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Organ and Tissue Donation and Donation Transplantation

Activity Report 2024/2025

Caring Expert Quality



Preface

This report has been produced by Statistics and Clinical Research, NHS Blood and Transplant.

All figures quoted in this report are as reported to NHS Blood and Transplant by 19 May 2025 for the UK Transplant Registry, maintained on behalf of the transplant community and National Health Service (NHS), or for the NHS Organ Donor Register, maintained on behalf of the UK Health Departments.

The information provided in the tables and figures given in Chapters 2-10 does not always distinguish between adult and paediatric transplantation. For the most part, the data also do not distinguish between patients entitled to NHS treatment (Group 1 patients) and those who are not (Group 2 patients).

The UK definition of an organ donor is any donor from whom at least one organ has been retrieved with the intention to transplant. Organs retrieved solely for research purposes have not been counted in this Activity Report. Organ donation has been recorded to reflect the number of organs retrieved. For example, if both lungs were retrieved, two lungs are recorded even if they were both used in one transplant. Similarly, if one liver is donated, one liver is recorded even if it results in two or more transplants.

The number of donors after brain death (DBD) and donors after circulatory death (DCD) by hospital are documented in **Appendix I**. Donation and transplant rates in this report are presented per million population (pmp): population figures used throughout this report are mid-2024 estimates based on ONS 2021 Census figures and are given in **Appendix III**.

All charts presented in this report are available as an accompanying slide set available from <u>http://www.odt.nhs.uk</u>.

A supplementary report on organ donation and transplantation activity for Black, Asian and ethnic minority groups is published alongside this Activity Report – *Annual report on ethnicity differences in Organ Donation and Transplantation*. It provides additional information on trends in organ donation and transplantation by ethnicity.

The COVID-19 pandemic led to unprecedented challenges for UK transplantation. Concerns about the ability to care for transplant recipients, lack of access to resource because it is being used for patients in the pandemic, and the risk versus benefit for immunosuppressed transplant recipients, resulted in a major reduction in the number of organ transplants undertaken and the impact of the pandemic is still evident.

Waiting list figures at 31 March 2020, 2021 and 2022 do not accurately reflect the need for an organ transplant due to the COVID-19 pandemic. Different practices were established across the UK and across organ groups with regards to waiting list management.

Acknowledgement

NHS Blood and Transplant would like to thank all those in the donation and transplantation communities responsible for providing data to the UK Transplant Registry and the Potential Donor Audit, without whom this report would not be possible. Thanks also go to NHS Blood and Transplant staff responsible for data entry, accuracy and completeness.

Photograph L to R: Wendy Milner (Deputy Matron, Intensive Care Unit at Bradford Royal infirmary) and Karen Piotr (Donor family member, Organ Donation Ambassador, Donor Family Network Trustee).



Foreword

Organ donation and transplant rates have not progressed as we had hoped. In the years following the pandemic, we saw stepwise improvements in both the number of organ donors and life-saving transplants, however, this trend did not continue last year. Instead, the number of deceased donors fell by 7%, and the number of patients receiving a transplant declined by 2%. As a result, more people than ever are waiting for an organ transplant. At the end of March 2025, 8,096 patients were waiting for a transplant, the highest number on record.

With less than one per cent of people in the UK dying in the circumstances which allow for organ donation, it is vital we maximise every opportunity for donation. We also need to achieve a societal shift in support for organ donation, with more people agreeing to donate their organs after death.

Overall consent/authorisation has remained static at 59% across the UK, halting the post-COVID decline. Deemed consent/authorisation last year fell to 48%, with more than half of families declining support for donation. Expressed consent/authorisation dropped to 87%, with 173 families overruling their loved one's decision to be a donor (30 donors after brain death, 143 donors after circulatory death).

We know that families are much more likely to support donation when the individual's positive decision is known beforehand. Declaring your decision by signing the NHS Organ Donor Register and discussing your end-of-life decision with those closest to you will ease the burden families face and make it more likely that they will support your decision to be a donor. It is essential they know and support your choice. That's why we need to actively simplify how we talk about organ donation. People need to think about it, talk to their families, and sign up. Most importantly, they need to understand the process and feel confident saying yes when the time comes.

Since the change in organ donation legislation, opt-in registrations on the NHS Organ Donation Register have steadily increased to more than 28 million people in the UK (42% of the population), which is encouraging and shows that the organ donation message is clearly making its way into people's conscious. However, there has also been a slight increase in the number of people choosing to opt out, but that percentage remains small in comparison, at just 2.7 million people (4% of the population). Deemed consent was not introduced as a replacement for expressed consent. Many people still want to record their donation decision on the NHS Organ Donor Register and families value this confirmation allowing them to more readily support donation and making the process a lot easier at an already very difficult time.

Within UK intensive care units and emergency departments the referral of potential donors remains strong, with a 94% referral rate and Specialist Nurses in Organ Donation continue to play a vital role, being present in 92% of approaches made to donor families. There has also been a decrease of 12% in donors after brain death and a decrease of 2% in donors after circulatory death compared with last year. We understand the potential donor pool has changed massively over the years and is increasingly more challenging in terms of the type and quality of organs that are donated. The reasons for this range from the increased number of donors with existing co-morbidities to the reduction in the number of deaths in intensive care who are potential donors.

Kidneys are the most needed organ for transplant, with those waiting for a kidney transplant making up more than two-thirds of the waiting list. Last year, transplants from living kidney donors increased by 6% to 964, representing 29% of the total kidney transplant programme. However, kidney transplants from deceased donors fell by 5%. Lung transplants increased by 8% to 151, nearing prepandemic levels and representing the highest number of lung transplants performed in the UK since 2019-2020. This reflects sustained efforts by the lung transplant community.

Following the implementation of the organ utilisation report recommendations (Honouring the gift of life) organ utilisation is at an all-time high, but having said that, sadly, 436 patients died waiting for an organ transplant last year, while a further 911 patients were removed from the transplant list - mostly because of deteriorating health and ineligibility for transplant. Many of these patients are likely to have died shortly afterwards.

Despite a 3% decrease in the number of people donating to NHSBT Eye Banks, the number of cornea transplants increased by 11% offering the gift of sight to thousands of people in the UK.

We've already laid out our plans to help shape the NHS 10-Year Health Plan for England, and we're determined to return organ donation and transplantation right across the UK to pre-pandemic levels and then increase from there. We recognise that to truly reduce the transplant waiting list, we need to take action across the donation and transplantation pathway in all corners of the UK. These actions won't just save lives and reduce health inequalities; they could also deliver up to £2.6 billion in economic benefits over the next decade by lowering the long-term cost of care for patients on the waiting list.

There's no doubt that organ donation and transplantation are at a critical point, but our commitment is unwavering: to work with the wider NHS to provide exceptional care for every potential donor and their family, and ensure every donated organ has the best possible chance to save a life now and in the future.

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Summary of Donor and Transplant Activity

In the financial year to 31 March 2025, compared with the previous year:

- there was a 7% decrease in the number of deceased donors to 1,403
- the number of donors after brain death decreased by 12% to 676, while the number of donors after circulatory death decreased by 2% to 727
- the number of living donors increased by 5% to 991, accounting for 41% of the total number of organ donors
- the total number of patients whose lives were potentially saved or improved by an organ transplant decreased by 2% to 4,583

The total number of patients registered for a transplant has increased (by 8%), so that:

- there were 8,096 patients waiting for a transplant at the end of March 2025, with a further 3,883 temporarily suspended from transplant lists
- 463 patients died while on the active list waiting for their transplant compared with 418 in the previous year, an increase of 11%. A further 911 patients were removed from the transplant list. The removals were mostly as a result of deteriorating health and ineligibility for transplant and many of these patients are likely to have died shortly afterwards.

Some of the other key messages from this report are that, compared with last year, there has been:

- a decrease of 2% in the total number of kidney transplants
- a decrease of 12% in the total number of transplants involving a pancreas
- an increase of 2% in the total number of liver transplants
- a decrease of 16% in the total number of heart transplants
- an increase of 8% in the total number of lung or heart-lung transplants
- a decrease of 26% in the total number of intestinal transplants
- a decrease of 3% in the total number of corneas retrieved to NHSBT Eye Banks and an increase of 11% in the total number of corneal transplants
- a continuation of the high overall referral rate of potential donors at 94%
- a consistently high proportion of approaches to donor families where a Specialist Nurse -Organ Donation was present at 92%
- a static overall consent/authorisation rate for organ donation, at 59%, halting the declining trend post COVID
- just over 28.4 million opt-in registrations and just under 2.7 million opt-out registrations on the Organ Donor Register (ODR) at the end of March 2025.



Overview of Organ Donation and Transplantation

A summary of organ donation and transplantation activity in the UK during the financial year from 1 April 2024 to 31 March 2025

2.1 Summary of activity

Many patients became suspended from the active transplant list as transplant centres reacted to the COVID-19 pandemic in March 2020 and 2021, hence the dip in the waiting list numbers at that time. There has since followed an increase in waiting list numbers and there were 612 more active patients at 31 March 2025 than at the end of the previous financial year. The change in donor and transplant numbers (1 April 2015 to 31 March 2025) and the number of patients registered on the transplant lists at 31 March each year are shown in **Figure 2.1**. There were 121 fewer deceased donor transplants in 2024-2025 than in the previous year, representing a 3% decrease. There was a 7% decrease in the number of deceased donors. Unfortunately, donor and transplant numbers still remain lower than pre-pandemic levels.





Figure 2.2 shows the number of deceased and living donors for 2015-2025. The number of deceased donors after circulatory death (DCD) has increased over the decade, while numbers of donors after brain death (DBD) have largely fallen, such that DCD donors made up over half of all deceased donors last year, for the first time. In 2024-2025, the numbers of DBD and DCD donors decreased compared to the previous year, to 676 and 727 respectively. The number of living donors has increased from 944 in 2023-2024 to 991 in 2024-2025, which represents an increase of 5%. However, it has not returned to its peak of 1,081 donors in 2015-2016.



Figure 2.3 shows the potential deceased organ donor population in the UK. Not everyone can be a deceased organ donor and this figure highlights the small proportion of deaths in the UK that represent potential donors. *Please note that the information presented comes from several different sources. The NHSBT Potential Donor Audit collects information on most, but not all, actual donors and the potential for donation could therefore be slightly underestimated. The quoted numbers of transplants and organs transplanted are those achieved using organs from deceased actual donors in the UK, which may include some transplants performed overseas, and these transplant numbers do not reflect the number of deceased donor transplants in the UK reported elsewhere in this report, which may have used organs from overseas donors.*







Table 2.1 shows the number of deceased donors and transplants in 2024-2025 and patients on the transplant list at 31 March 2025 for each country in the UK and overall.

	Table 2.1Deceased donors and transplants 1 April 2024 - 31 March 2025, and transplant lists as at 31 March 2025, by Country of residence									
	Country of residence ¹									
Northern England Wales Scotland Ireland						то	TOTAL ²			
Organ	N	(pmp)	N	(pmp)	N	(pmp)	N	(pmp)	Ν	(pmp)
Kidney										
Deceased donors	1085	(19.0)	67	(21.4)	99	(18.2)	39	(20.4)	1361	(20.1)
Transplants	2046	(35.8)	108	(34.5)	147 522	(27.0)	28	(14.7)	2337	(34.6)
Transplant list	6007	(105.2)	264	(84.3)	533	(97.8)	98	(51.3)	6939	(102.6)
Pancreas	0.45	(4.0)	40	(4.0)	00	(4.0)	7	(0,7)		(4.0)
Deceased donors Transplants	245 113	(4.3)	13 6	(4.2)	23 22	(4.2)	7 0	(3.7)	309 142	(4.6)
Transplant list	288	(2.0) (5.0)	31	(1.9) (9.9)	22 43	(4.0) (7.9)	7	(0.0) (3.7)	370	(2.1) (5.5)
Tanoplant list	200	(0.0)	51	(3.3)	40	(7.3)	'	(0.7)	570	(0.0)
Heart										
Deceased donors	156	(2.7)	14	(4.5)	13	(2.4)	8	(4.2)	205	(3.0)
Transplants ³	151	(2.6)	9	(2.9)	35	(6.4)	4	(2.1)	200	(3.0)
Transplant list ³	244	(4.3)	14	(4.5)	30	(5.5)	18	(9.4)	308	(4.6)
Lung										
Deceased donors	133	(2.3)	5	(1.6)	12	(2.2)	4	(2.1)	166	(2.5)
Transplants	127	(2.2)	8	(2.6)	11	(2.0)	5	(2.6)	151	(2.2)
Transplant list	153	(2.7)	16	(5.1)	16	(2.9)	8	(4.2)	194	(2.9)
Liver										
Deceased donors	831	(14.6)	53	(16.9)	84	(15.4)	30	(15.7)	1050	(15.5)
Transplants	724	(12.7)	47	(15.0)	70	(12.8)	22	(11.5)	874	(12.9)
Transplant list	514	(9.0)	33	(10.5)	67	(12.3)	39	(20.4)	662	(9.8)
Intestinal										
Deceased donors	14	(0.2)	0	(0.0)	1	(0.2)	0	(0.0)	16	(0.2)
Transplants	14	(0.2)	0	(0.0)	2	(0.4)	1	(0.5)	17	(0.3)
Transplant list	6	(0.1)	0	(0.0)	0	(0.0)	1	(0.5)	8	(0.1)
Total⁴										
Deceased donors	1116	(19.5)	70	(22.4)	101	(18.5)	40	(20.9)	1403	(20.8)
Transplants	3065	(53.7)	173	(55.3)	274	(50.3)	60	(31.4)	3592	(53.1)
Transplant list	6910	(121.0)	327	(104.5)	647	(118.7)	163	(85.3)	8096	(119.8)

¹ Country of residence of donor given for deceased donor numbers, and residence of recipient given for transplant and waiting list numbers

² Includes patients resident in Channel Islands, Isle of Man, overseas and in the Republic of Ireland

³ Excludes heart-lung recipients

⁴ Organ numbers do not add up to total due to multi-organ donors and patients waiting for a multi-organ transplant



2.2 Transplant list

At 31 March 2025, 8,096 patients were registered for an organ transplant in the UK on the active transplant list. A further 3,883 patients were temporarily suspended from the active national transplant list because they were unfit or otherwise unavailable for transplant. Details of numbers of patients on each of the organ transplant lists are given in **Table 2.2** for 31 March 2024 and 2025. Between these dates the total number increased by 612 (8%). This is mostly due to increases in the kidney and pancreas transplant lists, while the number of patients on other organ lists, in particular the lung transplant list fell.

Table 2.2Active transplant lists in the UK at 31 March 2024 and 2025						
	2024	2025	% Change			
Kidney & pancreas patients	6232	6927	+11			
Kidney	5898	6557	+11			
Kidney & pancreas	297	316	+6			
Kidney & pancreas islets	17	28	+65			
Pancreas	5	7	-			
Pancreas islets	15	19	+27			
Cardiothoracic patients	559	497	-11			
Heart	284	303	+7			
Heart-lung	8	11	-			
Lung(s)	267	183	-31			
Liver patients	639	623	-3			
Intestinal patients	13	8	-			
Other multi-organ patients ¹	41	41	0			
ALL PATIENTS	7484	8096	+8			
Percentages not reported when fewer than 10 in either year ¹ Includes patients waiting for kidney and liver transplants (36 in 2024, 36 in 2025), kidney and heart transplants (2 in 2024, 2 in 2025), liver and heart transplants (3 in 2024, 3 in 2025)						

During 2024-2025, 463 patients died whilst active/suspended on the transplant list or within one year of removal from the list. For comparison, in 2023-2024, 418 patients died. This information is shown by organ and age group in **Table 2.3**.



1 April 2023 and 31 March 2025							
	2023-2024 Total	Total	2024-202 Adult	5 Paediatric			
Kidney & pancreas patients	291	337	335	2			
Kidney	265	313	311	2			
Kidney & pancreas	24	23	23	0			
Kidney & pancreas islets	0	0	0	0			
Pancreas	2	0	0	0			
Pancreas islets	0	1	1	0			
Cardiothoracic patients	57	64	57	7			
Heart	13	27	21	6			
Heart-lung	2	2	2	0			
Lung(s)	42	35	34	1			
Liver patients	67	53	51	2			
Intestinal patients	2	4	0	4			
Other multi-organ patients ¹	1	5	5	0			
ALL PATIENTS	418	463	448	15			
Includes all deaths whilst nations active	s/suspended on the tr	anenlant list o	or within one y	year of removal			

Includes all deaths whilst patient active/suspended on the transplant list or within one year of removal from the list

¹ Includes patients waiting for kidney and liver transplants (1 adult in 2024-2025) and liver and lung transplant (1 adult in 2023-2024, 4 adult in 2024-2025)

2.3 Transplants

Table 2.2

There was a 2% decrease in the total number of organ transplants (from deceased and living donors) last year: 4,583 transplants were performed in 2024-2025 compared with 4,658 in 2023-2024 (**Table 2.4**). All multi-organ transplants are identified separately as are transplants from living donors.

The total number of kidney transplants decreased in 2024-2025; kidney only transplants from donors after circulatory death and living donors increased by 1% and 6% respectively, while the number of DBD transplants fell by 9%. The number of heart transplants decreased by 16%, the number of lung and heart-lung transplants increased by 8%, the number of liver transplants increased by 2%, and the number of pancreas transplants (including pancreas only, intestinal, kidney/pancreas and pancreas islets) decreased by 12%.



Table 2.4 Transplants performed in the UK, 1 April 2023 - 31 March 2025						
Transplant	2023-2024	2024-2025	% Change			
DBD kidney DCD kidney Living donor kidney	1175 1125 913	1074 1134 964	-9 +1 +6			
DBD kidney and pancreas DCD kidney and pancreas Kidney and pancreas islets DBD pancreas DCD pancreas Pancreas Islets	73 55 10 10 1 11	77 36 9 3 3 14	+5 -35 - - +27			
DBD heart DCD heart Heart-lung DBD single lung DCD single lung DBD bilateral lung DCD bilateral lung	172 65 5 4 1 98 32	143 57 2 2 1 88 58	-17 -12 - - - -10 +81			
DBD liver DCD liver DBD liver lobe DCD liver lobe Living donor liver lobe	505 264 75 0 31	471 309 86 1 27	-7 +17 +15 - -13			
Bowel only Living bowel only Liver, bowel & pancreas Multivisceral ¹ Modified multivisceral	4 1 0 6 12	2 0 2 6 7	- - - -			
Kidney & liver	10	7	-			
TOTAL ORGAN TRANSPLANTS	4658	4583	-2			
Total kidney transplants Total pancreas transplants ² Total cardiothoracic transplants Total liver transplants ² Total intestinal transplants	3361 178 377 891 23	3302 157 351 909 17	-2 -12 -7 +2 -26			
Percentage not reported when fewer than 10 ¹ Including a kidney (1 in 2024-2025) ² Includes intestinal transplants	in either year					



The total approximate number of patients with a functioning transplant on 31 March 2025 is 62,900 (**Table 2.5**). This reflects information held on the UK Transplant Registry database and excludes those patients who are known to be lost to follow-up.

	er of transplants reported as oning at 31 March 2025				
	Functioning transplants ¹				
Kidney Pancreas Cardiothoracic Liver Intestinal	46000 2200 4300 12300 170				
ALL PATIENTS	62900				
¹ Approximate number of patients with a functioning transplant being followed up. Multi-organ transplants (excluding intestinal transplants) are counted in each organ. Excludes those patients known to be lost to follow-up					





Organ Donation Activity

Key messages

- There has been a 7% decrease in deceased donors (to 1,403) and a 5% increase in living organ donors (to 991), compared with last year
- There has been a decrease of 12% in donors after brain death to 676 and an decrease of 1% in donors after circulatory death to 727, compared with last year
- On average, for every two donors after circulatory death, donors after brain death provide one additional organ for transplantation
- Following changes observed in 2020-2021, donor characteristics have returned to those similar to pre-pandemic and the long term trend towards more donors being affected by obesity has continued

3.1 Summary of activity

There was a 7% decrease in the number of deceased organ donors in 2024-2025 (1,403) when compared to the previous year. There was a decrease of 1% in donors after circulatory death (DCD) and a decrease of 12% in donors after brain death (DBD).

The 1,403 deceased organ donors donated 4,605 organs, compared with 1,510 donors and 4,887 organs in 2023-2024. This represents a 6% decrease in organs donated. **Table 3.1** shows deceased, as well as living, organ donors according to the organs they donated.

Nearly all deceased donors (97%) gave a kidney and of these, the majority (78%) also donated at least one other organ. Only 10% of donors after brain death were single organ donors, with the majority being kidney only donors. By contrast, 36% of donors after circulatory death were single organ donors, the majority (94%) of these donating just their kidneys.

Although the vast majority of living organ donors donated a kidney, 27 donated part of their liver. All living donations are approved by the Human Tissue Authority.

Table 3.1 Solid organ donated	donors in the UK, 1 Apri	il 2024 - 31 Mar	ch 2025, by orgar	n types
	DBD	DCD	Living donor	TOTAL
Kidney only	47	249	964	1260
Kidney & thoracic	11	17	-	28
Kidney & liver	301	291	-	592
Kidney & pancreas	1	14	-	15
Kidney, thoracic & liver	86	50	-	136
Kidney, thoracic & pancreas	3	6	-	9
Kidney, liver & pancreas	96	47	-	143
Kidney, liver, pancreas & bo	wel 5	-	-	5
Kidney, thoracic, liver & pan	creas 90	36	-	126
Kidney, thoracic, liver, panc	eas & bowel 11	-	-	11
Thoracic only	2	3	-	5
Thoracic & liver	2	1	-	3
Liver only	21	13	27	61
TOTAL	676	727	991	2394



3.2 Organ donors

Organ donor rates per million population (pmp) for 2024-2025 are given by country and NHS region according to where the donor lived in **Table 3.2**, while the numbers of deceased donors are shown based on location of the hospital in which they died in **Table 3.3**. **Table 3.4** shows the number of deceased donors by Organ Donation Services Team. **Appendix I** shows a more detailed breakdown of the number of donors from the donating hospitals and **Appendix III** details the populations used. Number and rates of utilised donors are given in Chapter 4.

