

NHS BLOOD AND TRANSPLANT
PANCREAS ADVISORY GROUP AND ISLET STEERING 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 60 months between, the introduction of the 8 hour CIT cut off rule on, 1 April 2019 and 31 March 2024. Data were obtained from the UK Transplant Registry on both donors after brain death (DBD) and donors after circulatory death (DCD) pancreas donors aged 65 (DBD) or 55 (DCD) years or less prior to 1st October 2020, and 60 (DBD) or 55 (DCD) years or less otherwise. Data are presented for 2019/20, 2020/21, 2021/22, 2022/23 and 2023/24. 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 1,687 pancreas donors, 39% were offered through the scheme in the 60 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 financial year was 37% of DBD, a reduction from 44% in 2018/19, and 34% of DCD, a reduction from 39% in 2018/19.
7. Overall, of the 656 pancreas donors offered through the scheme, 249 (38%) were subsequently accepted for transplantation and 110 (17%) were transplanted. Of the 110 transplanted, 87 were transplanted as whole organs and 23 as islets.
8. **Table 2** shows, for the 60-month period April 2019 to March 2024, the trigger recorded by Hub Operations for fast tracking 656 donors. The main reason was “Declined after knife to

skin (KTS)” in 253 (39%) cases. In 26 (4%) 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 a breakdown of the reasons for decline for those organs that were fast tracked due to being declined by 4 (DBD) / 3 (DCD) centres for organ or donor reasons. The most common reasons for decline were donor past history (53%), size (12%), donor age (11%), and poor function (9%); these proportions were similar for DBD and DCD organs. The reasons for decline for offers from these donors was also similar in organs which were transplanted and organs which were not transplanted.
10. **Table 4** shows reasons for fast tracking for the 110 pancreases which were eventually transplanted. Of these 110, 76 (69%) were DBD donations and 34 (31%) were DCD donations. Of the 76 DBD donations, 37 (49%) were fast tracked after being “Declined by 4 centres for organ or donor reasons”. Of the 34 DCD donations, 20 (59%) 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 57 (52%) cases.
11. Of the 87 pancreases fast tracked in the 60 month period and transplanted, follow-up was available for 80 and the one year Kaplan-Meier graft survival was 88% (95% confidence interval 78-94%). Of the 23 islet transplants, 16 were routine and seven were priority top-up grafts. Of the 16 routine transplants, 14 have follow-up, seven of these grafts have failed, five before one year, one at one year post-transplant and one at two years post-transplant.

ACTION

12. The most recent change has been in place for over three years. In 2022/23, the proportion of pancreas donors fast-tracked was higher than the previous three years, but in the latest year there has been a decrease, mainly in the proportion of DCD donors fast tracked. The scheme will continue to be monitored.

Table 1 Outcome of pancreases offered through the fast track scheme in the financial years 2019/20, 2020/21, 2021/22, 2022/23 and 2023/24

| 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 | 115 | 56 (49%) | 16 | 2 | 18 | 8 | 1 | 9 (16%) |
| | Total | 447 | 176 (39%) | 38 | 16 | 54 | 18 | 7 | 25 (14%) |
| 2020/21 | DBD | 159 | 58 (36%) | 23 | 8 | 31 | 11 | 1 | 12 (21%) |
| | DCD | 51 | 26 (51%) | 13 | 1 | 14 | 8 | 0 | 8 (31%) |
| | Total | 210 | 84 (40%) | 36 | 9 | 45 | 19 | 1 | 20 (24%) |
| 2021/22 | DBD | 240 | 84 (35%) | 21 | 10 | 31 | 13 | 6 | 19 (23%) |
| | DCD | 91 | 36 (40%) | 14 | 1 | 15 | 5 | 1 | 6 (17%) |
| | Total | 331 | 120 (36%) | 35 | 11 | 46 | 18 | 7 | 25 (21%) |
| 2022/23 | DBD | 243 | 92 (38%) | 18 | 15 | 33 | 9 | 4 | 13 (14%) |
| | DCD | 110 | 60 (55%) | 24 | 1 | 25 | 8 | 0 | 8 (13%) |
| | Total | 353 | 152 (43%) | 42 | 16 | 58 | 17 | 4 | 21 (14%) |
| 2023/24 | DBD | 231 | 85 (37%) | 26 | 8 | 34 | 12 | 4 | 16 (19%) |
| | DCD | 115 | 39 (34%) | 12 | 0 | 12 | 3 | 0 | 3 (8%) |
| | Total | 346 | 124 (36%) | 38 | 8 | 46 | 15 | 4 | 19 (15%) |

