

NHS BLOOD AND TRANSPLANT
PANCREAS ADVISORY GROUP
PANCREAS FAST TRACK SCHEME

BACKGROUND

1. The Pancreas Fast Track Offering Scheme (FTS) was first introduced on 1 December 2010 with the 2010 Pancreas Allocation Scheme and was initiated once the pancreas had been removed from the donor in order to place the donated organ as a matter of urgency. It was further agreed at the Advisory Group meeting in October 2015 that a revised fast track offering scheme would be introduced from 14 December 2015, which would be initiated either if the pancreas had been declined by 4 centres (3 centres for a donor after circulatory death) for donor or organ reasons or once the pancreas had been removed from the donor.
2. Following discussion of the large volume of fast track pancreas offers and low transplantation rate an in-depth analysis was presented at the Advisory Group meeting in November 2018. It was subsequently agreed not to fast track a pancreas if the cold ischaemic time (CIT) was greater than 8 hours at time of potential fast track. This rule took effect from 1 April 2019. No changes were made to the rules triggering fast track offers.
3. A further change was agreed at PAG in April 2020, to not fast track a pancreas to whole pancreas centres if the CIT was greater than 4 hours. This change was implemented on 1 October 2020.

INTRODUCTION

4. This paper audits activity in the 45 months between, the introduction of the 8 hour CIT cut off rule on, 1 April 2019 and 31 December 2022. Data were obtained from the UK Transplant Registry on both donors after brain death (DBD) and donors after circulatory death (DCD) pancreas donors aged less than 65 years. Data are presented for 2019/20, 2020/21, 2021/22 and 1 April – 31 December 2022. Between April and September 2020, there was a change to the offering process so that pancreases were fast tracked after offering to Tier A patients due to the COVID-19 pandemic. Between October 2020 and March 2021, there were fewer donors than normal due to the second wave of the pandemic.

RESULTS

5. Of the 1261 pancreas donors, 39% were offered through the scheme in the 45 month period, overall a reduction compared with 43% in 2018/19. **Table 1** shows the number of pancreas donors whose organs were offered through the fast track scheme by financial year.
6. The proportion of donors fast tracked in the latest 9-month period was 38% of DBD, a reduction from 44% in 2018/19, and 54% of DCD, an increase from 39% in 2018/19 and an increase from 38% in 2021/22.
7. Overall, of the 498 pancreas donors offered through the scheme, 187 (38%) were subsequently accepted for transplantation and 86 (17%) were transplanted. Of the 86 transplanted, 68 were transplanted as whole organs and 18 as islets.

8. **Table 2** shows, for the 45 month period April 2019 to December 2022, the trigger recorded by Hub Operations for fast tracking 498 donors. The main reason was “Declined after knife to skin (KTS)” in 177 (36%) cases. In 26 (5%) cases the reason was due to the COVID-19 pandemic offering process deviation. The main reasons for fast tracking were consistent across the different years.
9. **Table 3** shows reasons for fast tracking for the 86 pancreases which were eventually transplanted. Of these 86, 56 (65%) were DBD donations and 30 (35%) were DCD donations. Of the 56 DBD donations, 27 (48%) were fast tracked after being “Declined by 4 centres for organ or donor reasons”. Of the 30 DCD donations, 17 (57%) were fast tracked after being “Declined by 3 centres for organ or donor reasons”. Overall, the main reason for fast tracking a pancreas that was eventually transplanted was “Declined by 4 (DBD) /3 (DCD) centres for organ or donor reasons” in 44 (51%) cases.
10. Of the 68 pancreases fast tracked in the 45 month period and transplanted, follow-up was available for 59 and the one year Kaplan-Meier graft survival was 86% (95% confidence interval 72-93%). Of the 18 islet transplants, 12 were routine and six were priority top-up grafts. Of the 12 routine transplants, 10 have follow-up, five of these grafts have failed, four before one year and one at two years post-transplant.

ACTION

11. The most recent change has been in place for over two years. In 2021/22, the proportion of pancreas donors fast-tracked was lower than the previous two years, but in the latest nine months there has been an increase, mainly in the proportion of DCD donors fast tracked. The scheme will continue to be monitored.

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Table 1 Outcome of pancreases offered through the fast track scheme in the financial years 2019/20, 2020/21, 2021/22 and 1 April - 31 December 2022

Year	Donor type	Number of pancreas donors	Number offered through FTS (% of donors)	Number accepted for transplantation through FTS			Number transplanted through FTS		
				Whole	Islet	Total	Whole	Islet	Total (% of offered)
2019/20	DBD	332	120 (36%)	22	14	36	10	6	16 (13%)
	DCD	118	58 (49%)	16	2	18	8	1	9 (16%)
	Total	450	178 (40%)	38	16	54	18	7	25 (14%)
2020/21	DBD	159	58 (36%)	23	8	31	11	1	12 (21%)
	DCD	52	26 (50%)	13	1	14	8	0	8 (31%)
	Total	211	84 (40%)	36	9	45	19	1	20 (24%)
2021/22	DBD	241	85 (35%)	21	10	31	13	6	19 (22%)
	DCD	91	35 (38%)	14	1	15	5	1	6 (17%)
	Total	332	120 (36%)	35	11	46	18	7	25 (21%)
2022/23 Apr - Dec	DBD	183	70 (38%)	12	11	23	6	3	9 (13%)
	DCD	85	46 (54%)	18	1	19	7	0	7 (15%)
	Total	268	116 (43%)	30	12	42	13	3	16 (14%)

Table 2 **Reasons for fast tracking in the financial years 2019/20, 2020/21, 2021/22 and 1 April - 31 December 2022**

Reason	N	(%)
Declined after KTS/x-clamp/retrieval includes damaged/fatty	177	(36%)
Not accepted by KTS	98	(20%)
Declined by 4 (DBD) /3 (DCD) centres for organ or donor reasons	92	(18%)
Deemed unusable	53	(11%)
Declined post isolation	35	(7%)
Offering process deviation due to COVID-19	26	(5%)
RM authorisation/unstable donor	7	(1%)
No named recipients on matching run (BMI=>31 or low age, low BMI donor)	7	(1%)
Positive virology donor	3	(1%)
Total	498	

Table 3 Reasons for fast tracking organs that were transplanted in the financial years 2019/20, 2020/21, 2021/22 and 1 April - 31 December 2022				
Donor Type	Reason	N	(%)	(% of Type)
DBD	Declined by 4 (DBD) centres for organ or donor reasons	27	(31%)	(48%)
	Offering process deviation due to COVID-19	9	(10%)	(16%)
	Not accepted by KTS	9	(10%)	(16%)
	Declined post isolation	4	(5%)	(7%)
	Positive virology donor	3	(3%)	(5%)
	Declined after KTS/x-clamp/retrieval incs damaged/fatty	2	(2%)	(4%)
	RM authorisation/unstable donor	1	(1%)	(2%)
	No named recipients on matching run (BMI≥31 or low age, low BMI donor)	1	(1%)	(2%)
DCD	Declined by 3 (DCD) centres for organ or donor reasons	17	(20%)	(57%)
	Offering process deviation due to COVID-19	6	(7%)	(20%)
	Not accepted by KTS	4	(5%)	(13%)
	RM authorisation/unstable donor	2	(2%)	(7%)
	No named recipients on matching run (BMI≥31 or low age, low BMI donor)	1	(1%)	(3%)