Table 3.2Organ donatio31 March 2025							ril 2024 -	
Country/ NHS region	DE	3D	D	CD	TO	ΓAL	Liv	ing
of residence	Ν	(pmp)	Ν	(pmp)	Ν	(pmp)	Ν	(pmp)
North East and Yorkshire	80	(9.7)	79	(9.6)	159	(19.3)	73	(8.9)
North West	57	(7.6)	48	(6.4)	105	(14.0)	79	(10.5)
Midlands	101	(9.2)	110	(10.0)	211	(19.3)	90	(8.2)
East of England	57	(8.9)	109	(17.0)	166	(25.9)	36	(5.6)
London	70	(7.9)	54	(6.1)	124	(14.0)	83	(9.4)
South East	101	(10.8)	100	(10.7)	201	(21.4)	88	(9.4)
South West	63	(10.9)	87	(15.1)	150	(26.0)	83	(14.4)
England Isle of Man Channel Islands	529 3 1	(9.3) (37.5) (5.9)	587 1 0	(10.3) (12.5) (0.0)	1116 4 1	(19.5) (50.0) (5.9)	532 0 1	(9.3) (0.0) (5.9)
Wales	41	(13.1)	29	(9.3)	70	(22.4)	39	(12.5)
Scotland	45	(8.3)	56	(10.3)	101	(18.5)	57	(10.5)
Northern Ireland	22	(11.5)	18	(9.4)	40	(20.9)	45	(23.6)
TOTAL ¹	676	(10.0)	727	(10.8)	1403	(20.8)	965	(14.3)

¹ Includes 362 donors (35 DBD, 36 DCD and 291 living) with an unknown UK postcode and excludes 26 living donors resident outside the UK



Table 3.2 shows variation in the number of DBD and DCD donors pmp across the UK. There were 10.0 DBD donors pmp for the UK as a whole, but across NHS regions this ranged between 7.6 and 10.9 pmp. Across the four countries of the UK, Wales had the highest rate of 13.1 pmp. However, the number of eligible donors pmp also varies and further information can be seen in Chapter 13. It should be noted that these figures are not directly comparable, since not all donors are reported in the Potential Donor Audit. For DCD donors the UK rate is 10.8 pmp, and England and Scotland had the highest rate of 10.3 pmp across countries of the UK, and across NHS regions it ranged from 6.1 to 17.0 pmp. No adjustment has been made for any differences in demographics of the populations across countries or NHS regions.

		he UK, 1 April 2024 - 31 hospital of donor death	March 2025,	
Country of donation/	DBD	DCD	ΤΟΤΑ	L
NHS region	N	Ν	Ν	
North East and Yorksh	nire 84	82	166	
North West	59	56	115	
Midlands	108	111	219	
East of England	51	102	153	
London	114	86	200	
South East	89	95	184	
South West	64	86	150	
England	569	618	1187	
Isle of Man	2	0	2	
Channel Islands	0	0	0	
Wales	35	30	65	
Scotland	45	60	105	
Northern Ireland	25	19	44	
TOTAL	676	727	1403	



Table 3.4Deceased organ donors in the UK, 1 April 2024 - 31 March 2025by Organ Donation Services Team						
Team	DB N	D DCE N	D TOTA N	L		
Eastern	60	109	169			
London	90	64	154			
Midlands	89	101	190			
North West	65	60	125			
Northern	46	35	81			
Northern Irela	nd 25	5 19	44			
Scotland	45	60	105			
South Central	43	52	95			
South East	72	69	141			
South Wales	36	26	62			
South West	60) 78	138			
Yorkshire	45	5 54	99			
TOTAL	676	727	1403			

The mean number of organs retrieved per donor in 2024-2025 is given by country in **Table 3.5**. Overall, an average of 3.6 organs were donated per DBD donor and 2.9 per DCD donor. These rates ranged from 3.6 (DBD) and 2.6 (DCD) organs per donor in Wales, to 3.9 (DBD) and 2.9 (DCD) in Scotland.

Table 3.5Organs retrieved per donor, in the UK, 1 April 2024 - 31 March 2025, by country of donor residence									
Country		Adult			Paediatri	ic		All	
	DBD	DCD	TOTAL	DBD	DCD	TOTAL	DBD	DCD	TOTAL
England	3.6	2.9	3.2	5.0	4.6	4.9	3.6	3.0	3.3
Wales	3.6	2.6	3.2	-	-	-	3.6	2.6	3.2
Scotland	3.9	2.9	3.4	-	-	-	3.9	2.9	3.4
Northern Irelan	d 3.6	2.9	3.3	-	3.0	3.0	3.6	2.9	3.3
TOTAL	3.6	2.9	3.2	5.0	4.5	4.8	3.6	2.9	3.3



3.3 Demographic characteristics

It is important to be aware that there have been changes over time with regard to donor characteristics (**Table 3.6**). In 2024-2025, the number of DCD donors has exceeded DBD donors for the first time and 38% of deceased donors were aged 60 years or more (**Figure 3.1**). The proportion of clinically obese donors (Body Mass Index (BMI) of 30 or higher) has increased from 24% to 31% in deceased donors in the last 10 years (**Figure 3.2**). In absolute numbers, this represents approximately 100 more donors in the 30+ BMI category in 2024-2025 than in 2015-2016. In addition, the proportion of all deceased donors after a trauma death has decreased from 8% to 3% over the same time period. Trends towards more obese deceased donors and those with non-trauma related deaths may all have an adverse impact on the quality and utilisation of the organs, and the subsequent transplant outcome for the recipient.

Table 3.6 also indicates the ethnicity of deceased organ donors, highlighting that 7% of donors are from the Black, Asian and minority ethnic community. By contrast, these communities are estimated to represent 18% of the UK population.

Table 3.6Demographic characteristics of organ donors in the UK1 April 2024 - 31 March 2025										
		DB	D	DC	D	тот	AL			
		N	%	N	%	N	%			
Age	0-17	18	3	14	2	32	2			
(Years)	18-49	278	41	214	29	492	35			
	50-59	151	22	205	28	356	25			
	60-69	143	21	187	26	330	24			
	70+	86	13	107	15	193	14			
	Mean (SD)	51	(16)	54	(15)	53	(16)			
BMI	0-19	52	8	39	5	91	6			
(kg/m²)	20-29	435	64	437	60	872	62			
	30+	189	28	251	35	440	31			
	Mean (SD)	27	(6)	28	(6)	28	(6)			
Cause of	Intracranial	613	91	620	85	1233	88			
death	Trauma	15	2	26	4	41	3			
	Other	48	7	81	11	129	9			
Ethnicity	White	589	90	658	95	1247	93			
	Asian	37	6	16	2	53	4			
	Black	19	3	9	1	28	2			
	Other	6	1	9	1	15	1			
	Unknown	25	-	35	-	60	-			
Blood	0	315	47	329	46	644	46			
group	A	265	39	306	42	571	41			
	В	68	10	65	9	133	10			
	AB	27	4	23	3	50	4			
	Unknown	1	-	4	-	5	-			
Donor	Male	359	53	442	61	801	57			
gender	Female	317	47	285	39	602	43			
TOTAL		676	100	727	101	1403	100			

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Note that BMI cannot be determined for all deceased donors thus numbers indicated in **Figure 3.2** are the numbers of donors for which BMI was available, not total number of donors.





The National Organ Retrieval Service and Usage of Organs

Key messages

- National Organ Retrieval Service teams attended 688 possible DBD donors and 911 possible DCD donors; 98% of these DBD donors and 80% of these DCD donors proceeded to donation
- Overall, 57% of organs offered from those donors that did proceed were transplanted, but individually, these rates were 86% for kidneys, 63% for livers, 22% for pancreases, 37% for hearts, 23% for lungs and 11% for bowels
- Overall, 84% of organs retrieved were transplanted, but individually, these rates were 88% for kidneys, 80% for livers, 50% for pancreases, 98% for hearts, 92% for lungs and 94% for bowels
- The number of deceased donors per million of population was 20.8, however 5% of actual donors resulted in no organ transplants, a decrease on the previous year (6%)

4.1 The National Organ Retrieval Service (NORS)

There are 16 NORS teams in total, ten abdominal and six cardiothoracic. Since January 2020, the abdominal aspect of the service increased capacity to eight abdominal NORS teams available to retrieve organs from deceased donors in the UK for transplantation, at any given time. Three cardiothoracic NORS teams are available at any given time, an arrangement that has been in place since April 2016.

NORS teams are mobilised using a sequence. The first and second teams in the sequence are defined for each UK hospital (largely based on travel times but adjusted to give a more even workload across NORS teams), while subsequent teams in the sequence are ordered based on travel time and availability, known as 'closest available'.

If a team is first in sequence for a particular donor hospital, they are required to attend possible donors at that hospital within an agreed timescale if at least one organ has been accepted for transplantation. If the team is already retrieving when they are called to attend, then a second team is called in to retrieve and so on.

The number of possible DBD and DCD donors that were attended by each of the teams in 2024-2025 is shown in **Table 4.1**. The geographical distribution of donors and the on-call arrangements lead to variation in these numbers across teams. The figures are broken down by whether the possible donor proceeded to organ donation (proceeding donors) or not. Non-proceeding donors are more common in the pool of potential DCD donors as prolonged time to death after treatment withdrawal can result in unsuitability of organs for transplantation. A small number of possible donors may be attended by local kidney transplant teams. This is typically for DCD donors when only the kidneys have been accepted for transplantation and the teams are appropriately reimbursed if they are willing and able to retrieve.



Table 4.1

Number of proceeding and non-proceeding donors attended by each NORS team in the UK, 1 April 2024 – 31 March 2025

NORS team	Proceeding ²	DBD Non- proceeding	% non- proc	No. attended	Proceeding ²	DCD Non- proceeding	% non- proc	No. attended
Abdominal								
Birmingham ¹	62	-	-	62	92	21	19	113
Cambridge	79	2	2	81	111	26	19	137
Cardiff ¹	30	-	-	30	36	4	10	40
Edinburgh	47	2	4	49	67	10	13	77
King's	119	1	1	120	103	29	22	132
Leeds ¹	67	2	3	69	65	19	23	84
Manchester ¹	61	1	2	62	69	20	22	89
Newcastle	65	3	4	68	47	14	23	61
Oxford ¹	76	-	-	76	59	24	29	83
Royal Free ¹	68	1	1	69	75	16	18	91
Abdominal total	674	12	2	686	724	183	20	907
Cardiothoracic ¹								
Birmingham	52	25	32	77	10	11	52	21
Glasgow	14	14	50	28	15	16	52	31
Harefield	34	40	54	74	28	20	42	48
Manchester	50	21	30	71	7	22	76	29
Newcastle	26	13	33	39	6	9	60	15
Papworth	29	21	42	50	47	29	38	76
Cardiothoracic total	205	134	40	339	113	107	49	220
Total donors attended	676	12	2	688	727	184	20	911

¹ Part-time teams

² For abdominal, at least one abdominal organ retrieved. For cardiothoracic, at least one cardiothoracic organ retrieved

For more detailed information regarding the National Organ Retrieval Service and individual team activity, an annual NORS report is available here: <u>https://www.odt.nhs.uk/statistics-and-reports/annual-national-organ-retrieval-service-report/</u>



4.2 Retrieval and usage of organs

The number of 'consented' donors ('authorised' donors in Scotland) and 'offered' donors (where at least one organ was offered for transplant) are shown in **Table 4.2**. Note that organs are not always offered from 'consented' donors, e.g. because the donor's condition deteriorates, or it is discovered the donor is unsuitable for organ donation. The number of organs offered from 'offered' donors is also shown. Each year a number of actual organ donors result in no transplants. Donors resulting in at least one transplant are termed 'utilised' donors and the number of actual and utilised donors is shown in **Table 4.2**. The number of donors per million of population (pmp) is also shown. In 2024-2025, 5% of actual donors resulted in no organ transplants, a decrease of 1% compared to the previous year.

1 April 2	2024 - 31 DBD (March 2028 (pmp)		(pmp)	Total	(pmp)				
Consented donors ¹	736	(10.9)	1072	(15.9)	1808	(26.7)				
Offered donors ² <i>Kidneys offered</i> <i>Livers offered</i> <i>Pancreases offered</i> <i>Bowels offered</i> <i>Hearts offered</i> <i>Lungs offered</i>	706 1375 675 416 135 397 791	(10.4)	976 1899 898 372 1 187 704	(14.4)	1682 3274 1573 788 136 584 1495	(24.9)				
Actual donors ³	676	(10.0)	727	(10.8)	1403	(20.8)				
Utilised donors ⁴	661	(9.8)	673	(10.0)	1334	(19.7)				
¹ Consented donors defined as patients where consent for at least one organ was given ² Offered donors defined as donors where one or more organs were offered for transplantation ³ Actual donors defined as donors where one or more organs were retrieved ⁴ Utilised donors defined as donors where one or more organs were retrieved and transplanted										

There were 1,403 actual deceased organ donors in 2024-2025, but not all organs from these donors were offered for transplantation. **Table 4.3** shows the number of organs offered, retrieved and transplanted from the 676 DBD and 727 DCD actual donors. The number of organs from these donors that were subsequently used for research purposes is also shown. The number of organs offered for transplantation excludes those where the donor did not meet the nationally agreed age criteria for suitability for donation of that specific organ. There are no nationally agreed age criteria for kidney and liver donation.



Table 4.3Donation and transplantation of organs from 1403 deceased donors in the UK,
1 April 2024 - 31 March 2025

Organ	Organs meeting initial suitability criteria and offered for transplantation				ans transpla		Organs used for research (from actual organ donors)
			% of		% of	% of	
		Ν	offered	Ν	retrieved	offered	
DBD donor organs	5						
Kidney	1323	1290	98	1183	92	89	50
Liver	653	612	94	526	86	81	51
Pancreas	401	206	51	109	53	27	41
Bowel	133	16	12	15	94	11	0
Heart	386	144	37	143	99	37	1
Lung	773	196	25	186	95	24	6
Total	3669	2464	67	2162	88	59	149
DCD donor organs	5						
Kidney	1426	1403	98	1189	85	83	104
Liver	676	438	65	310	71	46	57
Pancreas	300	103	34	46	45	15	15
Heart	153	61	40	57	93	37	1
Lung	536	136	25	119	88	22	13
Total	3092 ¹	2141	69	1721	80	56	190
Deceased donor o	rgans						
Kidney	2749	2693	98	2372	88	86	154
Liver	1329	1050	79	836	80	63	108
Pancreas	701	309	44	155	50	22	56
Bowel	134 ¹	16	12	15	94	11	0
Heart	539	205	38	200	98	37	2
Lung	1309	332	25	305	92	23	19
Total	6761	4605	68	3883	84	57	339
Bowel: donors aged <		< 90kg	, .			tion (DBD)	

Figures 4.1 and 4.2 show line graphs of the pathway for all donor organs through to transplantation. The charts start at 100% for each organ, representing all organs from the 676 DBD and 727 DCD donors. The proportion of these organs where any national donor age criteria are met is then shown, followed by the proportion with consent, the proportion offered, the proportion retrieved and finally the proportion transplanted. For example, **Figure 4.2** shows that 82% of the kidneys from the 727 DCD donors were transplanted. Transplantation rates for kidneys and livers are generally high, while for other organs, even after allowing for the agreed age criteria, the rates are generally low.









Reasons for organs not being offered for transplantation, being offered but not accepted and being retrieved but not subsequently transplanted are shown in **Table 4.4** and **Table 4.5** for abdominal organs from DBD and DCD donors, respectively. **Table 4.6** shows the same information for cardiothoracic organs. Reasons for the medical unsuitability of an organ include infections, tumours, anatomy and disease. Non-medical reasons include donor size and donor instability. Clinical unsuitability of an organ encompasses poor perfusion, prolonged ischaemia, past history of the donor and, in the case of pancreases for islet usage, insufficiency of viable islet yield. Reasons reported under 'other' primarily include recipient related issues (such as no suitable recipients), but may also include logistical reasons and un-coded reasons reported of a miscellaneous nature.

These tables also show the number of organs from UK donors that were transplanted overseas. These organs were not accepted for transplantation by any UK transplant centre, but were accepted for suitable recipients identified elsewhere, usually in Europe. In 2024-2025 only a small number of livers, hearts and lungs were exported for transplantation outside the UK. Organs from outside the UK are occasionally imported for transplant. Further information on the import and export of organs can be found in **Appendix IV**.

The percentage of organs retrieved that were not transplanted are shown in **Figure 4.3**, **Figure 4.4**, **Figure 4.5**, **Figure 4.6** and **Figure 4.7** for kidneys, livers, pancreases, hearts, and lungs respectively. The rates are shown over the last decade. Some organs are found not to be suitable for transplantation after they have been retrieved. A number of organs retrieved but found not to be suitable for suitable for transplantation are instead used for research (with appropriate consent).



Table 4.4

Reasons for non-retrieval and non-use of abdominal organs from DBD donors in the UK, 1 April 2024 - 31 March 2025

	Kidr	ney	Liv	er	Panc	reas	Bov	vel
All actual DBD organ donors	676		676		676		676	
Donors from whom organs not offered for donation	12		23		275		543	
Reasons for organs not being offered ¹								
Family permission refused	1		2		4		34	
Permission refused by coroner	0		1		2		2	
Permission refused other	0		1 0		3		4	
Donor unsuitable - medical Donor unsuitable - non-medical	0 0		0		1 22		2 4	
Donor unsuitable - age	0		1		201		4	
Organ unsuitable - clinical	9		15		37		23	
Poor function	2		3		1		0	
Donor age>=60 or donor weight >=90kg	0		0		0		359	
Other	0		0		4		114	
Organs offered for donation	1323		653		401		133	
Organs not retrieved (% of organs offered for donation)	33	(2)	41	(6)	195	(49)	117	(88)
Donor unsuitable - medical	6		2		9		21	
Donor unsuitable - non-medical	0		2		22		14	
Donor unsuitable - age	0		0		15		9	
Organ unsuitable - clinical	9		23		91		29	
Poor function	14		7		19		2 42	
Other	4		7		39			
Organs retrieved (% of organs offered for donation)	1290	(98)	612	(94)	206	(51)	16	(12)
Organs transplanted in the UK	1183		524		109		15	
Organs transplanted overseas	0		2		0		0	
Organs not transplanted	107		86		97		1	
Reasons for organ not being transplanted								
Donor unsuitable - medical	39		13		10		0	
Donor unsuitable - non-medical	0		5		1		0	
Donor unsuitable - age	2		0		0		0	
Organ unsuitable - clinical Poor function	44 2		33 7		67 0		0 0	
Other	2 20		28		19		1	
					-			
TOTAL ORGANS RETRIEVED, NOT TRANSPLANTED (Number used for research)	107	(50)	86	(51)	97	(41)	1	(0)
¹ Includes donors whose organ may have been offered but are outsid	e of organ	snecific	critoria					

Includes donors whose organ may have been offered but are outside of organ specific criteria



Table 4.5Reasons for non-retrieval and non-use of abdominal organs from DCD donors in the UK,
1 April 2024 - 31 March 2025

	Kid	ney	Liv	Liver		reas
All actual DCD organ donors	727		727		727	
Donors from whom organs not offered for donation	15		51		427	
Reasons for organs not being offered ¹						
Family permission refused	0		0		1	
Permission refused by coroner	0		2		4	
Permission refused other	0		4		5	
Donor unsuitable - medical	3		2		1	
Donor unsuitable - non-medical	1		1		10	
Donor unsuitable - age	0 7		1 33		351	
Organ unsuitable - clinical Poor function	3		33 6		46 1	
Other	1		2		8	
Organs offered for donation	1426		676		300	
Organs not retrieved (% of organs offered for donation)	23	(2)	238	(35)	197	(66)
		(2)	230	(35)	197	(66)
Donor unsuitable - medical	2		27		12	
Donor unsuitable - non-medical	0		6		31	
Donor unsuitable - age	4		39		18	
Organ unsuitable - clinical Poor function	16 0		121 23		82 7	
Other	0		23 22		47	
	•					
Organs retrieved (% of organs offered for donation)	1403	(98)	438	(65)	103	(34)
Organs transplanted in the UK	1189		310		46	
Organs transplanted overseas	0		0		0	
Organs not transplanted	214		128		57	
Reasons for organ not being transplanted						
Donor unsuitable - medical	71		14		5	
Donor unsuitable - non-medical	0		8		0	
Donor unsuitable - age	2		0		3	
Organ unsuitable - clinical	90		63		35	
Poor function	7		22		1	
Other	44		21		13	
TOTAL ORGANS RETRIEVED, NOT TRANSPLANTED (Number used for research)	214	(104)	128	(57)	57	(15)
¹ Includes donors whose organ may have been offered but are outsid	te of orga	n snecific (criteria			

¹ Includes donors whose organ may have been offered but are outside of organ specific criteria


Table 4.6

Reasons for non-retrieval and non-use of cardiothoracic organs from deceased donors in the UK, 1 April 2024 - 31 March 2025

	Heart (DBD)	Lung (DBD)	Heart (DCD)	Lung (DCD)
All actual organ donors	676		676		727		727	
Donors from whom organs not offered for donation	290		290		574		459	
Reasons for organs not being offered ¹								
Family permission refused	20		9		18		17	
Permission refused by coroner	30		19		22		16	
Permission refused other	7		3		7		4	
Donor unsuitable - medical	2 2		14		7 10		26	
Donor unsuitable - non-medical Donor unsuitable - age	2 132		0 83		409		3 176	
Organ unsuitable - clinical	54		64		409 67		95	
Poor function	34		92		24		114	
Other	9		6		10		8	
Organs offered for donation	386		773		153		536	
Organs not retrieved (% of organs offered for donation)	242	(63)	577	(75)	92	(60)	400	(75)
Reasons for non-retrieval								
Donor unsuitable - medical	12		22		7		18	
Donor unsuitable - non-medical	16		40		4		40	
Donor unsuitable - age	27		14		2		8	
Organ unsuitable - clinical	78		122		38		98	
Poor function Other	75 34		298 81		18 23		144 92	
	34				23			
Organs retrieved (% of organs offered for donation)	144	(37)	196	(25)	61	(40)	136	(25)
Organs transplanted in the UK	137		182		57		117	
Organs transplanted overseas	6		4		0		2	
Organs not transplanted	1		10		4		17	
Reasons for organ not being transplanted								
Donor unsuitable - medical	0		0		0		2	
Donor unsuitable - non-medical	0		0		0		0	
Donor unsuitable - age	0 0		0 2		0 0		0 2	
Organ unsuitable - clinical Poor function	0		2 4		3		2	
Other	1		4		1		7	
TOTAL ORGANS RETRIEVED, NOT TRANSPLANTED (Number used for research)	1	(1)	10	(6)	4	(1)	17	(13)
¹ Includes donors whose organ may have been offered but are outsic	le of orgar	n specific	criteria					

Includes donors whose organ may have been offered but are outside of organ specific criteria





















Kidney Activity

Key messages

- The number of patients active on the kidney transplant list as at 31 March increased to 6,939
- The number of deceased kidney donors decreased by 6% to 1,361
- Kidney transplants from living donors increased by 6% to 964, while transplants from deceased donors decreased by 5% to 2,337
- 125 kidney transplants were made possible by the paired/pooled exchanges with the UK Living Kidney Sharing Scheme (31 2-transplant cycles and 22 3transplant cycles)
- There were 60 non-directed altruistic living kidney donors, leading to 99 patients benefitting from a living donor transplant

5.1 Overview

The number of deceased kidney donors decreased by 6% in 2024-2025 compared to 2023-2024 and the number of deceased donor kidney transplants decreased by 5%. There were 6,939 patients waiting for a kidney transplant at 31 March 2025, with the number of patients on the national list increasing as more patients are reactivated on the list following the height of the COVID-19 pandemic.

