# NHS BLOOD AND TRANSPLANT

# PANCREAS ADVISORY GROUP ISLET STEERING GROUP

## AUDIT OF STANDARD CRITERIA FOR LISTING

### SUMMARY

#### INTRODUCTION

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 226 registrations between 1 January 2024 – 31 December 2024 compared with 254 between 1 January 2023 – 31 December 2023. Nationally the return rates for the supplementary form have reached 96% for whole pancreas and 86% for islet registrations. This return rate ranged across centres from 88% to 100% for whole pancreas forms and from 86% to 100% for islet forms. The form return rate was higher than in recent previous years.

### STANDARD LISTING CRITERIA

3 Of the 89 new supplementary forms received between 1 August 2024 - 31 January 2025, all patients met the standard listing criteria.

### 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 <u>ODTRegistrationTeamManagers@nhsbt.nhs.uk</u>.
- 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.

#### Rhiannon Wallis Statistics and Clinical Research

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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 January 2024 - 31 December 2024 and patient listings between 1 August 2024 – 31 January 2025 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 January 2024 31 December 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 228 new registrations for whole pancreas in the time period and the form return rate was 96% and ranged from 88% to 100% across the centres. For 37 new islet registrations in the time period the form return rate was 97% and ranged from 86% to 100% across centres.
- 10 Lists of registered patients with outstanding supplementary forms are sent out to centres each month.

	Centre specific return r 1 January 2024 - 31 Dec		tandard lis	ting criteria form,		
Vascularised	Number of new	Forms returned		No. within criteria/ approved		
pancreas	registrations	Ν	%	Ν	%	
Cambridge	37	36	97	36	100	
Cardiff	22	21	95	21	100	
Edinburgh	14	14	100	14	100	
Guy's	25	22	88	22	100	
Manchester	55	54	98	54	100	
Newcastle	12	12	100	12	100	
Oxford	51	48	94	48	100	
WLRTC	12	12	100	12	100	
Total	228	219	96	219	100	
Pancreatic isle	et					
Edinburgh	13	13	100	13	100	
Manchester	17	17	100	17	100	
Oxford	7	6	86	6	100	
Total	37	36	97	36	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 August 2024 31 January 2024 and who met the standard listing criteria.
- 12 Of the 89 new supplementary forms received, all patients met the standard listing criteria. Furthermore, there were no appeals which were approved by Pancreas Advisory Group appeals panel. The standard listing criteria are shown in **Appendix 1**.

Table 2	Table 2 Registrations outside standard listing criteria, 1 August 2024 - 31 January 2025								
Registration type	Number of new forms received	Outside criteria		Approved appeals		Outside criteria and not approved			
., PC		Ν	(% of forms)	Ν	(% of forms)	N	(% of forms)		
SIK	11	0	(0%)	0	-	0	-		
SPK	71	0	(0%)	0	-	0	-		
PAK	4	0	(0%)	0	-	0	-		
ITA	2	0	(0%)	0	-	0	-		
Priority islet	1	0	(0%)	0	-	0	-		
Total	89	0	(0%)	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 <u>ODTRegistrationTeamManagers@nhsbt.nhs.uk</u>.
- 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)

- All patients listed should have insulin treated diabetes a.
- b. Patients listed with type 2 diabetes must have a BMI of <= 30kg/m<sup>2</sup>
- Patients listed must be receiving dialysis or have a GFR of <=20 mls/min C.

Pancreas transplant alone (PTA)

- a. All patients listed should have insulin treated diabetes
- Patients listed with type 2 diabetes must have a BMI of <= 30kg/m<sup>2</sup> b.
- At least 2 severe hypoglycaemic episodes in the last 24 months and be C. assessed by a diabetologist to have disabling hypoglycaemia

Pancreas after kidney (PAK)

- All patients listed should have insulin treated diabetes a.
- Patients listed with type 2 diabetes must have a BMI of <= 30kg/m<sup>2</sup> b.

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 mmol/l
- At least 2 severe hypoglycaemic episodes in the last 24 months and be C. assessed by a diabetologist to have disabling hypoglycaemia

Islet after kidney (IAK)

- All patients listed should have insulin treated diabetes a.
- 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 mmol/l
- A history of severe hypoglycaemia within the last 24 months or C. HbA1c>=53 mmol/mol

Priority islet transplant (since 3 September 2014)

- All patients should be listed within 12 months of routine graft a.
- b. All patients should have a functioning routine graft
  - (C-peptide >=50 pmol/L) at the time of priority listing.