Table 2 Reasons for fast tracking in the financial years 2019/20, 2020/21, 2021/22, 2022/23 and 2023/24

| Reason | N | (%) |
|---|------------|------------|
| Declined after KTS/x-clamp/retrieval includes damaged/fatty | 253 | (39%) |
| Declined by 4 (DBD) / 3 (DCD) centres for organ or donor reasons | 124 | (19%) |
| Not accepted by KTS | 117 | (18%) |
| Deemed unusable | 64 | (10%) |
| Declined post isolation | 48 | (7%) |
| Offering process deviation due to COVID-19 | 26 | (4%) |
| No named recipients on matching run (BMI=>31 or low age, low BMI donor) | 11 | (2%) |
| RM authorisation/unstable donor | 9 | (1%) |
| Positive virology donor | 4 | (1%) |
| Total | 656 | |

Table 3 Reasons for decline for organs fast tracked due to 4 (DBD) / 3 (DCD) centre declines for organ or donor reasons in the financial years 2019/20, 2020/21, 2021/22, 2022/23 and 2023/24

| Reason | DBD | (%) | DCD | (%) | Total | (%) |
|-----------------------------------|------------|--------------|------------|--------------|--------------|--------------|
| Donor | 176 | (63%) | 112 | (69%) | 288 | (65%) |
| Past history | 147 | (52%) | 82 | (51%) | 229 | (52%) |
| Age | 21 | (8%) | 28 | (17%) | 49 | (11%) |
| Cause of death | 3 | (1%) | 0 | (0%) | 5 | (1%) |
| Tumour | 3 | (1%) | 0 | (0%) | 3 | (1%) |
| Other | 2 | (1%) | 2 | (1%) | 2 | (1%) |
| Organ | 80 | (29%) | 38 | (23%) | 118 | (27%) |
| Size | 29 | (10%) | 21 | (13%) | 50 | (11%) |
| Poor function | 27 | (10%) | 12 | (7%) | 39 | (9%) |
| Damage | 5 | (2%) | 3 | (2%) | 8 | (2%) |
| Better match required | 6 | (2%) | 0 | (0%) | 6 | (1%) |
| Ischaemia time | 3 | (1%) | 0 | (0%) | 4 | (1%) |
| Other | 10 | (4%) | 2 | (1%) | 11 | (3%) |
| Other/Unknown/Not reported | 24 | (9%) | 12 | (7%) | 36 | (8%) |
| Total | 280 | | 162 | | 442 | |

PAG(24)XX

| Table 4 Reasons for fast tracking organs that were transplanted in the financial years 2019/20, 2020/21, 2021/22, 2022/23 and 2023/24 | | | | |
|--|---|----------|------------|--------------------|
| Donor Type | Reason | N | (%) | (% of Type) |
| DBD | Declined by 4 centres for organ or donor reasons | 37 | (34%) | (49%) |
| | Not accepted by KTS | 10 | (9%) | (13%) |
| | Offering process deviation due to COVID-19 | 9 | (8%) | (12%) |
| | Declined after KTS/x-clamp/retrieval includes damaged/fatty | 8 | (7%) | (11%) |
| | Declined post isolation | 4 | (4%) | (5%) |
| | Positive virology donor | 3 | (3%) | (4%) |
| | No named recipients on matching run (BMI=>31 or low age, low BMI donor) | 3 | (3%) | (4%) |
| | RM authorisation/unstable donor | 2 | (2%) | (3%) |
| DCD | Declined by 3 centres for organ or donor reasons | 20 | (18%) | (59%) |
| | Offering process deviation due to COVID-19 | 6 | (5%) | (18%) |
| | Not accepted by KTS | 4 | (4%) | (12%) |
| | RM authorisation/unstable donor | 2 | (2%) | (6%) |
| | Declined after KTS/x-clamp/retrieval includes damaged/fatty | 1 | (1%) | (3%) |
| | No named recipients on matching run (BMI=>31 or low age, low BMI donor) | 1 | (1%) | (3%) |