A summary of activity for deceased donor kidney transplants and the transplant list at year end for the last ten years is shown in **Figure 5.1**. The number of patients registered on the active transplant list at 31 March 2025 for a kidney only or multi-organ kidney transplant has increased by 31% since 31 March 2016. These registrations include patients suspended on the kidney waiting list but active on the liver waiting list for a combined liver and kidney transplant.

On 11 September 2019, a new National Kidney Offering Scheme was introduced to offer kidneys from both donors after brain death and donors after circulatory death. This is a change from the previous system where kidneys from donors after circulatory death were offered under a different scheme than kidneys from donors after brain death. The scheme has two tiers with priority going to patients who are the most difficult to match or who have waited over 7 years for a transplant.

Table 5.1 shows the number of deceased and living donor kidney transplants carried out in 2024-2025 at each centre. Donation figures for centres in London are not reported individually as they have shared designated areas and donor populations. Multi-organ transplants including a kidney are included in the table.

The total number of deceased kidney donors decreased to 1,361 in 2024-2025 from 1,447 in 2023-2024 and the number of transplants decreased from 2,448 to 2,337. The number of kidney donors after circulatory death decreased to 710 from 722 in 2023-2024 and the number of transplants from such donors decreased by 1% to 1,175.

Throughout this chapter, intestinal transplants involving a kidney are not included in the kidney transplant activity reported. Any kidneys retrieved and used for such transplants are however reported in the kidney donor activity. Intestinal transplant activity is reported in Chapter 9.







Table 5.1	Kidney dor by centre	nors and trar	nsplants, 1	April 2024 -	31 March 2	025 (2023-20	24) and tra	nsplant list a	at 31 March	2025 (2024) i	n the UK,	
Centre	C	Deceased kid	lney donors	S	De	eceased don	or transpla	nts		donor plants		ransplant ist
	DE	3D	DC	CD	D	BD	D	CD		planto	•	
Belfast	25	(33)	18	(31)	13	(15)	15	(34)	62	(56)	90	(74)
Birmingham	44	(29)	54	(51)	81	(110)	82	(72)	54	(46)	545	(450)
Bristol	31	(34)	38	(39)	39	(44)	40	(43)	47	(46)	258	(222)
Cambridge	16	(21)	52	(45)	52	(58)	111	(96)	22	(22)	260	(203)
Cardiff	29	(24)	25	(15)	36	(43)	52	(44)	48	(42)	192	(150)
Coventry ¹	18	(14)	13	(9)	21	(27)	29	(28)	18	(20)	166	(139)
Edinburgh	13	(21)	24	(20)	40	(40)	29	(34)	43	(48)	262	(231)
Glasgow	36	(48)	36	(38)	47	(53)	29	(46)	52	(46)	277	(256)
Leeds	35	(49)	43	(55)	63	(50)	69	(65)	53	(42)	432	(440)
Leicester	19	(19)	27	(15)	44	(59)	52	(38)	26	(25)	302	(292)
Liverpool	15	(26)	21	(11)	45	(47)	41	(39)	32	(27)	205	(191)
London ²	196	(189)	184	(214)	-	-	-	-	-	-	-	-
Great Ormond Street	-	-	-	-	3	(5)	2	(4)	21	(16)	23	(20)
Guy's	-	-	-	-	95	(121)	89	(99)	74	(93)	404	(389)
Royal Free	-	-	-	-	63	(36)	51	(64)	24	(22)	305	(286)
Royal London	-	-	-	-	58	(76)	67	(67)	32	(34)	384	(376)
St George's	-	-	-	-	52	(62)	58	(49)	41	(45)	272	(297)
WLRTC	-	-	-	-	69	(61)	59	(61)	37	(32)	399	(385)
Manchester	51	(62)	43	(50)	100	(108)	97	(105)	67	(64)	718	(586)
Newcastle	27	(31)	21	(25)	47	(55)	48	(31)	39	(48)	335	(290)
Nottingham	19	(20)	19	(20)	29	(36)	16	(21)	24	(15)	185	(153
Oxford ¹	19	(27)	25	(25)	84	(79)	77	(68)	62	(57)	406	(375
Plymouth	14	(24)	27	(19)	12	(16)	16	(16)	24	(16)	119	(108
Portsmouth	29	(35)	29	(23)	42	(39)	23	(33)	28	(32)	248	(205)
Sheffield	15	(19)	11	(17)	27	(20)	23	(31)	21	(15)	152	(132
TOTAL	651	(725)	710	(722)	1162	(1260)	1175	(1188)	964 ^{3,5}	(913 ^{4,6})	6939	(6250)

WLRTC - West London Renal and Transplant Centre ¹ As of 1 June 2016 Coventry and Oxford began working in partnership as a transplant network. ² Donor figures in this area cannot be linked to individual transplant centres due to shared retrieval areas. ³ Includes an additional 8 transplant performed at London, Cromwell Hospital, 4 transplant performed at London, London Bridge Hospital and 1 transplant performed at London, The London Clinic

⁴ Includes an additional 3 transplants performed at London, Cromwell Hospital and 1 transplants performed at London, London Bridge Hospital

⁵ Includes 1 domino donor

⁶ Includes 2 domino donors



5.2 Transplant list

The number of patients registered on the kidney or kidney and pancreas transplant list increased in the year: on 31 March 2025, 6,939 patients were registered as active, compared with 6,250 at the end of March 2024.

Of the 6,939 patients on the active transplant list at 31 March 2025, 344 required a kidney and pancreas/islet transplant (314 at 31 March 2024).

The outcome of patients registered on the UK kidney and kidney/pancreas transplant list at 1 April 2024, or subsequently registered during the financial year, is shown in **Table 5.2**. A total of 4,669 patients joined the kidney transplant list last year, while a further 226 joined the kidney/pancreas transplant list.

	Active and suspended patients New registrations in at 1 April 2024 2024-2025 ¹				τοτ	AL.
Outcome of patient at 31 March 2025	N	%	N	%	Ν	%
Kidney transplant list						
Remained active/suspended	6376	69	3633	78	10009	7
Transplanted .	2099	23	978	21	3077	2
Removed ²	477	5	32	1	509	
Died	280	3	26	1	306	
TOTAL	9232		4669		13901	
Kidney/pancreas						
transplant list						
Remained active/suspended	322	65	199	88	521	7
Transplanted	103	21	17	8	120	1
Removed ³	52	11	3	1	55	
Died	16	3	7	3	23	
TOTAL	493		226		719	

Table 5.3 shows the active transplant list in the UK at 31 March 2025 and 2024 by country/NHS region of patient's residence. In 2025, the overall kidney transplant list rate was 102.6 pmp with rates across NHS regions ranging from 75.3 pmp to 144.3 pmp.



Table 5.3 Active kidney by Country/ N				се
Country/ NHS region of residence		n ey transpl)25	•	pmp))24
North East and Yorkshire North West Midlands East of England London South East South West	924 781 1282 482 1280 725 533	(112.4) (103.9) (117.0)	866 662 1097 439	(105.4) (88.0) (100.1) (68.6) (139.3) (74.4) (78.5)
England Isle of Man Channel Islands	6007 12 10	(105.2) (150.0) (58.8)	5450 4 8	(95.4) (50.0) (47.1)
Wales	264	(84.3)	216	(69.0)
Scotland	533	(97.8)	485	(89.0)
Northern Ireland	98	(51.3)	78	(40.8)
TOTAL ¹	6939	(102.6)	6250	(92.5)
¹ Includes patients in 2025 (2024) of Ireland 2 (0); Overseas 3 (1)) residing in:	: Unspecified	UK 10 (8)); Republic

An indication of outcomes for adult patients listed for a kidney only transplant is summarised in **Figure 5.2**. This shows the proportion of patients transplanted or still waiting one, three and five years after joining the list. It also shows the proportion removed from the transplant list (typically because they become too unwell for transplant) and those dying while on the transplant list. Only 32% of patients are transplanted within one year, while five years after listing 73% of patients have received a transplant.

The median (average) waiting time for a kidney only transplant has increased from 489 days reported last year to 503 days for an adult patient and is shown by blood group in **Table 5.4** and patient ethnicity in **Table 5.5**. Because of the need to match donor and recipient blood groups and tissue types, waiting times to transplant differ according to patient blood groups and ethnicity due to differences between the donor pool and patients awaiting a kidney transplant. Note that these waiting times are not adjusted for other relevant factors which may be influential and which may differ across blood or ethnic groups.





Table 5.4	Median waiting time to kidney o for patients registered 1 April 20		
Blood group	Number of patients	Wa	iting time (days)
	registered	Median	95% Confidence interval
Adult	-		
0	5062	741	714 - 768
А	4002	269	256 - 282
В	1678	882	818 - 946
AB	498	149	123 - 175
TOTAL	11240	503	487 - 519
Paediatric			
0	142	526	390 - 662
А	87	229	153 - 305
В	50	670	541 - 799
AB	15	127	60 - 194
TOTAL	294	387	293 - 481



Table 5.5	Median waiting time to kidney of for patients registered 1 April 2		
Ethnicity	Number of patients	Wa	iting time (days)
_	registered	Median	95% Confidence interval
Adult	-		
White	7340	463	444 - 482
Asian	2073	592	551 - 633
Black	1227	560	512 - 608
Other	396	530	441 - 619
TOTAL ¹	11240	503	487 - 519
Paediatric			
White	158	292	215 - 369
Asian	80	676	583 - 769
Black	30	360	257 - 463
Other	17	729	594 - 864
TOTAL ²	294	387	293 - 481
	04 patients whose ethnicity was not r patients whose ethnicity was not rep	•	



5.3 Donor and organ supply

Of the 676 organ donors after brain death in the UK in 2024-2025, 651 (96%) were kidney donors. From these donors, 1,290 kidneys were retrieved. There were 710 kidney donors after circulatory death in 2024-2025. From these donors, 1,403 kidneys were retrieved. **Table 5.6** shows this activity by donor country/NHS region of donor's residence. No adjustments have been made for potential demographic differences in populations.

The overall rate for kidney donors after brain death is 9.6 pmp, with rates across NHS regions ranging from 7.3 to 10.6 pmp. The number of kidneys retrieved from donors after brain death in the UK is 19.1 pmp and varies from 14.4 to 20.8 pmp.

The overall rate for kidney donors after circulatory death is 10.5 pmp, with rates across NHS regions ranging from 5.7 to 16.6 pmp. The number of kidneys retrieved from donors after circulatory death is 20.8 pmp and varies from 11.4 to 32.7 pmp.

Table 5.6 Kidney donati 1 April 2024 - 3						s in the U	К,		
Country/ NHS region of residence		dney don 3D	ors (pm D(• •		idneys retrieved (pmp) DBD DCD			
North East and Yorkshire North West Midlands East of England London South East South West	77 55 95 55 69 97 61	(9.4) (7.3) (8.7) (8.6) (7.8) (10.3) (10.6)	77 48 110 106 51 98 86	(9.4) (6.4) (10.0) (16.6) (5.7) (10.4) (14.9)	152 108 189 110 137 193 120	(18.5) (14.4) (17.2) (17.2) (15.4) (20.6) (20.8)	153 96 213 209 101 194 170	(18.6) (12.8) (19.4) (32.7) (11.4) (20.7) (29.5)	
England Isle of Man Channel Islands	509 3 1	(8.9) (37.5) (5.9)	576 1 0	(10.1) (12.5) (0.0)	1009 6 2	(17.7) (75.0) (11.8)	1136 2 0	(19.9) (25.0) (0.0)	
Wales	39	(12.5)	28	(8.9)	77	(24.6)	55	(17.6)	
Scotland	45	(8.3)	54	(9.9)	89	(16.3)	108	(19.8)	
Northern Ireland	22	(11.5)	17	(8.9)	44	(23.0)	34	(17.8)	
TOTAL ¹	651	(9.6)	710	(10.5)	1290	(19.1)	1403	(20.8)	
¹ Includes 66 donors with unknow	n UK post	tcode (32 D	BD and 3	34 DCD)					



5.4 Transplants

The number of kidney only transplants by recipient country/NHS region of residence is shown in **Table 5.7**. No adjustments have been made for potential demographic differences in populations. The deceased donor transplant rate ranged from 25.3 to 50.8 pmp across NHS regions and overall was 32.7 pmp. The living donor transplant rate ranged from 9.5 to 17.2 pmp across NHS regions and overall was 13.9 pmp.

Table 5.7 Kidney only to 1 April 2024 -						, in the UI	Κ,			
Country/ NHS region	DE	3D	D	CD	TO	TAL	Liv	ing		
of residence	Ν	(pmp)	Ν	(pmp)	Ν	(pmp)	Ν	(pmp)		
North East and Yorkshire	128	(15.6)	138	(16.8)	266	(32.4)	115	(14.0)		
North West	115	(15.3)	117	(15.6)	232	(30.9)	88	(11.7)		
Midlands	179	(16.3)	180	(16.4)	359	(32.8)	123	(11.2)		
East of England	78	(12.2)	136	(21.3)	214	(33.4)	61	(9.5)		
London	233	(26.3)	218	(24.6)	451	(50.8)	111	(12.5)		
South East	133	(14.2)	135	(14.4)	268	(28.6)	132	(14.1)		
South West	70	(12.2)	76	(13.2)	146	(25.3)	99	(17.2)		
England Isle of Man	936 0	(16.4)	1000 0	(17.5)	1936 0	(33.9)	729 0	(12.8)		
Channel Islands	3	(17.6)	2	(11.8)	5	(29.4)	0	(0.0)		
Wales	42	(13.4)	61	(19.5)	103	(32.9)	62	(19.8)		
Scotland	78	(14.3)	56	(10.3)	134	(24.6)	95	(17.4)		
Northern Ireland	13	(6.8)	15	(7.9)	28	(14.7)	52	(27.2)		
TOTAL ^{1,2}	1074	(15.9)	1134	(16.8)	2208	(32.7)	939	(13.9)		
	Excludes 25 recipients of a living donor kidney who reside outside of the UK Includes 3 recipients with an unknown UK postcode (2 DBD and 1 living)									

The number of kidney only transplants at each transplant centre is shown in **Table 5.8** for adult patients only. Kidney transplants from donors after brain death include 2 en bloc kidneys and 15 double kidney transplants in 2024-2025 (1 and 16 in 2023-2024, respectively). Kidney transplants from donors after circulatory death include 3 en bloc and 12 double kidney transplants in 2024-2025 (2 and 19 in 2023-2024, respectively). This table excludes multi-organ transplants: 7 (10) kidney and liver, 113 (127) kidney and pancreas, and 9 (10) kidney and islets in 2024-2025 (2023-2024).



		2023	- 2024 Living			2024	- 2025 Living	
Fransplant centre	DBD	DCD	donor	TOTAL	DBD	DCD	donor	тоти
Belfast	14	34	53	101	13	15	61	8
Birmingham	101	71	40	212	75	79	49	20
Bristol	40	43	40	123	37	39	36	11
Cambridge	52	82	21	155	41	99	21	16
Cardiff	35	40	42	117	33	47	47	12
Coventry ¹	27	28	20	75	21	29	18	6
Edinburgh	32	30	48	110	30	25	43	g
Glasgow	53	45	43	141	45	28	47	12
Guy's	106	91	82	279	83	84	63	23
eeds	49	65	35	149	62	68	51	18
eicester	59	38	24	121	44	52	25	12
_iverpool	47	39	27	113	45	41	32	11
Manchester	85	91	53	229	74	90	58	22
Vewcastle	49	28	44	121	43	47	37	12
Nottingham	33	21	11	65	27	15	17	5
Dxford ¹	56	50	55	161	59	66	62	18
Plymouth	16	16	16	48	12	16	24	5
Portsmouth	39	33	32	104	42	23	28	9
Sheffield	20	31	15	66	27	23	21	7
St George's	62	49	45	156	52	58	41	15
The Royal Free	34	64	22	120	63	51	24	13
The Royal London	76	67	33	176	58	67	32	15
WLRTC	57	59	32	148	64	58	37	15
TOTAL	1142	1115	837 ²	3094 ²	1050	1120	887 ³	3057

² Includes 3 transplants performed at London Cromwell Hospital and 1 transplant performed at London Bridge Hospital

³ Includes 8 transplants performed at London Cromwell Hospital, 4 transplants performed at London Bridge Hospital and 1 transplant performed at The London Clinic

Living donor kidney only transplants increased by 6% to 964 in 2024-2025, representing 29% of the total kidney transplant programme. The total number of living donor adult transplants performed by each transplant centre is shown in **Table 5.9**. Also shown is the number as a percentage of patients listed at the end of the year, to indicate the size of the living donor programme relative to the centre's transplant list.

Most living donor transplants are 'directed'. This means that a kidney is donated to a specific recipient known to the donor - a close family member or friend. There has been a 4% increase in these transplants. In addition, there are a number of transplants from non-directed altruistic donors. Last year 60 such donors donated a kidney to a recipient, 55 of which were transplanted into an adult recipient. Of the 60 non-directed altruistic donors, 24 donated into a non-directed altruistic donor chain (9 2-transplant chains and 15 3-transplant chains), benefiting 39 patients in the UK Living Kidney Sharing Scheme. The kidneys from the paired donors of these recipients led to 24 adult patients on the deceased donor transplant list receiving a transplant. Thus 60 non-directed altruistic donors created chains benefiting 99 patients in total (94 adult and 5 paediatric patients).

When a potential living donor and recipient are biologically incompatible (blood group or tissue type), they may consider joining a list of others in the same situation with the hope that an exchange of kidneys between them can lead to a compatible living donor transplant. The scheme also includes compatible pairs that would like a better match. This type of exchange is known as paired donation and most exchanges are between two pairs (i.e. two donors and their respective incompatible recipients), or between three pairs. In 2024-2025, there were 125 paired living kidney donor transplants (123 adult and 2 paediatric recipients).

As a percentage of the number of patients on the active transplant list at 31 March 2025, the number of living donor adult transplants in the year was 13% nationally and ranged from 8% to 69% at individual transplant centres.

Table 5.9			ney transplants ive transplant li				
Transplant co	entre Dire	ected	Non-directed (altruistic) to waiting list	Paired/ pooled exchanges	Non- directed altruistic donor chain	TO N	TAL % list
Belfast		43	0	14	4	61	69
Birmingham		36	1	7	5	49	9
Bristol		31	1	3	1	36	14
Cambridge		16	0	3	2	21	8
Cardiff		39	0	6	2	47	24
Coventry ¹		11	3	2	2	18	11
Edinburgh		38	0	5	0	43	16
Glasgow		39	1	4	3	47	17
Guy's		48	4	6	5	63	16
Leeds		34	1	12	4	51	12
Leicester		21	1	0	3	25	8
Liverpool		20	1	8	3	32	16
Manchester		46	5	5	2	58	8
Newcastle		23	3	9	2	37	11
Nottingham		15	0	0	2	17	10
Oxford ¹		40	5	9	8	62	15
Plymouth		16	3	4	1	24	20
Portsmouth		16	0	7	5	28	11
Sheffield		16	0	3	2	21	14
St George's		24	2	11	4	41	15
The Royal Fre	e	21	3	0	0	24	8
The Royal Lor	ndon	24	3	3	2	32	8
WLRTC		34	0	2	1	37	9
TOTAL ²	e	64	37 ³	123	63	887	13

¹ As of 1 June 2016 Coventry and Oxford began working in partnership as a transplant network.

