TRANSPLANT**PANCREAS ADVISORY GROUP****AUDIT OF STANDARD CRITERIA FOR LISTING****SUMMARY****INTRODUCTION**

- 1 Selection criteria for patients onto the national pancreas transplant list were agreed to accompany the pancreas allocation scheme and ensure equitable access to pancreas transplantation in the UK. Adherence to the criteria has been audited via the Supplementary Pancreas/Islet Registration form since 1 May 2012. This paper reports form return rates and any patient listings that do not meet the agreed criteria.

FORM RETURN RATES

- 2 There were 282 registrations between 1 April 2021 - 31 March 2022, compared with 165 between 1 April 2020 – 31 March 2021. Nationally the return rates for the supplementary form have reached 91% for whole pancreas and 93% for islet registrations. This return rate ranged across centres from 51% to 100% for whole pancreas and 80% to 100% for islet registrations.

STANDARD LISTING CRITERIA

- 3 Of the 101 new supplementary forms received between 1 February 2022 - 31 July 2022, one (1%) patient did not meet the standard listing criteria. This patient was approved by the Pancreas Advisory Group Exemptions Panel.

ACTIONS

- 4 Members are asked to return the completed Supplementary Pancreas/ Islet Registration form as soon as a patient is listed.
- 5 Members are reminded that patients who no longer meet the requirement for a priority islet listing (e.g routine graft has failed or reactivation to priority list following period of suspension is more than 12 months after routine transplant) need to be removed from the priority transplant list and activated on the routine list. Centres must telephone ODT Information Services when doing this to have the patient's accrued waiting time, from priority registration date, transferred to the routine registration.
- 6 For any patient transfer, between centres or transplant lists, it is essential that ODT Information Services are contacted by telephone (0117 975 7523) to ensure accrued waiting time is transferred correctly to the new registration. Following the telephone notification, the centre must then confirm changes in writing by sending an email to ODTRegistrationTeamManagers@nhsbt.nhs.uk.

NHS BLOOD AND TRANSPLANT

PANCREAS ADVISORY GROUP

AUDIT OF STANDARD CRITERIA FOR LISTING

INTRODUCTION

- 7 Selection criteria for patients onto the national pancreas transplant list were agreed to accompany the pancreas allocation scheme and ensure equitable access to pancreas transplantation in the UK. An audit of new registrations was proposed to ensure these criteria are being met and data collection commenced 1 May 2012. This paper reports form return rates between 1 April 2021 - 31 March 2022 and patient listings between 1 February 2022 - 31 July 2022 that do not meet the agreed criteria.

FORM RETURN RATES

- 8 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 April 2021 - 31 March 2022. **Table 1** also shows the number of registrations that were within criteria or were approved by the Pancreas Advisory Group Exemptions Panel. Nationally, there were 255 new registrations for whole pancreas in the time period and the form return rate was 91% and ranged from 51% to 100% across the centres. For 27 new islet registrations in the time period the form return rate was 93% and ranged from 80% to 100% across centres.
- 9 Lists of registered patients with outstanding supplementary forms are sent out to centres each month.

Table 1 Centre specific return rates for the standard listing criteria form, 1 April 2021 - 31 March 2022

Vascularised pancreas	Number of new registrations	Forms returned		No. within criteria/ approved	
		N	%	N	%
Cambridge	24	24	100	24	100
Cardiff	11	11	100	11	100
Edinburgh	27	27	100	27	100
Guy's	35	18	51	18	100
Manchester	72	70	97	70	100
Newcastle	15	13	87	13	100
Oxford	61	59	97	59	100
WLRTC	10	9	90	9	100
Total	255	231	91	230	100
Pancreatic islet					
Bristol	0	-	-	-	-
Edinburgh	12	12	100	12	100
King's College	0	-	-	-	-
Manchester	8	7	88	7	100
Newcastle	2	2	100	2	100
Oxford	5	4	80	4	100
Royal Free	0	-	-	-	-
Total	27	25	93	25	100

STANDARD LISTING CRITERIA

- 10 **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 February 2022 - 31 July 2022 and who met the standard listing criteria.
- 11 Of the 101 new supplementary forms received, one (1%) patient did not meet the standard listing criteria. The one registration was deemed a clinical exception to the criteria and approved by members of the Pancreas Advisory Group appeals panel. The standard listing criteria are shown in **Appendix 1**.

Registration type	Number of new forms received	Outside criteria		Approved appeals		Outside criteria and not approved	
		N	(% of forms)	N	(% of forms)	N	(% of forms)
SIK	5	0	(0%)	0	-	0	-
SPK	85	1	(1%)	1	(1%)	1	(1%)
PTA	3	0	(0%)	0	-	0	-
PAK	2	0	(0%)	0	-	0	-
ITA	3	0	(0%)	0	-	0	-
IAK	1	0	(0%)	0	-	0	-
Priority islet	2	0	(0%)	0	-	0	-
Total	101	1	(1%)	1	(1%)	1	(1%)

ACTION

- 12 Members are asked to return the completed Supplementary Pancreas/ Islet Registration form as soon as a patient is listed.
- 13 Members are reminded that patients who no longer meet the requirement for a priority islet listing (e.g routine graft has failed or reactivation to priority list following period of suspension is more than 12 months after routine transplant) need to be removed from the priority transplant list and activated on the routine list. Centres must telephone ODT Information Services when removing the patient from the priority list and activating them on the routine transplant list to have the patient's accrued waiting time, from priority registration date, transferred to the routine registration.
- 14 For any patient transfer between centres or transplant lists it is essential that ODT Information Services are contacted by telephone (0117 975 7523) to ensure accrued waiting time is transferred correctly to the new registration. Following the telephone notification, the centre must then confirm changes in writing by sending an email to ODTRegistrationTeamManagers@nhsbt.nhs.uk.

Appendix 1: Standard listing criteria by registration type

The standard listing criteria are:

Simultaneous kidney/ pancreas (SPK) and simultaneous kidney/ islet (SIK)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30 \text{ kg/m}^2$
- c. Patients listed must be receiving dialysis or have a GFR of $\leq 20 \text{ ml/min}$

Pancreas transplant alone (PTA)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30 \text{ kg/m}^2$
- c. At least 2 severe hypoglycaemic episodes in the last 24 months and be assessed by a diabetologist to have disabling hypoglycaemia

Pancreas after kidney (PAK)

- a. All patients listed should have insulin treated diabetes
- b. Patients listed with type 2 diabetes must have a BMI of $\leq 30 \text{ kg/m}^2$

Islet transplant alone (ITA)

- a. All patients listed should have insulin treated diabetes
- b. Patients should have type 1 diabetes or diabetes secondary to pancreatectomy / pancreatitis. All should have confirmed C-peptide negativity in presence of glucose $> 10 \text{ mmol/l}$
- c. At least 2 severe hypoglycaemic episodes in the last 24 months and be assessed by a diabetologist to have disabling hypoglycaemia

Islet after kidney (IAK)

- a. All patients listed should have insulin treated diabetes
- b. Patients should have type 1 diabetes or diabetes secondary to pancreatectomy / pancreatitis. All should have confirmed C-peptide negativity in presence of glucose $> 10 \text{ mmol/l}$
- c. A history of severe hypoglycaemia within the last 24 months or $\text{HbA1c} \geq 53 \text{ mmol/mol}$

Priority islet transplant (since 3 September 2014)

- a. All patients should be listed within 12 months of routine graft
- b. All patients should have a functioning routine graft (C-peptide $\geq 50 \text{ pmol/L}$) at the time of priority listing.