NHS BLOOD AND TRANSPLANT

LIVER ADVISORY GROUP

SUMMARY FROM STATISTICS AND CLINICAL RESEARCH

INTRODUCTION

1. This paper provides an update from Statistics and Clinical Research and summarises recent presentations, publications, and current and future work in the area of liver transplantation.

UPDATE FROM STATISTICS AND CLINICAL RESEARCH

- 2. New and updated reports, all Advisory Group papers and conference presentations continue to be posted on the ODT Clinical Site <u>www.odt.nhs.uk</u>.
- 3. Risk communication tools for all organs introduced last year will shortly be updated and are accessible from https://www.odt.nhs.uk/transplantation/tools-policies-and-guidance/risk-communication-tools/. These tools are designed to support conversations between patients and clinicians at the time of listing with regards to the risks and benefits of transplantation.
- 4. A new NHS England funded clinical fellow, Rebeka Jenkins, started working with the team in January 2023 for 3 years. Rebeka's work will be focused on PREMS and will mostly be working with the BTRU. Her work will cover all organs and age groups, and will be done over 3 stages an initial literature review on what is currently available in PREMS, moving to then focus on kidney implementation (due to her renal background) whilst ensuring the work is transferable to other organs, and finally looking at dissemination to patients. She will be making contact with advisory groups in the coming future as her work progresses.
- 5. A new NHSBT funded clinical fellow has been appointed to examine inequalities in access to liver transplantation and will start in September 2023. The successful candidate will be based at Royal Free and will work collaboratively with NHSBT and UKHSA.
- 6. Please note our current arrangements for staff responsibilities in support of organs and tissues.

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RECENT AND FUTURE WORK

- SOP5907 on the ODT Clinical Website (<u>https://www.odt.nhs.uk/transplantation/tools-policies-and-guidance/policies-and-guidance/#liver</u>) has been updated to include details of the registration process for all indications requiring additional waiting time (e.g. new service evaluations, hepatopulmonary syndrome, genuine hepatoblastoma patients as well as formally prioritised paediatric patients).
- 8. Clarity has been added to the Liver Selection Policy regarding how patients who turn 17 years old while on the transplant list should be registered.
- 9. Monitoring of liver utilisation and transplantation is ongoing on a regular basis.
- 10. Statistics and Clinical Research continue to support the National Liver Offering Scheme monitoring committee, LAG Core Group, ODT Hub team and transplant centres to evaluate and implement any required changes arising from NLOS to make sure that no patients are disadvantaged.
- 11. On-going support and analyses have been provided to the LAG Core Group, the Clinical Leads for Utilisation (CLUs) and the established fixed term working units.
- 12. Analyses continue to be undertaken examining life expectancy post liver transplantation analysis for both adult and paediatric patients.
- 13. Manuscript being finalised detailing the development of the TBS and the impact of the first two years of the National Liver Offering Scheme.
- 14. A manuscript on the impact of transplant centre workload on post-transplant survival is currently being finalised.
- 15. The paediatric offering sequence is currently being examined and will be reviewed by the paediatric community.

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