² Includes 1 directed transplant performed at The London Clinic, 8 at London Cromwell and 4 at London Bridge
 ³ Includes 1 domino donor transplants

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Non-directed altruistic donor kidneys are matched to a suitable recipient on a national basis and thus are rarely used in the transplant centre responsible for the 'work-up' of the donor. The number of nondirected donors according to donor hospital (rather than transplant hospital) and whether the altruistic donor donated as part of a chain within the UK Living Kidney Sharing Scheme or directly to the deceased donor list is shown in **Table 5.10**.

	directed altruist	tic kidney	y donors	in the U	K, 1 April 202	3 - 31 Ma	rch 2025,	I.
	Transplant	2023-2(Donatio			Transplant	2024-20 Donation		
Donor centre	list	Chain	Total	%	list	Chain	Total	%
Belfast	7	10	17	35	4	1	5	8
Birmingham	1	3	4	8	1	4	5	8
Bristol	0	1	1	2	4	0	4	7
Cambridge	1	0	1	2	2	1	3	5
Cardiff	0	0	0	0	2	0	2	3
Coventry ¹	1	0	1	2	0	0	0	0
Edinburgh	1	1	2	4	2	0	2	3
Glasgow	0	1	1	2	2	2	4	7
Guy's	0	3	3	6	1	3	4	7
Leeds	0	1	1	2	0	2	2	3
Leicester	0	0	0	0	1	0	1	2
Liverpool	1	2	3	6	1	0	1	2
Manchester	0	2	2	4	5	1	6	10
Newcastle	0	0	0	0	2	2	4	7
Nottingham	1	1	2	4	2	0	2	3
Oxford ¹	2	2	4	8	1	1	2	3
Plymouth	0	0	0	0	2	2	4	7
Portsmouth	0	1	1	2	2	1	3	5
Sheffield	0	0	0	0	1	1	2	3
St George's	0	1	1	2	0	0	0	0
The Royal Free	0	0	0	0	0	1	1	2
The Royal London	1	3	4	8	0	2	2	3
WLRTC	0	0	0	0	1	0	1	2
Total donors	16	32	48	100	36	24	60	100
WLRTC - West Lond	lon Renal and Ti	ransplant	Centre					

¹ As of 1 June 2016 Coventry and Oxford began working in partnership as a transplant network.



The number of deceased donor and living donor transplants in paediatric patients (<18 years) performed by each paediatric transplant centre is shown in **Table 5.11**. There were 77 living donor transplants and 38 deceased donor transplants in paediatric patients in 2024-2025. The paediatric transplant list has increased by 22% from 124 patients at 31 March 2024 to 151 at the end of March 2025.

Table 5.11Paediatric kidney only transplants in the UK, 1 April 2023 - 31 March 2025, by transplant centre												
		2023	-2024			2024	-2025					
			Living				Living					
Transplant centre	DBD	DCD	donor	TOTAL	DBD	DCD	donor	TOTAL				
Belfast	1	0	3	4	0	0	1	1				
Birmingham	9	1	6	16	5	3	5	13				
Bristol	4	0	6	10	2	1	11	14				
Glasgow	0	1	3	4	2	1	5	8				
Great Ormond Street	5	4	16	25	3	2	21	26				
Guy's	6	2	11	19	1	1	11	13				
Leeds	1	0	7	8	1	1	2	4				
Manchester	4	1	11	16	7	3	9	19				
Newcastle	0	1	4	5	0	0	2	2				
Nottingham	3	0	4	7	2	1	7	10				
Adult centres	0	0	5	5	1	1	3	5				
TOTAL	33	10	76 ¹	119	24	14	77 ²	115				
¹ Includes 2 paired livin ² Includes 2 paired livin												

At 31 March 2025, there were approximately 46,000 recipients with a functioning kidney transplant (including multi-organ transplants) being followed-up as reported to the UK Transplant Registry.

Rates of pre-emptive kidney only transplantation are shown in **Table 5.12**. Of the 3,172 kidney only transplant recipients in 2024-2025, dialysis status at time of transplant was reported for 2,872 (91%). Of these 2,872 transplants, 592 (21%) were carried out in pre-dialysis patients.

Pre-emptive transplants accounted for 33% of all paediatric kidney only transplants with reported dialysis status, compared with 20% of those in adults. Living donor transplants are more likely to be carried out before the need for dialysis than deceased donor transplants: 38% and 13% respectively. This is because a living donor transplant can often be carried out more quickly than a deceased donor kidney transplant as the latter often necessitates a long waiting time.



Table 5.12	Pre-emptive kidney only trai	nsplants in the UK, 1 Ap	ril 2024 - 31 March 2025
	Niumala au af	Niccosis an affinancian la mis	Developed and of wetlends

	Number of kidney only transplants	with know status at t	transplants /n dialysis transplant f all)	Percentage of patients transplanted prior to the need for dialysis (of those with known status)
Adult				,
Deceased donor transplant	2170	2000	(92.2)	(13.4)
Living donor transplant	887	778	(87.7)	(37.7)
Paediatric				
Deceased donor transplant	38	29	(76.3)	(13.8)
Living donor transplant	77	65	(84.4)	(41.5)

The length of time that elapses between a kidney being removed from the donor to its transplantation into the recipient is called total preservation time. Generally, the shorter this time, the more likely the kidney is to work immediately and the better the long-term outcome. The factors which determine this time include a) transportation of the kidney from the retrieval hospital to the hospital where the transplant is performed, b) the need to tissue type the donor and cross-match the donor and potential recipients, c) the occasional necessity of moving the kidney to another hospital if a transplant cannot go ahead, d) contacting and preparing the recipient for the transplant and e) access to the operating theatre. Median total preservation times are shown in addition to inter-quartile ranges in **Table 5.13**.

	preservation time for kid - 31 March 2025	ney only trar	nsplants in th	ne UK,			
	Number of kidney only	Median	Inter-quar	tile range ²			
	transplants	(hours)	Q1 .	Q3			
Adult	·	ζ γ					
DBD donor transplant	1050	12.5	10.0	16.9			
DCD donor transplant	1120	12.9	10.1	17.1			
Total	2170	12.7	10.1	17.0			
Paediatric DBD donor transplant DCD donor transplant Total	24 14 38	10.1 12.4 10.6	8.8 10.4 9.3	11.6 14.0 13.6			
TOTAL	2208	12.7	10.1	17.0			
 ¹ Not all total preservation times are reported ² 25% of times are shorter than Q1, 25% are longer than Q3 							



Kidneys from donors after brain death and donors after circulatory death are allocated on the basis of a national Kidney Offering Scheme which incorporates HLA matching between donor and recipient. These HLA matches are based on four levels which are described in Table 5.14. Prior to 11 September 2019 patients with 000 HLA-A, B, DR mismatch (Level 1) were prioritised in the scheme, whereas kidneys were rarely transplanted as a Level 4 mismatch. Under the current scheme, Level 4 mismatches are only permitted for difficult to match patients. More information about the allocation scheme can be found at <u>www.odt.nhs.uk</u>. Table 5.15 gives the HLA mismatch group for adult and paediatric patients for DBD donor transplants but also for DCD and living donor transplants. For living donor transplantation, many transplants have a poorer HLA match between donor and recipient than deceased donor transplantation. Very often there is no genetic relationship between donor and recipient.

Table 5	.14 HLA mismatch groups	
Level	HLA mismatch summary	HLA mismatch combinations included
1 2 3 4	000 [0 DR and 0/1 B] [0 DR and 2 B] or [1 DR and 0/1 B] [1 DR and 2 B] or [2 DR]	000 100, 010, 110, 200, 210, 001, 101, 201 020, 120, 220, 011, 111, 211 021, 121, 221, 002, 102, 202, 012, 112, 212, 022, 122, 222

	natching for F I 2024 - 31 Ma		y transplar	nts in the l	JK,	
	DE	3D	DC	D	Livi	ing
	Ν	%	Ν	%	Ν	%
Adult						
Level 1 (Best match)	25	(2)	28	(3)	48	(8)
Level 2	180	(17)	162	(14)	73	(12)
Level 3	414	(39)	453	(40)	269	(44)
Level 4	431	(41)	477	(43)	221	(36)
Not reported	0	-	0	-	276	-

(4)

(71)

(21)

(4)

0

6

7

1

0

(0)

(43)

(50)

(7)

4

11

35

24

3

1

17

5

1

0

Paediatric

Level 2

Level 3

Level 4

Not reported

Level 1 (Best match)

(8)

(21)

(66)

(6)



Often potential living donors and their recipients are HLA or blood group incompatible. Increasingly it is possible to proceed with transplantation across the incompatibilities with appropriate management. The number of HLA and ABO blood group incompatible transplants over the last ten years is shown in **Figure 5.3**. Of the 268 HLA incompatible (HLAi) transplants performed; 127 were deceased donor transplants and 141 were living donor transplants, whilst the vast majority of ABO incompatible (ABOi) transplants were living donor transplants (343 of 346). Due to the nature of reporting HLA incompatible transplants, the numbers presented may be subject to change over time.





5.5 Demographic characteristics

The age group, sex, ethnicity and blood group of deceased donors, transplant recipients and patients on the transplant list are shown in **Table 5.16** and for living donors and transplants in **Table 5.17**. Note that all percentages quoted are based only on data where relevant information was available.

Table 5.16	Demographic ch recipients, 1 Api						
		Doi	nors		splant		ransplant
		NI	(0/)	-	pients	-	atients
		Ν	(%)	Ν	(%)	Ν	(%)
Age (years)	0-17	32	(2)	38	(2)	151	(2)
0,0,7	18-34	161	(12)	270	(12)	790	(11)
	35-49	315	(23)	591	(25)	1952	(28)
	50-59	345	(25)	633	(27)	1986	(29)
	60-69	320	(24)	582	(25)	1567	(23)
	70+	188	(14)	223	(10)	493	(7)
	Mean (SD)	53	(16)	52	(14)	51	(14)
Sex	Male	771	(57)	1425	(61)	4273	(62)
	Female	590	(43)	912	(39)	2641	(38)
	Unknown	-	-	0	-	25	-
Ethnicity	White	1217	(93)	1408	(63)	4198	(64)
	Asian	49	(4)	470	(21)	1333	(20)
	Black	24	(2)	297	(13)	804	(12)
	Other	13	(1)	70	(3)	193	(3)
	Unknown	58	-	92	-	411	-
Blood group	0	622	(46)	901	(39)	3736	(54)
	А	556	(41)	941	(40)	1794	(26)
	В	128	(9)	337	(14)	1290	(19)
	AB	50	(4)	158	(7)	119	(2)
	Unknown	5	-	-	-	-	-
Graft number	First graft	-	-	1927	(82)	5827	(84)
	Re-graft	-	-	410	(18)	1112	(16)
TOTAL		1361	(100)	2337	(100)	6939	(100)



Table 5.17	Demographic characteristics of living kidney donors and transplant recipients, 1 April 2024 - 31 March 2025						
		Doi	nors	Transplant	recipients		
		Ν	(%)	N	(%)		
Age (years)	0-17	0	(0)	77	(8)		
	18-34	155	(16)	225	(23)		
	35-49	353	(37)	244	(25)		
	50-59	256	(27)	204	(21)		
	60-69	166	(17)	164	(17)		
	70+	34	(4)	50	` (5)́		
	Mean (SD)	48	(12)	44	(18)		
Sex	Male	459	(48)	570	(59)		
	Female	505	(52)	388	(40)́		
	Unknown	-	-	6	-		
Ethnicity	White	835	(87)	730	(82)		
_	Asian	74	(8)	81	(9)		
	Black	25	(3)	44	(5)		
	Other	30	(3)	33	(4)		
	Unknown	0	-	76	-		
Blood group	0	580	(60)	413	(43)		
	А	265	(27)	370	(38)		
	В	105	(11)	143	(15)		
	AB	14	` (1)	38	(4)		
	Unknown	0	-	-	-		
Graft number	First graft	-	-	850	(88)		
	Re-graft	-	-	114	(12)		
TOTAL		964	(100)	964	(100)		





Pancreas Activity

Key messages

- The number of patients waiting on the pancreas transplant list increased by 11% during the year, to 370 at 31 March 2025
- The number of pancreas donors after brain death fell by 12% to 206, while transplants from donors after brain death decreased by 3% to 96
- The number of pancreas donors after circulatory death decreased by 11% to 103, while transplants from donors after circulatory death decreased by 23% to 46
- 23 islet transplants were made possible by the pancreas islet transplant programme

6.1 Overview

The number of patients registered on the active transplant list for a pancreas, simultaneous pancreas/kidney (SPK), simultaneous islet/kidney (SIK), or islet transplant has increased over the last ten years from 227 patients at 31 March 2016 to 370 patients at 31 March 2025. The number of pancreas donors fell from 347 to 309 in the last year. The number of transplants has decreased in the last 10 years to 142 transplants in 2024-2025. A summary of activity for deceased donor pancreas transplants and the transplant list for 1 April 2015 - 31 March 2025 is shown in **Figure 6.1**.

On 11 September 2019, an additional top tier of patients was introduced to the National Pancreas Offering Scheme. Patients in this top tier are either categorised as very difficult to HLA match to a donor or have been waiting for more than 3 years for a pancreas or islet transplant. All other patients appear in subsequent tiers and are prioritised according to a point system based on a range of clinical factors. A score is calculated for every potentially suitable patient and the pancreas is allocated preferentially to the patient with the most points after those in the top tier. Pancreases from donors after brain death and donors after circulatory death are allocated through this scheme. Patients listed for a vascularised pancreas or islet transplant are prioritised through one combined national transplant list.

Throughout this chapter, intestinal transplants involving a pancreas are not included in the pancreas transplant activity reported. Any pancreases retrieved and used for such transplants are however included in the pancreas donor activity. In 2024-2025 there were 15 intestinal transplants including a pancreas. Intestinal transplant activity is reported in Chapter 9.





6.2 Transplant list

Table 6.1 shows the number of patients on the active transplant lists at 31 March 2025 by centre.The number of patients registered on the pancreas transplant list increased by 11% in the year: on31 March 2025, 370 patients were registered active, compared with 334 at the end of March 2024.

Of the 370 patients on the active transplant list at 31 March 2025, 316 (85%) required a SPK transplant (297 at 31 March 2024), 7 (2%) patients required a pancreas only transplant (5 at 31 March 2024) and 47 (13%) were registered for a pancreas islet transplant (including 28 for a SIK transplant).

The outcome of patients registered on the UK pancreas transplant list at 1 April 2024, or subsequently registered during the financial year, is shown in **Table 6.2**. Thirteen patients joined the pancreas transplant list while 226 joined the list for a kidney and pancreas.

Patients listed for a routine islet transplant are generally waiting for their first islet graft. The majority of islet transplant recipients are likely to require more than one graft to complete their treatment. To optimise transplant outcome the follow-up graft should be performed within six to twelve months of the first. Patients requiring follow-up grafts are priority listed.

Table 6.1	Patients by cent		pancre	as trans	plant lis	ts at 31	March	n 2025 (2	2024) i	n the U	IK,	
Centre		lney/ creas	Kidn	ey/islet	Active Panc alo			Isl			TO [.]	TAL
							Ro	utine	Pric	ority		
Cambridge	26	(23)	0	(0)	1	(0)	0	(0)	0	(0)	27	(23)
Cardiff	16	(13)	0	(0)	0 0	(0)	Ő	(0)	Õ	(0)	16	(13)
Edinburgh	37	(42)	8	(5)	0	(0)	4	(5)	1	(2)	50	(54)
Guy's	35	(41)	0	(O)	0	(O)	0	(O)	0	(0)	35	(41)
Manchester	111	(90)	14	(7)	4	(3)	4	(1)	2	(2)	135	(103)
Newcastle	17	(14)	0	(0)	0	(2)	4	(4)	1	(0)	22	(20)
Oxford	66	(66)	6	(5)	2	(0)	3	(1)	0	(0)	77	(72)
WLRTC	8	(8)	0	(0)	0	(0)	0	(0)	0	(0)	8	(8)
TOTAL	316	(297)	28	(17)	7	(5)	15	(11)	4	(4)	370	(334)



	Active suspended at 1 April	patients	New registr 2024-20		ΤΟΤΑ	AL.
Outcome of patient at 31 March 2025	N	%	N	%	Ν	%
Pancreas transplant list						
Remained active/suspended	48	81	7	54	55	76
Transplanted	1	2	5	38	6	
Removed	10	17	1	8	11	15
TOTAL	59		13		72	
Kidney/pancreas						
transplant list						
Remained active/suspended	322	65	199	88	521	72
Transplanted	103	21	17	8	120	17
Removed ²	52	11	3	1	55	8
Died	16	3	7	3	23	3
TOTAL	493		226		719	

The active pancreas transplant list rates by country/NHS region of patient's residence are shown in **Table 6.3**. At 31 March 2025, the overall transplant list rate was 5.5 pmp and across NHS regions ranged from 3.0 to 9.2 pmp.



NHS region of patient residence								
Country/ NHS region of residence	Pancreas 202	s/Islet tran 25	splant lis 202					
North East and Yorkshire North West Midlands East of England London South East South West	57 69 48 24 40 28 22	(6.9) (9.2) (4.4) (3.8) (4.5) (3.0) (3.8)	47 47 41 22 39 36 22	$\begin{array}{c} (5.7) \\ (6.3) \\ (3.7) \\ (3.4) \\ (4.4) \\ (3.8) \\ (3.8) \end{array}$				
England Isle of Man Channel Islands	288 0 0	(5.0) (0.0) (0.0)	254 0 1	(4.4) (0.0) (5.9)				
Wales	31	(9.9)	24	(7.7)				
Scotland	43	(7.9)	51	(9.4)				
Northern Ireland	7	(3.7)	3	(1.6)				
TOTAL ¹	370	(5.5)	334	(4.9)				
¹ Includes patients in 2025 (2024) residing in: l	Jnspecified	UK 1 (1)					

Table 6.3Active pancreas, kidney/pancreas, and islet
transplant list at 31 March, by Country/
NHS region of patient residence

An indication of longer-term outcomes for patients listed for a pancreas or kidney/pancreas transplant is shown in **Figure 6.2**. This shows the proportion of patients transplanted or still waiting six months, one year, two years, and three years after joining the list. It also shows the proportion removed from the transplant list (typically because they become too unwell for transplant) and those dying while on the transplant list. 19% of patients are transplanted within one year, while three years after listing 54% of patients have received a transplant. The median (average) waiting time for a pancreas transplant is 478 days and is shown by blood group in **Table 6.4** and ethnicity in **Table 6.5**. Note that these waiting times are not adjusted for other relevant factors which may be influential and which may differ across blood or ethnic groups.





Table 6.4	Median waiting time to pancreas only and kidney/pancreas transplant in the UK, for patients registered 1 April 2019 - 31 March 2023								
Blood group	Number of patients	Wai	ting time (days)						
	registered	Median	95% Confidence interval						
Adult	-								
0	383	820	705 - 935						
А	340	377	329 - 425						
В	100	436	356 - 516						
AB	32	148	108 - 188						
TOTAL	855	478	445 - 511						

Table 6.5	Median waiting time to pancrea in the UK, for patients registere							
Ethnicity	Number of patients	Wa	iting time (days)					
	registered	Median	95% Confidence interval					
Adult								
White	736	487	443 - 531					
Asian	54	464	246 - 682					
Black	40	387	149 - 625					
Other	15	418	237 - 599					
TOTAL ¹	855	478	445 - 511					
¹ Includes 10	¹ Includes 10 recipients with unknown ethnicity							



6.3 Donor and organ supply

Of the 727 organ donors after brain death in the UK in 2024-2025, 206 (28%) donated a pancreas. There were 103 pancreas donors after circulatory death in 2024-2025. **Table 6.6** shows this activity by country/NHS region of the donor's residence. No adjustments have been made for potential demographic differences in populations.

The overall rate for pancreas donors after brain death is 3.0 pmp, with rates ranging from 1.7 to 4.0 pmp across NHS regions and for donors after circulatory death is 1.5 pmp, with rates ranging from 0.7 to 2.7 pmp across NHS regions.

Table 6.6Pancreas donation rates for deceased donors in the UK, 1 April 2024 - 31 March 2025, by Country/ NHS region										
Country/ NHS region of residence	D	BD	TOTAL							
North East and Yorkshire North West Midlands East of England London South East South West	25 13 40 13 16 32 23	(3.0) (1.7) (3.6) (2.0) (1.8) (3.4) (4.0)	16 8 11 17 6 12 13	(1.9) (1.1) (1.0) (2.7) (0.7) (1.3) (2.3)	41 21 51 30 22 44 36	$\begin{array}{c} (5.0) \\ (2.8) \\ (4.7) \\ (4.7) \\ (2.5) \\ (4.7) \\ (6.3) \end{array}$				
England Isle of Man Channel Islands	162 1 1	(2.8) (12.5) (5.9)	83 1 0	(1.5) (12.5) (0.0)	245 2 1	(4.3) (25.0) (5.9)				
Wales	11	(3.5)	2	(0.6)	13	(4.2)				
Scotland	16	(2.9)	7	(1.3)	23	(4.2)				
Northern Ireland	5	(2.6)	2	(1.0)	7	(3.7)				
TOTAL ¹	206	(3.0)	103	(1.5)	309	(4.6)				
¹ Includes 18 donors with unknown UK postcode (10 DBD and 8 DCD)										



6.4 Transplants

The number of pancreas and islet transplants by recipient country/NHS region of residence is shown in **Table 6.7**. No adjustments have been made for potential demographic differences in populations. For donors after brain death, the transplant rate ranged from 1.0 to 1.9 pmp across NHS regions and overall was 1.4 pmp. For donors after circulatory death, the overall rate was 0.7 pmp and ranged from 0.3 to 0.9 pmp across NHS regions.

