

NHS BLOOD AND TRANSPLANT
PANCREAS ADVISORY GROUP AND ISLET STEERING 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 227 registrations between 1 April 2023 - 31 March 2024. compared with 220 between 1 April 2022 - 31 March 2023. Nationally the return rates for the supplementary form have reached 99% for whole pancreas and 100% for islet registrations. This return rate for whole pancreas forms ranged across centres from 96% to 100%. All islet supplementary forms in this period were returned. The form return rate was significantly higher than in recent previous years.

STANDARD LISTING CRITERIA

- 3 Of the 198 new supplementary forms received between 1 January 2024 - 31 July 2024, two (1%) patients did not meet the standard listing criteria. These patients were 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.
- 7 If a patient has been listed outside the criteria in error, members are reminded that these patients should be removed, as opposed to suspended, from the waiting list immediately unless an appeal is approved. This is to prevent these patients accruing waiting time on the list while suspended since they should not have been listed initially.

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INTRODUCTION

- 8 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 2023 - 31 March 2024 and patient listings between 1 January 2024 – 31 July 2024 that do not meet the agreed criteria.

FORM RETURN RATES

- 9 **Table 1** shows the number of new registrations at each centre and the supplementary form return rates for the period 1 April 2023 - 31 March 2024. **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 227 new registrations for whole pancreas in the time period and the form return rate was 99% and ranged from 96% to 100% across the centres. For 35 new islet registrations in the time period the form return rate was 100% for all centres.
- 10 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 2023 - 31 March 2024

Vascularised pancreas	Number of new registrations	Forms returned		No. within criteria/ approved	
		N	%	N	%
Cambridge	30	30	100	30	100
Cardiff	16	16	100	16	100
Edinburgh	27	26	96	26	100
Guy's	35	34	97	34	100
Manchester	50	49	98	49	100
Newcastle	9	9	100	9	100
Oxford	51	51	100	51	100
WLRTC	9	9	100	9	100
Total	227	224	99	224	100
Pancreatic islet					
Edinburgh	14	14	100	14	100
Manchester	12	12	100	12	100
Newcastle	2	2	100	2	100
Oxford	7	7	100	7	100
Total	35	35	100	35	100

STANDARD LISTING CRITERIA

- 11 **Table 2** shows the number of patients, by registration type, for whom we have received a registration form between 1 January 2024 - 31 July 2024 and who met the standard listing criteria. There were twice as many forms received in this period compared to the same period in 2023 (98 registrations between 1 January 2023 – 31 July 2023).
- 12 Of the 198 new supplementary forms received, two (1%) patients did not meet the standard listing criteria. These registrations were deemed clinical exceptions 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	15	0	(0%)	0	-	0	-
SPK	162	1	(1%)	1	(100%)	0	(0%)
PTA	2	0	(0%)	0	-	0	-
PAK	4	0	(0%)	0	-	0	-
ITA	2	1*	(50%)	1*	(100%)	0	(0%)
IAK	2	0	(0%)	0	-	0	-
IAPK	3	0	(0%)	0	-	0	-
Priority islet	8	0	(0%)	0	-	0	-
Total	198	2	(1%)	2	(100%)	0	(0%)

ACTION

- 13 Members are asked to return the completed Supplementary Pancreas/ Islet Registration form as soon as a patient is listed.
- 14 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.
- 15 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.
- 16 If a patient has been listed outside the criteria in error, members are reminded that these patients should be removed, as opposed to suspended, from the waiting list immediately unless an appeal is approved. This is to prevent these patients accruing waiting time on the list while suspended since they should not have been listed initially.

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 $\leq 20 \text{ mls/min}$

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.