Table 6.7 Pancreas and i 1 April 2024 - 3					omp), in the	e UK,			
Country/ NHS region	D	BD	D	CD	TOTAL				
of residence	N	(pmp)	N	(pmp)	N	(pmp)			
North East and Yorkshire	9	(1.1)	6	(0.7)	15	(1.8)			
North West	13	(1.7)	2	(0.3)	15	(2.0)			
Midlands	12	(1.1)	10	(0.9)	22	(2.0)			
East of England	12	(1.9)	6	(0.9)	18	(2.8)			
London	11	(1.2)	6	(0.7)	17	(1.9)			
South East	12	(1.3)	4	(0.4)	16	(1.7)			
South West	6	(1.0)	4	(0.7)	10	(1.7)			
England	75	(1.3)	38	(0.7)	113	(2.0)			
Isle of Man	0	(0.0)	0	(0.0)	0	(0.0)			
Channel Islands	0	(0.0)	0	(0.0)	0	(0.0)			
Wales	4	(1.3)	2	(0.6)	6	(1.9)			
Scotland	16	(2.9)	6	(1.1)	22	(4.0)			
Northern Ireland	0	(0.0)	0	(0.0)	0	(0.0)			
TOTAL ¹	96	(1.4)	46	(0.7)	142	(2.1)			
¹ Includes 1 DBD recipient with unknown UK postcode									

There were 142 deceased donor pancreas and islet transplants in 2024-2025, less than the 160 transplants performed in 2023-2024. Of these 142, 113 (80%) were SPK transplants, 6 (4%) were pancreas only transplants (pancreas alone (PTA) or pancreas after kidney (PAK)) and 23 (16%) were islet transplants (including 9 SIK). The number of transplants performed at each centre is shown in **Table 6.8** by transplant type and **Table 6.9** by transplant and donor type. Note that King's College only perform islet transplants. Cambridge, Guy's, WLRTC and Cardiff only perform pancreas transplants.



The length of time that elapses between a pancreas being removed from the donor to its transplantation into the recipient is called the total preservation time. Generally, the shorter this time, the more likely the pancreas is to work immediately and the better the long-term outcome. In 2024-2025, the median time for a DBD donor whole pancreas transplant is 11.6 hours (Inter-Quartile (IQ) range 9.1 - 14.1) and for a DCD donor transplant is 10.9 hours (IQ range 8.6 - 13.4) and overall is 10.9 hours (IQ range 9.1 - 13.4).

At 31 March 2025, there were approximately 2,200 recipients with a functioning pancreas transplant (including multi-organ transplants) being followed-up, as reported to the UK Transplant Registry.

					Tr	ansplant	t type						
Centre	S	PK	K SIK			PTA		PAK		Isle		et	
									Rou	itine	Pric	ority	
Cambridge	21	(18)	-	-	0	(0)	0	(1)	-	-	-	-	
Cardiff	7	(12)	-	-	0	(0)	0	(0)	-	-	-	-	
Edinburgh	10	(8)	3	(4)	0	(0)	0	(0)	4	(4)	5	(2)	
Guy's	12	(10)	-	-	0	(0)	0	(0)	-	-	-	-	
King's College	-	-	0	(0)	-	-	-	-	0	(0)	0	(0)	
Manchester	20	(27)	3	(5)	1	(0)	0	(3)	0	(1)	2	(1)	
Newcastle	4	(7)	0	(0)	0	(1)	2	(0)	1	(0)	0	(1)	
Oxford	33	(40)	3	(1)	2	(4)	0	(2)	1	(2)	1	(0)	
WLRTC	6	(6)	-	-	0	(0)	1	(0)	-	-	-	-	
TOTAL	113	(128)	9	(10)	3	(5)	3	(6)	6	(7)	8	(4)	

Table 6.9 Pa	ancreas ar	nd islet tr	ransplan	ts, 1 Apr	il 2024 - 1	31 March	n 2025 by	/ centre a	and don	or type
Transplant and donor type										
Centre	SI	ΡK	S	IK	. PTA	/PAK	ls	let	TO	TAL
	DBD	DCD	DBD	DCD	DBD	DCD	DBD	DCD	DBD	DCD
Cambridge	11	10	-	-	0	0	-	-	11	10
Cardiff	3	4	-	-	0	0	-	-	3	4
Edinburgh	8	2	1	2	0	0	7	2	16	6
Guy's	9	3	-	-	0	0	-	-	9	3
King's College	-	-	0	0	-	-	0	0	0	0
Manchester	16	4	3	0	1	0	1	1	21	5
Newcastle	3	1	0	0	1	1	0	1	4	3
Oxford	22	11	3	0	1	1	1	1	27	13
WLRTC	5	1	-	-	0	1	-	-	5	2
TOTAL	77	36	7	2	3	3	9	5	96	46
WLRTC - West London Renal and Transplant Centre										

6.5 Demographic characteristics

The age group, sex, ethnicity and blood group of deceased donors, transplant recipients and patients on the transplant list are shown in **Table 6.10**.

Table 6.10Demographic characteristics of deceased pancreas donors and transplant recipients, 1 April 2024 - 31 March 2025, and transplant list patients at 31 March										
		Donors			splant	Active transplant list patients				
		Ν	(%)	N N	ients (%)	list pa N	(%)			
Age	0-17 18-34 35-49 50-59 60-69 Mean (SD)	20 86 132 69 2 39	(6) (28) (43) (22) (1) (13)	0 35 72 32 3 42	(25) (51) (23) (2) (9)	0 85 201 73 11 42	(23) (54) (20) (3) (9)			
Sex	Male Female Unknown	180 129	(58) (42) -	70 72	(49) (51) -	197 170 3	(54) (46) -			
Ethnicity	White Asian Black Other Unknown	272 15 5 5 12	(90) (5) (2) (2)	117 8 6 4 7	(85) (6) (4) (3)	294 19 24 5 28	(80) (5) (7) (1)			
Blood group	O A B AB Unknown	116 144 40 8 1	(38) (47) (13) (3)	47 67 19 9	(33) (47) (13) (6)	225 102 42 1	(61) (28) (11) (0)			
Graft number	First graft Re-graft		-	123 19	(87) (13)	338 32	(91) (9)			
TOTAL		309	(100)	142	(100)	370	(100)			





Cardiothoracic Activity

Key messages

- At 31 March 2025, there were 308 patients on the active heart transplant list, 183 on the lung list and 11 on the heart-lung list
- Of the 676 organ donors after brain death during 2024-2025, 144 (21%) donated their heart and 98 (14%) donated at least one lung
- The number of heart transplants decreased by 16% to 200; 47% of these were urgent heart transplants, 33% were super-urgent, and 20% were non-urgent
- The number of lung and heart-lung transplants increased by 8% this year to 151; 32% of these were urgent lung transplants, 2% were super-urgent, and 64% were non-urgent.
- There were 57 DCD heart transplants in 2024-2025, 8 less than the previous year.

7.1 Overview

Last year the number of heart transplants decreased by 16% to 200 compared with 2023-2024, and the number of lung or heart-lung transplants increased by 8% to 151. There was a decrease in the lung transplant list and an increase in the heart transplant list compared with 2023-2024. The number of patients active on the heart transplant list at year end has increased by 24% since 2016, while the number of patients active on the lung or heart-lung transplant list has fallen by 41% since 2016.

A summary of the deceased donor cardiothoracic activity from 1 April 2015 to 31 March 2025 is shown in **Figure 7.1** for heart activity and **Figure 7.2** for lung activity. Donors who donate both heart and lung(s) are included in both figures, but heart-lung block transplants and patients active on the transplant list for a heart-lung block are only included in **Figure 7.2**.








7.2 Transplant list

Table 7.1 shows the number of patients on the active transplant lists at 31 March 2025 by centre. There were five patients waiting on the super-urgent heart transplant list, and 48 patients waiting on the urgent heart transplant list. There were no patients waiting on the super-urgent lung transplant list, and 25 patients waiting on the urgent lung transplant list. Overall, Newcastle and Harefield had the largest cardiothoracic transplant waiting lists on 31 March 2025.

							Acti	ve tran	splant	lists						
Centre	Non-	urgent		eart gent	Super-	urgent	Hear		-	urgent	Lu Urg	ng ent	Super-	urgent	то	TAL
Adult																
Birmingham	43	(34)	2	(5)	1	(3)	1	(0)	35	(37)	7	(0)	0	(0)	89	(79
Glasgow	18	(13)	4	(3)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	22	(16
Great Ormond Street	1	(0)	0	(1)	0	(0)	1	(0)	0	(0)	0	(1)	0	(0)	2	(2
Harefield	45	(47)	7	(3)	1	(1)	0	(0)	40	(54)	5	(1)	0	(0)	98	(106
Manchester	28	(34)	2	(1)	0	(1)	1	(2)	38	(41)	3	(1)	0	(0)	72	. (80
Newcastle	58	(56)	14	(9)	1	(1)	4	(2)	26	(91)	7	(3)	0	(0)	110	(162
Papworth	41	(40)	2	(3)	2	(0)	4	(2)	13	(28)	1	(0)	0	(0)	63	`(7 3
TOTAL	234	(224)	31	(25)	5	(6)	11	(6)	152	(251)	23	(6)	0	(0)	456	(518
Paediatric																
Great Ormond Street	7	(12)	8	(5)	0	(0)	0	(1)	6	(7)	2	(1)	0	(0)	23	(26
Newcastle	14	(12)	9	(5)	0	(0)	0	(1)	0	(2)	0	(O)	0	(0)	23	(20
TOTAL	21	(24)	17	(10)	0	(0)	0	(2)	6	(9)	2	(1)	0	(0)	46	(46

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During 2024-2025, there were 341 registrations onto the heart transplant list, 7 registrations onto the heart-lung transplant list and 189 onto the lung transplant list. Registration outcomes as at 31 March 2025 for patients on the list at 1 April 2024 and those joining the list during the year are shown in **Table 7.2**.

	Active suspended at 1 April	patients	New registra 2024-20		ΤΟΤΑ	AL.
Outcome of patient at 31 March 2025	N	%	N	%	Ν	%
Heart transplant list						
Remained active/suspended	223	62	156	46	379	5
Transplanted	57	16	138	40	195	2
Removed	70	19	35	10	105	1
Died	11	3	12	4	23	:
TOTAL	361		341		702	
Heart-lung transplant list						
Remained active/suspended	6	55	6	86	12	6
Transplanted ²	2	18	0	0	2	1
Removed	2	18	0	0	2	1
Died	1	9	1	14	2	1
TOTAL	11		7		18	
Lung transplant list						
Remained active/suspended	111	45	83	44	194	4
Transplanted	65	26	83	44	148	3
Removed	48	20	13	7	61	1
Died	22	9	10	5	32	
TOTAL	246		189		435	

Table 7.3 shows the transplant list rates per million population by country/NHS region of patient's residence. The overall UK heart transplant list rate at 31 March 2025 was 4.6 pmp and ranged from 3.0 to 5.0 across NHS regions. The overall UK lung transplant list rate was 2.9 pmp and ranged from 1.6 to 4.0 across NHS regions.



Table 7.3 Active cardio of patient res		transplan	t list at 3	31 March,	by coun	try/NHS r	region	
Country/ NHS region of residence		rt transpl a 25		pmp))24		g transpla 25	••	omp) 24
North East and Yorkshire North West Midlands East of England London South East South West	41 33 52 19 34 45 20	(5.0) (4.4) (4.7) (3.0) (3.8) (4.8) (3.5)	42 29 49 18 27 43 23	$\begin{array}{c} (5.1) \\ (3.9) \\ (4.5) \\ (2.8) \\ (3.0) \\ (4.6) \\ (4.0) \end{array}$	18 30 42 10 21 15 17	(2.2) (4.0) (3.8) (1.6) (2.4) (1.6) (3.0)	55 36 39 14 27 24 21	(6.7) (4.8) (3.6) (2.2) (3.0) (2.6) (3.6)
England Isle of Man Channel Islands	244 0 0	(4.3) (0.0) (0.0)	231 0 0	(4.0) (0.0) (0.0)	153 0 1	(2.7) (0.0) (5.9)	216 0 0	(3.8) (0.0) (0.0)
Wales	14	(4.5)	13	(4.2)	16	(5.1)	10	(3.2)
Scotland	30	(5.5)	24	(4.4)	16	(2.9)	33	(6.1)
Northern Ireland	18	(9.4)	19	(9.9)	8	(4.2)	15	(7.9)
TOTAL ^{1,2}	308	(4.6)	289	(4.3)	194	(2.9)	275	(4.1)
¹ Includes heart patients in 2025 ² Includes lung patients in 2025 (epublic of	Ireland 1 (2)	

The transplant list outcomes for adult patients listed for a cardiothoracic organ transplant between 1 April 2021 and 31 March 2022 are summarised in **Figure 7.3**, **Figure 7.4** and **Figure 7.5**, for nonurgent heart, urgent heart and non-urgent lung registrations, respectively. These show the proportion of patients transplanted, still waiting, removed and those who died within six months, one year, two years and three years after joining the non-urgent or urgent heart list or the lung list, respectively. Within six months of listing, 10% of non-urgent heart patients were transplanted while 3% had died, compared with 60% transplanted and 2% died for urgent heart patients. Of those listed for a nonurgent lung transplant, 17% were transplanted within six months, rising to 43% after three years, however at three years, 16% had died. The patients removed from these lists may have subsequently died.

The post-registration outcomes of super-urgent heart, super-urgent lung and urgent lung registrations are not presented due to the small number of patients who start off on these lists.











Table 7.4 and **Table 7.5** show the median waiting time to cardiothoracic organ transplant by blood group and ethnicity of patient, respectively, for patients registered between 1 April 2016 and 31 March 2022. The overall median waiting time to non-urgent heart transplantation for adult patients who were never on the urgent or super-urgent list was 6 years. For adult patients who had been on the urgent list, the overall median time on the urgent list before transplant was 50 days. For adult patients who had been on the super-urgent list ('ever super-urgent'), the overall median time on the super-urgent list before transplant was 14 days.

The overall median waiting time to non-urgent lung transplantation for adult patients who were never on the urgent or super-urgent list, was 584 days, but for blood group O patients was longer, at 840 days. The overall median time to urgent adult lung transplant was 23 days. Median waiting time is not calculated for adult super-urgent lung patients due to the small number of registrations.

For paediatric heart patients, the median waiting time was 754 days for non-urgent registrations and 125 days for urgent registrations (this is not broken down by blood group or ethnicity and is not presented for super-urgent patients due to low numbers). The overall median waiting time to non-urgent lung transplantation for paediatric patients who were never on the urgent or super-urgent list, was 225 days. Median waiting time is not calculated for paediatric urgent or super-urgent lung patients due to the small number of registrations. Note that these waiting time estimates are not adjusted for other relevant factors which may be influential and which may differ across blood or ethnic groups.



for patients regi	stered 1 April 2016 - 3 ⁴	March 2022	
Blood group	Number of patients		aiting time (days)
	registered	Median	95% Confidence interval
Adult non-urgent heart ¹			
0	225	-	-
А	254	1258	713 - 1803
В	63	1269	419 - 2119
AB	17	403	0 - 960
TOTAL	559	2193	-
Adult urgent heart ²			
0	304	70	54 - 86
A	294	35	28 - 42
В	82	64	42 - 86
AB	31	30	18 - 42
TOTAL	711	50	43 - 57
Adult super-urgent heart	227	14	11 - 17
Paediatric non-urgent heart ¹	61	754	399 - 1109
Paediatric urgent heart ²	209	125	85 - 165
Adult non-urgent lung ¹			
0	549	840	645 - 1035
A	501	357	268 - 446
В	114	640	305 - 975
AB	45	267	96 - 438
TOTAL	1209	584	518 - 650
Adult urgent lung ²	188	23	16 - 30
Paediatric non-urgent lung ¹	23	225	33 - 417

Median waiting time to cardiothoracic transplant in the UK,

24 14

istored 1 April 2016

- Median and/or 95% confidence interval cannot be estimated due to insufficient numbers of patients ¹ Excludes patients that were moved to the urgent/super-urgent lists ² Excludes patients that were moved to the super-urgent list

Table 7.4



for patients regi	stered 1 April 2016 - 3'	i March 2022	
Ethnicity	Number of patients		aiting time (days)
	registered	Median	95% Confidence interval
Adult non-urgent heart ¹			
White	477	1828	1285 - 2371
Asian	46	-	-
Black	16	-	-
Other	10	1146	0 - 2439
TOTAL ³	559	2193	-
Adult urgent heart ²			
White	585	51	44 - 58
Asian	71	53	30 - 76
Black	37	32	0 - 68
Other	10	59	11 - 107
TOTAL⁴	711	50	43 - 57
Adult super-urgent heart	227	14	11 - 17
Paediatric non-urgent heart ¹	61	754	399 - 1109
Paediatric urgent heart	209	125	85 - 165
Adult non-urgent lung ¹			
White	1114	566	496 - 636
Asian	60	-	-
Black	23	1171	687 - 1655
Other	9	-	-
TOTAL⁵	1209	584	518 - 650
Adult urgent lung ²	188	23	16 - 30
Paediatric non-urgent lung ¹	23	225	33 - 417

Table 7.5 Median waiting time to cardiothoracic transplant in the UK, for patients registered 1 April 2016 - 31 March 2022

- Median and/or 95% confidence interval cannot be estimated due to insufficient numbers of patients transplanted

¹ Excludes patients that were moved to the urgent/super-urgent lists

² Excludes patients that were moved to the algentisuper algentistication and the super-urgent list
 ³ Includes 10 patients whose ethnicity was not reported
 ⁴ Includes 8 patients whose ethnicity was not reported

⁵ Includes 3 patients whose ethnicity was not reported



7.3 Donor and organ supply

Table 7.6 shows the number of deceased organ donors identified in each heart allocation zone, and the number of donors where the heart was retrieved and transplanted, by donor type. It also shows the number in each zone who donated their lung(s) as well as their heart. Of the 676 DBD donors during 2024-2025, 144 (21%) donated their heart, with 143 transplanted ("utilised"). Of the 727 DCD donors, 61 (8%) donated their heart, with 57 transplanted ("utilised").

Table 7.7 shows the number of deceased organ donors identified in each lung allocation zone, and the number of donors where at least one lung was retrieved and transplanted, by donor type. It also shows the number in each zone who donated their heart as well as their lung(s). Of the 676 DBD donors, 98 (14%) donated at least one lung, with 94 proceeding to transplantation ("utilised"). Of the 727 DCD donors, 68 (9%) donated at least one lung, with 60 proceeding to transplantation ("utilised").

Table 7.6	Heart organ o 1 April 2024 -				n the UK, cation zone an	d donor	type	
Heart Allocation Zone	Number of donors	he dor	BD ber of eart nors ised)	Number donated heart and lungs	Number of donors	DC Numt he: don (utili	oer of art ors	Number donated heart and lungs
Birmingham	135	39	(39)	9	125	13	(12)	4
Glasgow	76	18	(18)	5	90	6	(4)	1
Harefield	163	28	(28)	7	171	8	(8)	1
Manchester	77	17	(17)	5	96	13	(12)	3
Newcastle	99	22	(22)	5	91	10	(10)	3
Papworth	126	20	(19)	6	154	11	(11)	4
TOTAL	676	144	(143)	37	727	61	(57)	16

Table 7.7	Lung organ 1 April 2024				the UK, ation zone ar	nd donor f	type	
Lung Allocation Zone	Number of donors	DB Number don (utili	of lung ors	Number donated heart and lungs	Number of donors	DC Number don (utili	of lung ors	Number donated heart and lungs
Birmingham	131	21	(20)	7	149	8	(8)	4
Harefield	149	16	(16)	7	156	14	(12)	0
Manchester	90	17	(17)	8	101	10	(9)	4
Newcastle	147	17	(15)	6	144	12	(9)	3
Papworth	159	27	(26)	9	177	24	(22)	5
TOTAL	676	98	(94)	37	727	68	(60)	16



The rates per million population for cardiothoracic organ donors are shown in **Table 7.8** by country/NHS region of residence. No adjustments have been made for potential demographic differences in populations. The overall heart donor rate was 3.0 pmp in 2024-2025 and varied across NHS regions from 1.9 pmp to 3.5 pmp. For lungs, the overall donor rate was 2.5 pmp in 2024-2025 and varied across NHS regions from 1.7 pmp to 3.6 pmp.

Table 7.8Cardiothora1 April 2024							the UK	٢,				
Country/ NHS region of residence	DI	BD		(pmp) CD	то	TAL	D	BD		s) (pmp) CD		TAL
North East and Yorkshire North West Midlands East of England London South East South West	17 11 27 7 14 19 12	(2.1) (1.5) (2.5) (1.1) (1.6) (2.0) (2.1)	10 5 11 5 6 6	(1.2) (0.7) (1.0) (0.8) (0.7) (0.6) (1.0)	27 16 38 12 20 25 18	(3.3) (2.1) (3.5) (1.9) (2.3) (2.7) (3.1)	9 8 16 8 9 12 12	(1.1) (1.5) (1.3) (1.0) (1.3) (2.1)	10 5 6 15 7 11 5	(1.2) (0.7) (0.5) (2.3) (0.8) (1.2) (0.9)	19 13 22 23 16 23 17	(2.3) (1.7) (2.0) (3.6) (1.8) (2.5) (3.0)
England Isle of Man Channel Islands	107 0 1	(1.9) (0.0) (5.9)	49 0 0	(0.9) (0.0) (0.0)	156 0 1	(2.7) (0.0) (5.9)	74 0 0	(1.3) (0.0) (0.0)	59 0 0	(1.0) (0.0) (0.0)	133 0 0	(2.3) (0.0) (0.0)
Wales	11	(3.5)	3	(1.0)	14	(4.5)	4	(1.3)	1	(0.3)	5	(1.6)
Scotland	11	(2.0)	2	(0.4)	13	(2.4)	9	(1.7)	3	(0.6)	12	(2.2)
Northern Ireland	5	(2.6)	3	(1.6)	8	(4.2)	2	(1.0)	2	(1.0)	4	(2.1)
TOTAL ¹	144	(2.1)	61	(0.9)	205	(3.0)	98	(1.4)	68	(1.0)	166	(2.5)
¹ Includes 25 donors with unkn	own UK p	oostcode	(9 DBD	heart, 4	DCD h	eart, 9 DE	BD lung	(s) and 3	DCD lu	ing(s))		



7.4 Transplants

The number of cardiothoracic organ transplants by recipient country/NHS region of residence is shown in **Table 7.9**. No adjustments have been made for potential demographic differences in populations. The heart transplant rate ranged from 2.0 to 3.2 pmp across NHS regions and overall was 3.0 pmp. The lung transplant rate ranged from 1.1 to 3.0 pmp across NHS regions and overall was 2.2 pmp. Lung transplant rates include a small number of heart-lung transplants.

Table 7.9 Cardiothora 1 April 2024							(pmp)	in the U	IK,			
Country/ NHS region of residence	D	BD		(pmp) CD	то	TAL	D	l BD) (pmp) CD		TAL
North East and Yorkshire North West Midlands East of England London South East	16 13 21 9 13 22	(1.9) (1.7) (1.9) (1.4) (1.5) (2.3)	7 7 10 4 7 8	(0.9) (0.9) (0.9) (0.6) (0.8) (0.9)	23 20 31 13 20 30	(2.8) (2.7) (2.8) (2.0) (2.3) (3.2)	12 14 16 8 7 13	 (1.5) (1.9) (1.5) (1.3) (0.8) (1.4) 	6 4 11 11 3 7	(0.7) (0.5) (1.0) (1.7) (0.3) (0.7)	18 18 27 19 10 20	(2.2) (2.4) (2.5) (3.0) (1.1) (2.1)
South West England Isle of Man Channel Islands	13 107 0 0	(2.3) (1.9) (0.0) (0.0)	1 44 0 0	(0.2) (0.8) (0.0) (0.0)	14 151 0 0	(2.4) (2.6) (0.0) (0.0)	10 80 0 0	(1.7) (1.4) (0.0) (0.0)	5 47 0 0	(0.9) (0.8) (0.0) (0.0)	15 127 0 0	(2.6) (2.2) (0.0) (0.0)
Wales	8	(2.6)	1	(0.3)	9	(2.9)	6	(1.9)	2	(0.6)	8	(2.6)
Scotland	27	(5.0)	8	(1.5)	35	(6.4)	4	(0.7)	7	(1.3)	11	(2.0)
Northern Ireland	0	(0.0)	4	(2.1)	4	(2.1)	2	(1.0)	3	(1.6)	5	(2.6)
TOTAL ¹	143	(2.1)	57	(0.8)	200	(3.0)	92	(1.4)	59	(0.9)	151	(2.2)
¹ Includes 1 DBD heart recipie	nt with ar	unknowi	n UK po	ostcode								

Table 7.10 and **Table 7.11** show cardiothoracic organ transplant activity for each centre by urgency status and donor type, respectively. In 2024-2025, a total of 351 transplants were carried out; a decrease of 7% on 2023-2024. Of these, 200 were heart transplants, of which 161 (80%) were urgent or super-urgent. There was a total of 151 lung or heart-lung transplants, of which 51 (34%) were urgent or super-urgent transplants. Of the 200 heart transplants, 143 (72%) were from donors after brain stem death and 57 (28%) from donors after circulatory death. Of the total number of lung or heart-lung transplants, 92 (61%) were from donors after brain stem death and 59 (39%) from donors after circulatory death.



							٦	[ranspla	ant typ	е						
Transplant centre			F	leart			Heart	-lung			Lu	ung			то	TAL
	Non-ι	urgent	U	rgent	Super	-urgent			Non-	urgent	Urę	gent	Super-	urgent		
Adult																
Birmingham	5	(9)	12	(15)	9	(11)	1	(1)	18	(12)	8	(4)	0	(0)	53	(5
Glasgow	2	(9)	18	(16)	9	(7)	0	(0)	0	(0)	0	(0)	0	(0)	29	(3
Great Ormond Street	1	(1)	0	(1)	0	(0)	0	(0)	0	(0)	2	(0)	0	(0)	3	
Harefield	6	(7)	11	(26)	19	(11)	0	(1)	18	(24)	7	(4)	1	(0)	62	(7
Manchester	8	(4)	13	(6)	6	(9)	0	(0)	19	(20)	8	(4)	0	(0)	54	(4
Newcastle	5	(4)	15	(24)	4	(4)	1	(1)	12	(16)	12	(7)	0	(0)	49	(5
Papworth	10	(16)	12	(16)	9	(6)	0	(1)	30	(35)	9	(4)	2	(1)	72	(7
TOTAL	37	(50)	81	(104)	56	(48)	2	(4)	97	(107)	46	(23)	3	(1)	322	(33
Paediatric ¹																
Great Ormond Street	2	(7)	6	(11)	7	(3)	0	(1)	0	(2)	2	(2)	0	(0)	17	(2
Newcastle	0	(3)	7	(10)	3	(1)	0	(0)	1	(0)	0	(0)	0	(0)	11	Ć
Papworth	0	(0)	0	(0)	1	(0)	0	(0)	0	(0)	0	(0)	0	(0)	1	
TOTAL	2	(10)	13	(21)	11	(4)	0	(1)	1	(2)	2	(2)	0	(0)	29	(

Table 7.10Cardiothoracic transplants from deceased donors, 1 April 2024 - 31 March 2025 (2023 - 2024)
by age group, centre, transplant type and urgency



Table 7.11

Cardiothoracic transplants from deceased donors, 1 April 2024 - 31 March 2025 (2023 - 2024) by age group, centre, transplant type and donor type

						Т	rans	olant t	уре					
Transplant centre		Hea	rt			Heart	-lung			Lun	g		ТО	TAL
-	D	BD	D	CD	DI	3D	D	CD	DI	BD	D	CD		
Adult														
Birmingham	18	(26)	8	(9)	1	(1)	0	(0)	19	(12)	7	(4)	53	(52)
Glasgow	21	(21)	8	(11)	0	(0)	0	(0)	0	(0)	0	(0)	29	(32)
Great Ormond Street	0	(0)	1	(2)	0	(0)	0	(0)	2	(0)	0	(0)	3	(2)
Harefield	28	(34)	8	(10)	0	(1)	0	(0)	17	(20)	9	(8)	62	(73)
Manchester	17	(16)	10	(3)	0	(0)	0	(0)	18	(20)	9	(4)	54	(43)
Newcastle	18	(20)	6	(12)	1	(1)	0	(0)	11	(14)	13	(9)	49	(56)
Papworth	23	(25)	8	(13)	0	(1)	0	(0)	21	(33)	20	(7)	72	(79)
TOTAL	125	(142)	49	(60)	2	(4)	0	(0)	88	(99)	58	(32)	322	(337)
Paediatric ¹														
Great Ormond Street	11	(17)	4	(4)	0	(1)	0	(0)	1	(3)	1	(1)	17	(26)
Newcastle	6	(13)	4	(1)	0	(0)	0	(0)	1	(0)	0	(0)	11	(14)
Papworth	1	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	1	(0)
TOTAL	18	(30)	8	(5)	0	(1)	0	(0)	2	(3)	1	(1)	29	(40)
¹ Paediatric recipients	are ag	ed under	16 ye	ears at t	ime c	f trans	plant							

At 31 March 2025 there were approximately 4,300 recipients with a functioning cardiothoracic organ transplant being followed-up by the UK Transplant Registry.

The length of time that elapses between cardiothoracic organs being removed from the donor and their transplantation into the recipient is called the total preservation time. Generally, the shorter this time, the more likely the organ is to work immediately and the better the long-term outcome. Please note some of these data include the use of donor organ maintenance systems.

In 2024-2025, the median total preservation time for a DBD heart transplant was 3.6 hours (Inter-Quartile (IQ) range 3.0 – 4.1) and for a DCD heart transplant was 5.2 hours (IQ range 4.7 – 5.9) and overall was 3.9 hours (IQ range 3.3 - 4.6).

The median total preservation time for a DBD donor lung transplant was 7.5 hours (IQ range 5.9 – 9.2) and for a DCD donor lung transplant was 9.3 hours (IQ range 7.7 – 10.7) and overall was 8.1 hours (IQ range 6.8 - 9.9).



7.5 Demographic characteristics

.

The age group, sex, ethnicity and blood group of deceased donors, transplant recipients and patients on the transplant list are shown in **Table 7.12**.

Table 7.12		ents, 1 Ap											
		Doi	nors		splant bients		ansplant atients						
		Ν	(%)	N	(%)	N	(%)						
Age (years)	0-17 18-34 35-49 50-59 60-69 70+ Mean (SD)	19 86 113 76 24 0 41	(6) (27) (36) (24) (8) (0) (14)	33 46 74 115 83 0 47	(9) (13) (21) (33) (24) (0) (16)	50 35 112 148 154 3 48	(10) (7) (22) (29) (31) (1) (17)						
Sex	Male Female Unknown	190 128	(60) (40) -	257 94	(73) (27) -	299 202 1	(60) (40) -						
Ethnicity	White Asian Black Other Unknown	280 18 8 6 6	(89) (6) (3) (2)	287 41 7 7 9	(83) (12) (2) (2)	392 59 26 9 16	(79) (12) (5) (2)						
Blood group	O A B AB	157 118 32 11	(49) (37) (10) (3)	137 140 55 19	(39) (40) (16) (5)	296 142 58 6	(59) (28) (12) (1)						
Graft number	First graft Re-graft		-	346 5	(99) (1)	495 7	(99) (1)						
TOTAL		318	(100)	351	(100)	502	(100)						





Liver Activity

Key messages

- The number of patients on the active liver transplant list at 31 March 2025 was 662, a decrease of 2% from 2024.
- The number of liver donors after brain death fell by 11% to 612, while transplants from donors after brain death fell by 4% to 561
- The number of liver donors after circulatory death increased by 7% to 438, while transplants from donors after circulatory death increased by 17% to 313 which was the highest ever number of DCD liver transplants performed in a financial year

8.1 Overview

The number of deceased liver donors and transplants in the UK in the last ten years is shown in **Figure 8.1**. There has been a decrease in the number of patients registered on the active liver transplant list between 2015-2016 and 2020-2021. However, this number has increased to 662 patients active in March 2025, higher than pre-pandemic levels. A decrease in donors was seen last year however in the previous three years the numbers of donors had steadily increased.



Intestinal transplants that used a liver are not included in the liver transplant activity reported. However, any livers retrieved and used for such transplants are included in the liver donor activity. Liver only transplants in intestinal failure patients are included in the liver transplant activity. Intestinal transplant activity is reported in Chapter 9.

The number of deceased donors, deceased and living donor transplants, and patients on the active transplant list, by centre, is shown in **Table 8.1**. The numbers of liver donors reflect the number of organs retrieved from within each centre's allocation zone (by any retrieval team) rather than the number of retrievals made by that centre. In 2024-2025, 1050 organ donors donated their liver for transplant: 612 donors after brain death and 438 donors after circulatory death. There were 662 patients on the active transplant list at 31 March 2025, a decrease of 2% from 31 March 2024.



Overall, the number of liver transplants (either whole liver or liver lobe transplants) from donors after brain death fell by 4% to 561 whilst the number of liver transplants from donors after circulatory death increased by 17% to 313, compared with the previous financial year. Additionally, there were 27 living liver lobe donor transplants (NHS Group 1: 16 and Group 2: 11).

Patients are prioritised as super-urgent if they require a new liver as soon as possible due to rapid failure of the organ. Other patients are referred to as elective. In 2024-2025, there were 73 deceased donor adult super-urgent transplants, representing 9% of all adult deceased donor transplants and 17 deceased donor paediatric super-urgent transplants, representing 23% of all paediatric deceased donor transplants.



Allocation zone/ transplant	Deceased donors ¹						Deceased transplants						Living donor transplants		tive plant st	
centre	DE	3D	D	CD	то	TAL	D	BD	DO	CD	тот	TAL				
Adult																
Birmingham	134	(122)	94	(57)	228	(179)	96	(127)	87	(32)	183	(159)	0	(0)	160	(187
Cambridge	50	(63)	66	(56)	116	(119)	52	(64)	59	(52)	111	(116)	0	(0)	43	(45
Edinburgh	71	(92)	57	(58)	128	(150)	40	(43)	26	(33)	66	(76)	0	(0)	62	(48
King's College	152	(181)	100	(106)	252	(287)	103	(112)	53	(55)	156	(167)	0	(1)	189	(182
Leeds	97	(130)	65	(79)	162	(209)	87	(79)	19	(36)	106	(115)	3	(2)	75	(88
Newcastle	39	(35)	16	(20)	55	(55)	29	(22)	21	(25)	50	(47)	0	(0)	9	(11
Royal Free	59	(52)	35	(28)	94	(80)	84	(80)	44	(31)	128	(111)	1	(0)	46	(53
TOTAL	602	(675)	433	(404)	1035	(1079)	491	(527)	309	(264)	800	(791)	9 ^{2,6}	(6) ^{3,7}	584	(614
Paediatric																
Birmingham	3	(4)	1	(0)	4	(4)	21	(20)	1	(1)	22	(21)	0	(0)	24	(19
Cambridge	0	(0)	1	(0)	1	(0)	0	(0)	1	(0)	1	(0)	0	(0)	-	,
Edinburgh	0	(5)	0	(1)	0	(6)	0	(1)	0	(0)	0	(1)	0	(0)	-	
King's College	1	(2)	1	(1)	2	(3)	36	(26)	2	(2)	38	(28)	12	(14)	44	(33
Leeds	4	(1)	1	(1)	5	(2)	13	(12)	0	(0)	13	(12)	6	(11)	10	(12
Newcastle	0	(1)	1	(0)	1	(1)	0	(1)	0	(0)	0	(1)	0	(0)	-	
Royal Free	2	(3)	0	(1)	2	(4)	-	-	-	-	-	-	-	-	-	
TOTAL	10	(16)	5	(4)	15	(20)	70	(60)	4	(3)	74	(63)	18 ⁴	(25) ⁵	78	(64

Deceased and living liver donors and transplants, 1 April 2024 - 31 March 2025 (2023-2024) and transplant list patients at

¹ Includes donors whose livers were retrieved by other teams

Table 8.1

² Includes 4 and 5 living liver lobe transplants in NHS Group 1 and Group 2 recipients, respectively

³ Includes 2 and 4 living liver lobe transplants in NHS Group 1 and Group 2 recipients, respectively

⁴ Includes 12 and 6 living liver lobe transplants in NHS Group 1 and Group 2 recipients, respectively

⁵ Includes 19 and 6 living liver lobe transplants in NHS Group 1 and Group 2 recipients, respectively

⁶ Includes 1 transplant at London Cromwell and 4 transplants at London Bridge involving private patients

⁷ Includes 1 transplant at London Cromwell and 2 transplants at London Bridge involving private patients

- 80 -

8.2 Transplant list

During 2024-2025, 1,148 patients joined the liver transplant list. Outcomes for patients on the list at 1 April 2024 and those joining the list during the year are shown in **Table 8.2**. There have been 109 (9%) new registrations that were super-urgent.

Table 8.2 Liver transplant list and new registrations in the UK, 1 April 2024 - 31 March 2025 Active and TOTAL											
	Active	and			TOTA	4L					
	suspended at 1 April	•	New registr 2024-20								
Outcome of patient					Ν	%					
at 31 March 2025	N	%	N	%							
Remained active/suspended	309	38	470	41	779	40					
Transplanted	326	40	571	50	897	46					
Removed ²	154	19	71	6	225	12					
Died ³	16	2	36	3	52	3					
TOTAL	805		1148		1953						
 ¹ Includes re-registrations for second or subsequent patients ² Includes 32 patients removed and re-registered at a different centre or on different pathway ³ Includes patients removed due to deteriorating condition 											

Table 8.3 shows the active transplant list in the UK at 31 March 2025 and 2024 by country/NHS region of patient's residence. At 31 March 2025, the overall rate was 9.8 pmp and ranged from 6.2 to 11.1 pmp across English NHS regions.



Table 8.3 Active liver by Country/ patient resid	NHS region		arch					
Country/ NHS region of residence		er transpla)25		mp) 24				
North East and Yorkshire North West Midlands East of England London South East South West	51 75 121 45 85 73 64	(6.2) (10.0) (11.0) (7.0) (9.6) (7.8) (11.1)	68 84 129 54 86 70 56	(8.3) (11.2) (11.8) (8.4) (9.7) (7.5) (9.7)				
England Isle of Man Channel Islands	514 - -	(9.0)	547 - -	(9.6)				
Wales	33	(10.5)	31	(9.9)				
Scotland	67	(12.3)	51	(9.4)				
Northern Ireland	39	(20.4)	40	(20.9)				
Total ¹	662	(9.8)	678	(10.0)				
¹ Includes patients in 2025 (2024) residing in: Unspecified UK 1 (1); Republic of Ireland 8 (6); Overseas 0 (2)								

An indication of longer term outcomes for patients listed for a liver transplant is summarised in Figure 8.2. This shows the proportion of patients transplanted or still waiting six months, one year and two years after joining the transplant list. It also shows the proportion removed from the transplant list and those dying while on the transplant list (which includes those patients removed due to condition deteriorated). At one year post-registration, 61% of patients had received a liver transplant while 8% of patients had died whilst waiting or had been removed due to their condition deteriorating. 4% had been removed for other reasons such as the patient's condition improving, or as a result of noncompliance or at the request of the patient or family.





Table 8.4 and **Table 8.5** show the median waiting time to liver transplant for adult and paediatric elective registrations, separately, including a breakdown by blood group and ethnicity for adult elective registrations only. On average, adult patients wait 144 days for a transplant while paediatric patients wait an average of 183 days. Note that these waiting times are not adjusted for other relevant factors which may be influential and differ across blood or ethnic groups.

Table 8.4	for patients registered 1 April 2022 - 31 March 2024										
Blood group	Number of patients	Wa	iting time (days)								
	registered	Median	95% Confidence interval								
Adult	5										
0	872	219	191 - 247								
А	717	110	92 - 128								
В	231	132	92 - 172								
AB	72	30	14 - 46								
TOTAL	1892	144	127 - 161								
Paediatric	157	183	133 - 233								



10	or patients registered 1 April 2	uzz - 51 March	2024
Ethnicity	Number of patients	Wa	iting time (days)
	registered	Median	95% Confidence interva
Adult	-		
White	1574	147	130 - 164
Asian	145	126	50 - 202
Black	53	132	0 - 288
Other	21	162	0 - 365
TOTAL ¹	1892	144	127 - 161
Paediatric	157	183	133 - 233

8.3 Donor and organ supply

Of the 1,403 actual organ donors, 1,050 (75%) donated their liver and 836 (80%) of these donated livers were used; see **Table 8.6**. Of livers retrieved from donors after brain death and donors after circulatory death, 86% and 71% were transplanted, respectively. Segments from one liver can be used in more than one transplant, see **Table 8.9**.

	eceased y allocat			d retriev	al in the	e UK, 1 Api	rii 2024	4 - 31 Ma	arch 20)25,		
Allocation			Number	of dono	rs		Ν	lumber o	of liver	s retriev	/ed (use	ed)
zone		Solid or	gan		Liver						•	•
	DBD	DCD	TOTAL	DBD	DCD	TOTAL	D	BD	D	CD	то	ΓAL
Birmingham	146	160	306	137	95	232	137	(112)	95	(74)	232	(186
Cambridge	57	98	155	50	67	117	50	`(47)́	67	(54)	117	(101
Edinburgh	78	85	163	71	57	128	71	(61)	57	(37)	128	`(9 8
King's College	172	175	347	153	101	254	153	(130)	101	(73)	254	(203
Leeds	109	117	226	101	66	167	101	` (91)́	66	(41)	167	(132
Newcastle	42	27	69	39	17	56	39	(36)	17	(12)	56	`(4 8
Royal Free	72	65	137	61	35	96	61	(49)	35	(19)́	96	(68
TOTAL	676	727	1403	612	438	1050	612	(526)	438	(310)	1050	(836



The rates per million population (pmp) for liver donors are shown in **Table 8.7** by donor country/NHS region of residence. No adjustments have been made for potential demographic differences in populations. The overall deceased liver donor rate was 15.5 pmp in 2024-2025 and ranged from 10.1 pmp to 19.5 pmp across English NHS regions.

Table 8.7Liver donation rates for deceased donors in the UK, 1 April 2024 - 31 March 2025, by Country/ NHS region											
Country/ NHS region of residence	D	BD		nors (pmp) CD	TOTAL						
North East and Yorkshire North West Midlands East of England London South East South West	74 52 96 52 59 89 54	(9.0) (6.9) (8.8) (8.1) (6.7) (9.5) (9.4)	50 26 69 73 31 53 53	(6.1) (3.5) (6.3) (11.4) (3.5) (5.7) (9.2)	124 78 165 125 90 142 107	(15.1) (10.4) (15.1) (19.5) (10.1) (15.1) (18.6)					
England Isle of Man Channel Islands	476 2 1	(8.3) (25.0) (5.9)	355 1 0	(6.2) (12.5) (0.0)	831 3 1	(14.6) (37.5) (5.9)					
Wales	40	(12.8)	13	(4.2)	53	(16.9)					
Scotland	42	(7.7)	42	(7.7)	84	(15.4)					
Northern Ireland	21	(11.0)	9	(4.7)	30	(15.7)					
TOTAL ¹	612	(9.1)	438	(6.5)	1050	(15.5)					
¹ Include 48 donors with unknown UK postcode (30 DBD and 18 DCD)											



8.4 Transplants

The number of liver transplants by recipient country/NHS region of residence are shown in **Table 8.8**. No adjustments have been made for potential demographic differences in populations. The deceased donor transplant rate ranged from 10.8 to 14.8 pmp across English NHS regions and overall was 12.8 pmp.

Table 8.8Liver transplant rates per million population (pmp), in the UK, 1 April 2024 - 31 March 2025, by country and NHS region										
Country/ NHS region of residence		BD (pmp)	DC N	CD (pmp)	то N	(nmn)	Livi	•		
or residence	Ν	(pmp)	IN	(pmp)	IN	(pmp)	Ν	(pmp)		
North East and Yorkshire	79	(9.6)	32	(3.9)	111	(13.5)	5	(0.6)		
North West	59	(7.8)	22	(2.9)	81	(10.8)	3	(0.4)		
Midlands	79	(7.2)	63	(5.7)	142	(13.0)	1	(0.1)		
East of England	52	(8.1)	43	(6.7)	95	(14.8)	0	(0.0)		
London	77	(8.7)	33	(3.7)	110	(12.4)	3	(0.3)		
South East	66	(7.0)	36	(3.8)	102	(10.9)	1	(0.1)		
South West	47	(8.2)	36	(6.3)	83	(14.4)	0	(0.0)		
England	459	(8.0)	265	(4.6)	724	(12.7)	13	(0.2)		
Isle of Man	1	(12.5)	0	(0.0)	1	(12.5)	0	(0.0)		
Channel Islands	2	(11.8)	0	(0.0)	2	(11.8)	0	(0.0)		
Wales	31	(9.9)	16	(5.1)	47	(15.0)	0	(0.0)		
Scotland	43	(7.9)	27	(5.0)	70	(12.8)	1	(0.2)		
Northern Ireland	18	(9.4)	4	(2.1)	22	(11.5)	0	(0.0)		
TOTAL ^{1,2}	556	(8.2)	312	(4.6)	868	(12.8)	14	(0.2)		
¹ Excludes 19 recipients who reside outside the UK (5 DBD, 1 DCD, 13 Living) ² Includes 2 DBD recipients with an unknown UK postcode										

The number of whole, reduced and split liver transplants by urgency status of the transplant (elective, super-urgent) in 2024-2025 is shown in **Table 8.9**. The term 'reduced' is used when only one lobe of the liver is transplanted and the term 'split' applies when both lobes of the liver are transplanted into two different recipients.

Overall, the number of deceased donor liver transplants increased by 2% in 2024-2025. There were 874 deceased donor liver transplants performed in 2024-2025: 867 liver only transplants (778 whole liver, 66 split liver and 23 reduced liver lobes) and 7 simultaneous liver and kidney. Split liver transplants accounted for 74% of liver only lobe transplant activity.

Table 8.9

Deceased liver transplants performed in the UK, 1 April 2023 - 31 March 2025

				2023-	-2024			2024-2025								
Transplant centre	Wh liv			uced ′er	Sp liv		TOT	ΓAL	Wh liv			uced er	Sp liv		TOT	TAL
	Е	SU	Е	SU	Е	SU	Е	SU	Е	SU	Е	SU	Е	SU	Е	SU
Birmingham	140	19	5	2	14	0	159	21	162	15	5	1	18	4	185	20
Cambridge	99	13	0	0	4	0	103	13	96	10	0	0	6	0	102	10
Edinburgh	63	14	0	0	0	0	63	14	60	6	0	0	0	0	60	6
King's College	156	9	4	4	18	4	178	17	139	16	9	5	21	4	169	25
Leeds	100	12	3	1	11	0	114	13	97	9	3	0	9	1	109	10
Newcastle	42	6	0	0	0	0	42	6	42	8	0	0	0	0	42	8
Royal Free	94	12	0	0	5	0	99	12	114	11	0	0	3	0	117	11
TOTAL	694	85	12	7	52	4	758	96	710	75	17	6	57	9	784	90
E=Elective, SU=Super-urgent Birmingham, King's College and Leeds transplant paediatric patients																

The length of time that elapses between a liver being removed from the donor to its transplantation into the recipient is called the total preservation time. Generally, the shorter this time, the more likely the liver is to work immediately and the better the long-term outcome. In 2024-2025, the median total preservation time for a DBD donor whole liver only transplant was 8.5 hours (Inter-Quartile (IQ) range 6.8 - 10.3) and for a DCD donor whole liver only transplant was 7.0 hours (IQ range 5.3 - 8.6) and overall was 7.9 hours (IQ range 6.3 - 9.6). Please note some of the reported total preservation times may include the use of donor organ maintenance systems.

At 31 March 2025 there were approximately 12,300 recipients with a functioning liver transplant (or multi-organ including the liver) being followed-up as reported to the UK Transplant Registry.



8.5 Demographic characteristics

The age group, sex, ethnicity and blood group of liver donors, transplant recipients and transplant list patients are shown in **Table 8.10** along with the liver graft number for transplant recipients and patients active on the transplant list.

Table 8.10	Demographic c recipients, 1 Ap						31 March
		Doi	nors		splant		ransplant
		Ν	(%)	recip N	oients (%)	list pa N	atients (%)
Age (years)	0-17 18-34 35-49 50-59 60-69 70+	25 131 264 267 233 130	(2) (12) (25) (25) (22) (12)	77 90 163 247 281 16	(9) (10) (19) (28) (32) (2) (42)	79 100 178 178 119 8	(12) (15) (27) (27) (18) (1)
Sex	mean Male Female	52 588 462	(16) (56) (44)	49 552 322	(18) (63) (37)	43 347 315	(18) (52) (48)
Ethnicity	White Asian Black Other Unknown	937 41 24 10 38	(91) (4) (2) (1) -	716 90 32 15 21	(83) (10) (4) (2)	532 72 32 6 20	(82) (11) (5) (1)
Blood group	O A B AB	481 437 100 32	(46) (42) (10) (3)	360 360 110 44	(41) (41) (13) (5)	363 203 91 5	(55) (31) (14) (1)
Graft number	First graft Re-graft		-	797 77	(91) (9)	585 77	(88) (12)
TOTAL		1050	(100)	874	(100)	662	(100)





Intestinal Activity

Key messages

- There were 8 patients on the active intestinal transplant list at 31 March 2025 in total
- There were 25 registrations for an intestinal transplant during 2024-2025
- 17 intestinal transplants were carried out in 2024-2025 (23 in the previous year)
- On average, patients wait 4 months for a transplant

9.1 Overview

Patients waiting for an intestinal transplant are prioritised according to a points system based on a range of clinical factors including donor-recipient age matching, loss of intravenous line access, liver failure, diagnosis of malignancy, in-hospital status, additional organs required, sensitisation and waiting time. A score is calculated for every potentially suitable patient on the national active transplant list and donor organs are allocated preferentially to the patient with the most points.

A summary of activity for deceased donor intestinal transplants and the transplant list at year end for the last ten years is shown in **Figure 9.1**. The number of patients registered on the active transplant list for an intestinal transplant has decreased to 8. The number of donors and transplants has decreased over the last three years.





9.2 Transplant list

In 2024-2025, there were 25 registrations for an intestinal transplant corresponding to 25 patients. The outcome of these registrations for paediatric (aged <18 years) and adult patients, as at 31 March 2025, broken down by transplant centre, can be found in **Table 9.1**. Overall, 12 (48%) were active/suspended on 31 March 2025, 9 (36%) resulted in a transplant, and 4 (16%) died or were removed. Note that removals due to condition deterioration are included in the removal group.

Transplant		(Outcome	of regis	trations	as at 31	March 2	025	
centre	Transp	planted	Di	ed	Rem	oved ¹	Active	e/Susp	TOTAL
	N	%	Ν	%	Ν	%	Ν	%	
Adult									
Cambridge	7	64	0	0	0	0	4	36	11
Oxford	1	14	0	0	1	14	5	71	7
TOTAL	8	44	0	0	1	6	9	50	18
Paediatric									
Birmingham	1	33	0	0	2	67	0	0	3
King's College	0	0	1	25	0	0	3	75	4
TOTAL	1	14	1	14	2	29	3	43	7

Table 9.2 shows the active intestinal transplant list in the UK at 31 March 2025 and 2024 by country/NHS region of patient's residence. At 31 March 2025, the overall transplant list rate was 0.1 pmp and ranged from 0.0 to 0.5 pmp across NHS regions, although these numbers are very small, so these are not meaningful differences.



Table 9.2 Active intestina by Country/NHS				ł				
Country/ NHS region of residence	Intesti 202	ant list (µ 202						
North East and Yorkshire North West Midlands East of England London South East South West	2 0 0 1 0 3	(0.2) (0.0) (0.0) (0.0) (0.1) (0.0) (0.5)	2 2 4 0 2 0	$\begin{array}{c} (0.2) \\ (0.3) \\ (0.0) \\ (0.6) \\ (0.0) \\ (0.2) \\ (0.0) \end{array}$				
England Isle of Man Channel Islands	6 0 0	(0.1) (0.0) (0.0)	10 0 0	(0.2) (0.0) (0.0)				
Wales	0	(0.0)	0	(0.0)				
Scotland	0	(0.0)	1	(0.2)				
Northern Ireland	1	(0.5)	0	(0.0)				
TOTAL ¹	8	(0.1)	13	(0.2)				
¹ Includes patients in 2025 (2024) residing in: Republic of Ireland 0 (1); Overseas 1 (1)								

Table 9.3 shows median waiting time to elective intestinal transplant by registration type. On average, patients wait 138 days. For patients requiring a bowel and pancreas, patients who also require a liver wait slightly longer than patients who do not require a liver. Note that these waiting times are not adjusted for other relevant factors which may be influential. Note that removals from the intestinal list for a transplant excluding the bowel are censored at time of removal.

Table 9.3Median waiting time to intestinal transplant in the UK, for patients registered 1 April 2020 - 31 March 2024, by registration type											
Registration type	Number of patients	Wa	aiting time (days)								
	registered	Median	95% Confidence interval								
Bowel only ¹	13	212	22 - 402								
Liver, bowel and pancreas ¹	50	147	82 - 212								
Bowel and pancreas ¹	45	118	44 - 192								
TOTAL	108	138	106 - 170								
¹ May also include any of: stomach, spleen, abdominal wall, kidney											



9.3 Donor and organ supply

The rates per million population (pmp) for intestinal donors are shown in **Table 9.4** by donor country/NHS region of residence. The overall DBD intestinal donor rate was 0.2 pmp and ranged from 0.0 to 0.5 pmp across NHS regions. Of the 676 DBD solid organ donors, 16 (2%) donated their small bowel. The majority of DBD solid organ donors are not offered to intestinal patients because they are outside of the age and weight criteria for bowel donation. The next most common reason for non-offering is lack of consent for bowel donation. Of those donors with consent for bowel donation, the most common reason for non-offering is no suitable recipient on the transplant list followed by donor history. Of those donors that are offered, a large number are not accepted, most commonly, due to donor virology, donor history and unsuitable size.

Table 9.4Intestinal donation rates for deceased donors after brain death, in the UK, 1 April 2024 - 31 March 2025, by Country/ NHS region											
Country/ NHS region of residence	-	jan donors mp)		al donors np)	% of solid organ donors	Organs utilised					
North East and Yorkshire	80	(9.7)	2	(0.2)	2.5	2					
North West	57	(7.6)	3	(0.4)	5.3	3					
Midlands	101	(9.2)	5 1	(0.5)	5 1.8	5 1					
East of England London	57 70	(8.9) (7.9)	0	(0.2) (0.0)	1.0 0	0					
South East	101	(10.8)	1	(0.0)	1	1					
South West	63	(10.9)	2	(0.3)	3.2	2					
England Isle of Man	529 3	(9.3) (37.5)	14 0	(0.2) (0.0)	2.6 0	14 0					
Channel Islands	1	(5.9)	Ő	(0.0)	0	0					
Wales	41	(13.1)	0	(0.0)	0	0					
Scotland	45	(8.3)	1	(0.2)	2.2	1					
Northern Ireland	22	(11.5)	0	(0.0)	0	0					
TOTAL ¹	676	(10.0)	16	(0.2)	2.4	15					
¹ Includes 35 donors and 1 inte	stinal donor wit	th unknown UK	postcode								



9.4 Transplants

Table 9.5 shows intestinal transplant activity by transplant centre and transplant type, 2023-2024 and 2024-2025. In 2024-2025, there were a total of 17 transplants, 11 adult and 6 paediatric transplants.

At 31 March 2025 there were approximately 170 recipients with a functioning intestinal transplant (or multi-organ including intestine) being followed-up as reported to the UK Transplant Registry.

Table 9.5Intestinal transplants in the UK, by age group, centre and type,1 April 2024 - 31 March 2025 (2023 - 2024)													
Transplant centre Transplant type BO LBP MV MMV LB TOTAL												TAL	
Adult Cambridge Oxford TOTAL		0 1 1	(0) (3) (3)	0 0 0	(0) (0) (0)	4 0 4	(3) (0) (3)	6 0 6	(9) (2) (11)	0 0 0	(0) (0) (0)	10 1 11	(12) (5) (17)
Paediatric Birmingham King's College TOTAL	9	0 1 1	(0) (2) (2)	1 1 2	(0) (0) (0)	1 1 2	(1) (2) (3)	1 0 1	(1) (0) (1)	0 0 0	(0) (0) (0)	3 3 6	(2) (4) (6)
BO = Bowel o BP = Bowel a LBP = Liver, b MV = Multiviso MMV = Modifi LB = Liver and	nd pancre powel and ceral – liv ed multiv	eas I panci er, bov	reas wel and	pancre	eas plus	stoma	ach/sple	en/abo	lominal v	vall/ki			on



9.5 Demographic characteristics

The age group, sex, ethnicity and blood group of intestinal donors, transplant recipients and transplant list patients are shown in **Table 9.6**.

Table 9.6Demographic characteristics of deceased intestinal donors and transplant recipients, 1 April 2024 - 31 March 2025, and transplant list patients at 31 March										
		Donors		Transplant recipients		Active transplant list patients				
		Ν	(%)	N	(%)	N	(%)			
Age (years)	0-17 18-34 35-49 50-59 60-69 Mean (SD)	3 6 7 0 0 32	(19) (38) (44) (0) (0) (14)	6 2 3 4 2 35	(35) (12) (18) (24) (12) (22)	2 0 4 2 0 37	(25) (0) (50) (25) (0) (19)			
Sex	Male Female	9 7	(56) (44)	5 12	(29) (71)	0 8	(0) (100)			
Ethnicity	White Asian Other	15 1 0	(94) (6) (0)	16 0 1	(94) (0) (6)	7 0 1	(88) (0) (13)			
Blood group	O A B AB	10 3 3 0	(63) (19) (19) (0)	6 7 1 3	(35) (41) (6) (18)	3 5 0 0	(38) (63) (0) (0)			
Graft number	First graft Re-graft	-	- -	16 1	(94) (6)	8 0	(100) (0)			
TOTAL		16	(100)	17	(100)	8	(100)			





Cornea Activity

Key messages

- 4,976 corneas were retrieved to NHSBT Eye Banks
- Corneas were retrieved from 2,150 cornea-only donors and from 344 solid organ donors after brain death (54%) or after circulatory death (46%)
- The number of transplants increased by 11% to 5,071, although figures are an underestimate due to delays in reporting
- 8%, 34% and 13% of corneal transplants were for keratoconus, Fuchs endothelial dystrophy and pseudophakic bullous keratopathy patients, respectively
- Descemet membrane endothelial keratoplasty transplants are the most popular technique for corneal transplantation (35% of all transplants)

10.1 Overview

In the financial year 2024-2025, the number of corneal transplants has increased by 11% to 5,071. These figures are an underestimate due to delays in reporting the transplant outcome to NHSBT. The number of corneas donated in 2024-2025 was 4,976, representing a decrease of 3% compared with the previous year as shown in **Figure 10.1**. Overall, corneal has not fully recovered to pre-pandemic levels.

It should be noted that not all corneas donated or transplanted in the UK are reported to NHSBT and thus the donation data reported are not the full national data.



In 2024-2025, of 2,494 donors whose corneas were retrieved to NHSBT Eye Banks, 2,150 were cornea-only donors and 344 were cornea and solid organ donors: see **Table 10.1**. Compared to 2023-2024, the number of cornea-only donors remained similar, but the number of cornea and solid organ donors fell by 20%. In 2024-2025, corneas were retrieved from 184 organ donors after brain death and 160 organ donors after circulatory death.



Table 10.1 also shows the number and rate per million population (pmp) of donors whose corneas were retrieved to NHSBT Eye Banks in 2024-2025, by country and NHS region. Information for 2023-2024 is shown for comparison. No adjustments have been made for potential demographic differences in populations.

In 2024-2025, the corneal donor rate has fallen across all four nations. England (41.4 pmp) had the highest corneal donor rate of countries in the UK (39.9 pmp). Across the NHS regions, the corneal donor rate ranged from 21.2 pmp to 69.4 pmp. This variation is largely attributed to the location of NHSBT Eye Retrieval Schemes, NHSBT Eye Banks and non-NHSBT Eye Banks (East Grinstead).

Table 10.1Corneal donation rates per million population (pmp) in the UK, 1 April 2024 - 31 March 2025 (2023 - 2024), by country/ NHS region for donors whose corneas were retrieved to NHSBT Eye Banks											
Country of residence/ NHS region	Corne	a-only	Solid ar cor	nd	TO	TAL	ΤΟΤΑ	L pmp			
North East and Yorkshire North West Midlands East of England London South East South West England	291 433 320 286 140 132 359 1961	(297) (471) (292) (297) (105) (111) (368) (1941)	34 29 63 36 50 67 41 320	(57) (41) (60) (46) (50) (74) (60) (388)	325 462 383 322 190 199 400 2281	(354) (512) (352) (343) (155) (185) (428) (2329)	39.5 61.4 34.9 50.3 21.4 21.2 69.4 39.9	(43.1) (68.1) (32.1) (53.6) (17.5) (19.7) (74.3) (40.8)			
Isle of Man Channel Islands	0 0	(0) (0)	0 0	(0) (0)	0 0	(0) (0)	0.0 0.0	(0.0) (0.0)			
Wales	69	(95)	6	(16)	75	(111)	24.0	(35.5)			
Scotland	28	(40)	12	(20)	40	(60)	7.3	(11.0)			
Northern Ireland	11	(12)	6	(7)	17	(19)	8.9	(9.9)			
TOTAL ¹	2150	(2151)	344	(431)	2494	(2582)	36.9	(38.2)			
¹ Includes UK donors where the hospital/hospice postcode was unspecified											



10.2 NHSBT Eye Bank activity

NHSBT Eye Bank activity levels for Filton (Bristol) and David Lucas (in Liverpool) Eye Banks are shown in **Table 10.2**. In 2024-2025, a total of 4,976 corneas were retrieved to NHSBT, of which 3,783 (76%) were subsequently issued for transplantation. Filton Eye Bank processed 49% of corneas retrieved in the last financial year.

Table 10.2	Corneas retrieved into NHSBT Eye Banks, by year 1 April 2024 - 31 March 2025 (2022-2023)											
Eye bank	Total re	etrieved	Number	'issued ¹	% is	sued	number	e between retrieved ssued				
Filton David Lucas	2431 2545	(2971) (2163)	1809 1974	(2310) (1530)	74 78	(78) (71)	622 571	(661) (633)				
Total ¹ Number issue	4976 ed of those ref	(5134) trieved in eac	3783 ch year	(3840)	76	(75)	1193	(1294)				

10.3 Transplants

Corneal transplant activity in the UK by country of residence and NHS regions for the years 2023-2024 and 2024-2025 is detailed in **Table 10.3**. Corneas were supplied by NHSBT and non-NHSBT Eye Banks for corneal transplants in the UK. No adjustments have been made for potential demographic differences in populations.

The overall transplant rate was 67.3 pmp in 2023-2024 which increased to 75.0 pmp in 2024-2025. Transplant rates increased in England, Wales and Scotland. England had the highest transplant rate in the UK: 79.9 pmp, and this ranged from 35.9 pmp to 115.8 pmp across the NHS regions.


Table 10.3Cornea transplants1 April 2023 - 31 Mar			l (pmp) in the l	UK,
Country of residence/ NHS region	2023	Number of tran -2024	• • • • •	-2025
North East and Yorkshire North West Midlands East of England London South East South West England	549 643 594 316 851 667 469 4089	(66.8) (85.5) (54.2) (49.4) (95.9) (71.1) (81.4) (71.6)	649 661 230 1027 726 605 4565	(79.0) (87.9) (60.9) (35.9) (115.8) (77.4) (105.0) (79.9)
Isle of Man Channel Islands	0 0	(0) (0)	0 0	(0) (0)
Wales	133	(42.5)	139	(44.4)
Scotland	227	(41.7)	287	(52.7)
Northern Ireland	84	(44.0)	60	(31.4)
TOTAL ¹	4549	(67.3)	5071	(75.0)
¹ Includes UK recipients where the postc	ode was unspecified	and non-UK recip	ients	

Figure 10.2 shows the number of corneal transplants in the UK by indication for transplant from 1 April 2015 to 31 March 2025. For corneas transplanted in 2023-2024 and 2024-2025, a further breakdown by indication is shown in **Table 10.4**.



The most common indication for transplantation is FED, representing 34% of corneal transplants in 2024-2025, as shown in **Table 10.4**.

Table 10.4 Corneal transplants in the	UK by indic	ation and fin	ancial year,	
1 April 2023 - 31 March 20	25			
Indication for transplant	2023	- 2024	2024	- 2025
	Ν	%	Ν	%
Keratoconus (KC)	473	10.4	379	7.5
Fuchs endothelial dystrophy (FED)	1780	39.1	1745	34.4
Pseudophakic bullous keratopathy (PBK)	686	15.1	657	13.0
Infections	271	6.0	282	5.6
Re-grafts	733	16.1	759	15.0
Other (listed below)	606	13.3	1249	24.6
Ectasias	19	0.4	17	0.3
Dystrophies	73	1.6	67	1.3
Previous ocular surgery	116	2.6	126	2.5
Injury	55	1.2	55	1.1
Ulcerative keratitis	46	1.0	50	1.0
Opacification	81	1.8	105	2.1
Miscellaneous	162	3.6	147	2.9
Not reported	54	1.2	682	13.4
Total	4549	100.0	5071	100.0

Figure 10.3 shows the number of corneal transplants in the UK by graft type from 1 April 2015 to 31 March 2025. Over the last 10 years, the proportion of penetrating keratoplasty (PK) grafts has reduced by nearly a third. Descemet Membrane Endothelial Keratoplasty (DMEK) transplants are now the most popular technique for corneal transplantation.

The type of EK graft, Descemet Stripping Automated EK (DSAEK) and DMEK transplants, were first collected as free text on the form. This meant that all EK transplants were often reported as EK unknown. In April 2019, the form changed so that 'EK unknown' was no longer specified.

Between January 2014 and April 2019, unknown EK graft types have been imputed such that grafts by surgeons that have never reported a DMEK transplant are assumed to be Descemet Stripping Automated EK (DSAEK) transplants and all transplants prior to the first reported DMEK are considered DSAEK transplants. A further breakdown by graft type for corneas transplanted in 2023-2024 and 2024-2025 is shown in **Table 10.5**.





In 2024-2025, 22% of grafts were DSAEK and 35% were DMEK grafts. PK grafts are still a popular choice for corneal transplantation accounting for 22% of all transplants in 2024-2025.

Table 10.5Corneal transplants1 April 2023 - 31 Ma		type and fin	ancial year,	
Graft type	2023	- 2024	2024	- 2025
	N	%	Ν	%
РК	1195	26.3	1103	21.8
Anterior lamellar	259	5.7	294	5.8
DSAEK	1166	25.6	1129	22.3
DMEK	1769	38.9	1769	34.9
Other	66	1.5	50	1.0
Not reported	94	2.1	726	14.3
All grafts	4549	100.0	5071	100.0



10.4 Demographic characteristics

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Table 10.6	Demographic c NHSBT Eye Bai 31 March 2025					
	Cornea-o	nly donors		and cornea	Transplant	t recipients
	Ν	%	N	%	Ν	%
Age group (y	vears)					
0 - 17	5	0.2	4	1.2	32	0.6
18 - 34	23	1.1	27	7.8	303	6.0
35 - 49	108	5.0	62	18.0	449	8.9
50 - 59	227	10.6	82	23.8	546	10.8
60 - 69	493	22.9	95	27.6	1025	20.2
70-79	742	34.5	71	20.6	1614	31.8
80+	552	25.7	3	0.9	1102	21.7
Mean (SD)	70	(12)	56	(14)	66	(16)
Sex						
Male	1251	58.2	200	58.1	2697	53.2
Female	899	41.8	144	41.9	2372	46.8
Unknown					2	
Ethnicity						
White	58	2.7	310	90.1	3627	71.5
Asian	2	0.1	16	4.7	332	6.5
Black	0	0.0	4	1.2	154	3.0
Other	Ő	0.0	2	0.6	40	0.8
Not reported	2090	97.2	12	3.5	918	18.1
TOTAL	2150	100.0	344	100.0	5071	100.0

The age, sex and ethnicity of cornea donors and transplant recipients are shown in Table 10.6.





Survival Rates Following Transplantation

This chapter shows graft survival rates over time for kidney, pancreas and corneal transplants, and patient survival estimates for kidney, pancreas, cardiothoracic, liver, and intestinal transplants, performed in the UK. Separate estimates are presented for adult and paediatric patients (using organ-specific age definitions) and for transplants from donors after brain death and donors after circulatory death.

In all cases, the Kaplan-Meier estimate of the survivor function was used to provide the survival rate and groups (years) were compared using the log-rank test. The analyses do not take account of risk factors which may change over time. Graft survival is defined as time from transplant to graft failure, censoring for death with a functioning graft and grafts still functioning at time of analysis. Patient survival is defined as time from transplant to patient death, censoring for patients still alive at time of analysis. Both analyses consider only first transplants.



11.1 Kidney graft and patient survival

11.1.1 Adult kidney recipients – donor after brain death (DBD)

Figure 11.1 shows long-term graft survival in adult (\geq 18 years) recipients for first kidney only transplant from donors after brain death. **Table 11.1** shows the graft survival estimates and confidence intervals for one, two, five and ten years post-transplant. There has been a significant improvement in one-year survival over the time periods shown, (p<0.05). **Table 11.2** shows the patient survival estimates and confidence intervals for one, two, five and ten years post-transplant survival estimates and confidence intervals for one, two, five and ten years post-transplant. There has been a significant reduction in 5 year patient survival over time (p<0.01).

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Table 11.1	Chart Gal VIV	Graft survival after first adult kidney only transplant from a DBD							
Year of	No. at risk		% Gra	aft sur	vival (95%	confi	dence inte	rval)	
transplant	ansplant on day 0	On	e year	Tw	o year	Fiv	e year	Те	n year
2011-2013	2312	94	(93-95)	92	(91-93)	87	(85-88)	76	(74-78)
2014-2016	2742	95	(94-96)	93	(92-94)	87	(86-88)		
2017-2019	3300	95	(94-96)	94	(93-94)	87	(85-88)		
2020-2023	3694	96	(95-96)		. ,		. ,		

Year of	No. at risk		% Pati	ent su	rvival (95%	∕₀ conf	idence int	erval)	
transplant	on day 0	On	e year		o year		e year		n year
2011-2013	2313	96	(96-97)	94	(93-95)	88	(87-90)	73	(71-75
2014-2016	2743	97	(96-98)	95	(94-96)	88	(87-90)		
2017-2019	3302	97	(96-97)	94	(93-95)	85	(84-87)		
2020-2023	3694	96	(95-97)		· · ·		``		

11.1.2 Adult kidney recipients – donor after circulatory death (DCD)

Long-term graft survival in adult recipients for kidney transplants from donors after circulatory death is shown in **Figure 11.2**. **Table 11.3** shows the graft survival estimates and confidence intervals for one, two, five and ten years post-transplant. There were no statistically significant changes in graft survival over time (p>0.17). **Table 11.4** shows the patient survival estimates and confidence intervals for each time period analysed. There was a statistically significant difference in patient survival over time at one- and five-year post-transplant (p<0.01).



Table 11.3	Graft surviv	Graft survival after first adult kidney only transplant from a DCD								
Year of transplant	No. at risk on day 0	On	% Gra e year		vival (95% o year		dence inte e year	<u> </u>	n year	
2011-2013 2014-2016 2017-2019 2020-2023	1930 2140 2487 3020	94 93 94 94	(93-95) (92-94) (93-95) (94-95)	92 91 92	(91-93) (90-92) (91-93)	86 84 86	(84-87) (83-86) (84-87)	73	(71-76)	

Patient surv	Patient survival after first adult kidney only transplant from a DC							
No. at risk		% Pati	ent su	rvival (95%	∕₀ conf	idence int	erval)	
on day 0	On			•			-	n year
1930	96	(95-96)	94	(92-95)	86	(84-87)	66	(64-69)
2141	97	(96-98)	95	(94-96)	86	(85-88)		. ,
2489	97	(96-98)	94	(93-95)	83	(81-84)		
3020	96	(95-96)		. ,		. ,		
	No. at risk on day 0 1930 2141 2489	No. at risk on day 0 On 1930 96 2141 97 2489 97	No. at risk on day 0 % Pati One year 1930 96 (95-96) 2141 97 (96-98) 2489 97 (96-98)	No. at risk on day 0 % Patient su One year Tw 1930 96 (95-96) 94 2141 97 (96-98) 95 2489 97 (96-98) 94	No. at risk on day 0 % Patient survival (95% One year 1930 96 (95-96) 94 (92-95) 2141 97 (96-98) 95 (94-96) 2489 97 (96-98) 94 (93-95)	No. at risk on day 0 % Patient survival (95% conf One year % Patient survival (95% conf Two year % Patient survival (95% conf Fiv 1930 96 (95-96) 94 (92-95) 86 2141 97 (96-98) 95 (94-96) 86 2489 97 (96-98) 94 (93-95) 83	No. at risk on day 0 % Patient survival (95% confidence integration (95,96) 1930 96 (95,96) 94 (92,95) 86 (84-87) 2141 97 (96-98) 95 (94-96) 86 (85-88) 2489 97 (96-98) 94 (93-95) 83 (81-84)	on day 0 One year Two year Five year Term 1930 96 (95-96) 94 (92-95) 86 (84-87) 66 2141 97 (96-98) 95 (94-96) 86 (85-88) 2489 97 (96-98) 94 (93-95) 83 (81-84)

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11.1.3 Adult kidney recipients – living donor

Long-term graft survival in adult recipients for living donor kidney transplants in the UK is shown in **Figure 11.3**. **Table 11.5** shows graft survival estimates and confidence intervals for each time period analysed. There has been a significant improvement in one-, two-, and five-year survival over the time periods shown (p<0.0001). **Table 11.6** shows the patient survival estimates and confidence intervals for one, two, five and ten years post-transplant. There were no statistically significant changes in patient survival over time (p>0.2).

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Table 11.5	Graft surviv	ai aite	r first adur	t iiving	g donor kit	iney t	ranspiant		
Year of	No. at risk		% Gra	aft sur	vival (95%	confi	dence inte	rval)	
transplant	ransplant on day 0	On	e year	Tw	o year	Fiv	e year	Те	n year
2011-2013	2228	97	(96-98)	96	(95-97)	91	(90-92)	81	(80-83)
2014-2016	1996	98	(97-99)	97	(96-98)	93	(92-94)		
2017-2019	1826	99	(99-99)	98	(97-99)	95	(93-96)		
2020-2023	1821	99	(98-99)		. ,		. ,		

Table 11.6	Patient surv	vival after first adult living donor kidney transplant							
Year of	No. at risk		% Patie	ent sur	vival (95%	con fi	idence inte	erval)	
transplant	on day 0	Or	ne year		o year		e year	-	n year
2011-2013	2229	99	(99-99)	98	(97-99)	95	(94-96)	85	(83-86)
2014-2016	1996	99	(98-99)	98	(97-99)	95	(94-96)		. ,
2017-2019	1829	99	(99-100)	98	(97-99)	94	(93-95)		
2020-2023	1821	99	(99-100)		. ,		. ,		

11.1.4 Paediatric kidney recipients – donor after brain death (DBD)

Figure 11.4 shows long-term graft survival in paediatric (<18 years) recipients for first kidney only transplants from donors after brain death. Graft survival estimates and confidence intervals are shown for each time period analysed in **Table 11.7**. There were no statistically significant changes in graft survival over time (p>0.1). **Table 11.8** shows the patient survival estimates and confidence intervals for one, two, five and ten years post-transplant. There were no statistically significant changes in patient survival over time (p>0.3). There were insufficient paediatric recipients of first kidney only transplants from donors after circulatory death to permit reliable analysis.



			•		•	•	-		
Year of	No. at risk		% G	raft su	rvival (95%	∕₀ conf	idence int	erval)	
transplant	on day 0	On	One year		o year	Fiv	e year	Те	en year
2011-2013	159	97	(93-99)	93	(88-96)	85	(78-90)	70	(62-77)
2014-2016	135	97	(92-99)	95	(89-97)	89	(82-93)		. ,
2017-2019	135	97	(92-99)	93	(87-96)	79	(71-86)		
2020-2023	116	96	(91-99)		. ,		. ,		

Table 11.8	Patient surv	vival a	iter first pa	ediatri	c kidney on	ly tra	nsplant fro	m a Di	BD
Year of	No. at risk		% Pat	ient sı	urvival (95%	conf	idence inte	rval)	
transplant	ansplant on day 0	Or	ne year	Two	year `	Five	year	Ten	year
2011-2013	159	99	(96-100)	99	(95-100)	97	(92-99)	94	(89-97
2014-2016	135	99	(95-100)	99	(95-100)	99	(95-100)		,
2017-2019	135	99	(95-100)	99	(95-100)	98	(94-100)		
2020-2023	116	100	-		. ,		. ,		

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11.1.5 Paediatric kidney recipients - living donor

Long-term graft survival in paediatric recipients for living donor kidney transplants in the UK is shown in **Figure 11.5**. **Table 11.9** shows graft survival estimates and confidence intervals for each time period analysed. There were no statistically significant changes in graft survival over time (p>0.2). **Table 11.10** shows the patient survival estimates and confidence intervals for one, two, five and ten years post-transplant. There were no statistically significant changes in patient survival over time (p>0.7).



Year of	No. at risk		% Gra	aft sur	vival (95%	confid	dence inter	rval)						
transplant	on day 0	plant on day 0		ansplant on day 0		splant on day 0 One year		ne year	Tw	o year	Five year		Ten year	
2011-2013	182	97	(93-99)	94	(90-97)	91	(86-94)	82	(75-87)					
2014-2016	210	97	(93-98)	96	(92-98)	94	(89-96)							
2017-2019	187	98	(95-99)	96	(92-98)	93	(88-96)							
2020-2023	264	99	(97-100)		. ,		. ,							

Table 11.10	Patient survival after	first paediatric living	g donor kidne	y transplant
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Year of	No. at risk		% Patie	ent su	rvival (95%	o conf	idence inte	rval)	
transplant	on day 0	y 0 One yea		year Two year		Fi	ve year	Ten year	
2011-2013	182	99	(96-100)	99	(96-100)	99	(96-100)	98	(94-99)
2014-2016	210	99	(96-100)	99	(96-100)	98	(95-99)		. ,
2017-2019	187	99	(96-100)	99	(96-100)	98	(94-99)		
2020-2023	264	99	(96-100)		. ,		. ,		

11.2 Pancreas graft and patient survival

11.2.1 Simultaneous pancreas/kidney transplants - donor after brain death (DBD)

Figure 11.6 shows long-term pancreas graft survival in recipients receiving their first simultaneous pancreas/kidney (SPK) transplant performed from donors after brain death. Graft and patient survival estimates and confidence intervals are shown at one, two, five and ten years post-transplant in **Table 11.11** and **Table 11.12** respectively. Results relate to adults only as there are no paediatric pancreas transplant recipients. There was a significant difference in graft survival at two years (p=0.03). There was a significant difference in patient survival at one year (p=0.05).

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Table 11.11	Pancreas gr	Pancreas graft survival after first SPK transplant from a DBD									
Year of No. at risk % Graft survival (95% confidence interval) transplant on day 0 One year Two year Five year Ten y											
iranspiant	uanspiani	on day o	UI	e year	IVV	o year	FIV	e year	Ie	ii yeai	
2011-2013	394	86	(82-89)	84	(79-87)	79	(75-83)	70	(65-75		
2014-2016	337	90	(86-93)	89	(85-91)	85	(80-88)				
2017-2019	343	92	(88-94)	90	(86-93)	84	(80-88)				
2020-2023	297	89	(85-92)		. ,		. ,				

Year of	No. at risk		% Pati	ont cu	rvival (95%	/ conf	idence int	orval)	
transplant			ne year		o year	Five year		Ten year	
2011-2013	394	96	(94-98)	94	(92-96)	88	(84-91)	73	(67-77)
2014-2016	339	97	(94-98)	96	(94-98)	89	(85-92)		. ,
2017-2019	344	99	(97-100)	98	(95-99)	92	(88-95)		
2020-2023	299	95	(92-97)		· · /		```		

11.2.2 Simultaneous pancreas/kidney transplants - donor after circulatory death (DCD)

Figure 11.7 shows pancreas graft survival in recipients receiving their first SPK transplant performed from donors after circulatory death. Graft and patient survival estimates and confidence intervals are shown at one, two, five and ten years in **Table 11.13** and **Table 11.14** respectively. Results are for adult patients only. There has been a significant improvement in two- and five-year graft survival over the time periods shown, p<0.05. Differences in patient survival are not significant over time (p>0.1).



Year of	No. at risk		% G	raft su	rvival (95%	∕₀ conf	idence int	erval)	
ransplant	on day 0	Or	ne year	Ти	vo year	Fiv	ve year	Те	en year
2011-2013	99	88	(80-93)	82	(73-88)	80	(70-86)	68	(57-76
2014-2016	136	86	(79-91)	84	(76-89)	76	(68-82)		
2017-2019	137	94	(89-97)	94	(89-97)	91	(84-95)		
2020-2023	141	89	(83-94)		. ,		. ,		

Table 11.14	Patient surv	urvival after first SPK transplant from a DCD									
Year of	No. at risk		% Pat	ient s	urvival (95%	∕₀ con	fidence int	erval)			
transplant	on day 0	on day 0 One ye		T۱	wo year	Five year		Ten year			
2011-2013	100	99	(93-100)	98	(92-99)	94	(86-97)	82	(72-89		
2014-2016	136	99	(95-100)	98	(93-99)	92	(86-96)				
2017-2019	137	99	(95-100)	98	(94-100)	94	(87-97)				
2020-2023	142	96	(91-98)		. ,		. ,				

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11.2.3 Pancreas only transplants - donor after brain death (DBD)

Figure 11.8 shows long-term graft survival in recipients receiving their first pancreas only transplant performed from donors after brain death. Graft and patient survival estimates and confidence intervals are shown at one, two, five and ten years in **Table 11.15** and **Table 11.16** respectively. Results are for adult patients only. There were significant differences in graft survival at two and five years (p=0.03 and p=0.01 respectively). There were no statistically significant changes in patient survival over time (p>0.4).



Table 11.15	Graft surviv	val after first pancreas only transplant from a DBD									
Year of	No. at risk		% Gra	aft sur	vival (95%	confi	dence inte	rval)			
ransplant	on day 0	On	e year	Tw	Two year		e year	Ten year			
2011-2013	56	64	(50-75)	55	(41-67)	44	(31-57)	37	(24-50)		
2014-2016	38	84	(68-93)	79	(62-89)	70	(53-82)				
2017-2019	24	88	(66-96)	71	(48-85)	71	(48-85)				
2020-2023	15	72	(40-88)		. ,		. ,				

Table 11.16	Patient survival after first pancreas only transplant from a DBD								
Year of transplant	No. at risk on day 0	On	% Pati e year		rvival (95%) vo year		dence inte e year	erval) Ten year	
2011-2013 2014-2016 2017-2019 2020-2023	56 38 24 15	98 97 96 100	(87-100) (83-100) (73-99) -	98 95 91	(87-100) (80-99) (68-98)	77 89 86	(61-88) (73-96) (62-95)	57	(39-71)



11.2.4 Pancreas only transplants - donor after circulatory death (DCD)

Figure 11.9 shows pancreas graft survival in recipients receiving their first pancreas only transplant performed from donors after circulatory death. Graft and patient survival estimates and confidence intervals are shown at one, two, five and ten years in **Table 11.17** and **Table 11.18** respectively. Results are for adult patients only and are based on small numbers so should be interpreted with caution.

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Table 11.17	Graft surviv	rvival after first pancreas only transplant from a DCD									
Year of transplant	No. at risk on day 0	Or	% Gr ne year		rvival (95% vo year		idence inte ve year		en year		
2011-2013 2014-2016 2017-2023	20 9 7	80 100 86	(55-92) - (33-98)	69 88 69	(43-85) (39-98) (21-91)	51 70 69	(27-71) (22-92) (21-91)	37	(15-59)		

Year of	No. at risk	95% confidence interval)							
transplant	on day 0	Or	ne year	Тм	vo year	Five year Te			en year
2011-2013	20	95	(68-99)	95	(68-99)	95	(68-99)	87	(56-97)
2014-2016	9	100	-	100	-	67	(28-88)		
2017-2023	7	100	-	100	-	100	-		

11.3 Cardiothoracic patient survival

11.3.1 Adult heart recipients – donors after brain death (DBD)

Long-term patient survival for adult (\geq 16 years) recipients after first heart only transplant performed from donors after brain death is shown in **Figure 11.10**. Super-urgent, urgent and non-urgent patients are included. **Table 11.19** shows the patient survival estimates and confidence intervals for one, two, five and ten years post-transplant for each transplant era. There was a statistically significant difference in patient survival at one-year (p=0.01).



Year of	No. at risk		% Pati	ent su	rvival (95%	∕₀ conf	idence int	erval)					
ransplant	nsplant on day 0		nsplant on day 0		ant on day 0		y 0 One year T			Five year		Ten year	
2011-2013	366	84	(80-87)	81	(77-85)	72	(67-76)	65	(59-69				
2014-2016	437	83	(79-86)	78	(74-81)	71	(67-75)		-				
2017-2019	385	83	(78-86)	79	(75-83)	73	(69-78)						
2020-2023	491	89	(86-92)		· · · ·		· · ·						



11.3.2 Adult heart recipients – donors after circulatory death (DCD)

Long-term patient survival for adult (>16 years) recipients after first heart only transplant performed from donors after circulatory death is shown in **Figure 11.11**. Super-urgent, urgent, and non-urgent patients are included. **Table 11.20** shows the patient survival estimates and confidence intervals for one, two, and three years post-transplant for each transplant era.



Table 11.20	Patient survi	val after	first adult he	eart only	transplant fro	om a DCI)
Year of transplant	No. at risk on day 0	% Patient survival (95% confidence interval) One year Two year Three yea					
2017-2019 2020-2023	76 153	84 87	(74-91) (80-91)	82	(71-89)	79	(68-87)



11.3.3 Adult heart-lung block recipients – donors after brain death (DBD)

Patient survival for adult recipients after first heart-lung block transplant from donors after brain death is shown in **Figure 11.12**. Patient survival estimates and confidence intervals for each time period analysed are shown in **Table 11.21**. The number of transplants is small and thus confidence intervals for survival estimates are wide and overlap between eras indicating no statistically significant difference (p>0.1).

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Table 11.21	Patient surv	ival af	ter first ad	ult hea	art-lung blo	ock tra	ansplant fr	om a l	DBD
Year of transplant	No. at risk on day 0	On	% Pati e year		rvival (95% o year		idence inte e year		n year
2011-2016 2017-2023	22 28	82 75	(59-93) (54-87)	82 66	(59-93) (45-81)	73 62	(49-87) (40-77)	55	(32-72)

11.3.4 Adult lung recipients - donors after brain death (DBD)

Patient survival for adult recipients after first lung only transplant from donors after brain death is shown in **Figure 11.13**, with survival estimates and confidence intervals shown in **Table 11.22**. Super-urgent, urgent and non-urgent patients are included. There were no statistically significant differences in patient survival across eras (p>0.4).

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Table 11.22	Patient surv	ival af	ter first ad	ult lun	g only trai	nsplar	nt from a D	BD	
Year of transplant	No. at risk on day 0	On	% Pati e year		rvival (95% o year		idence inte e year		n year
2011-2013 2014-2016 2017-2019 2020-2023	453 422 388 299	82 80 84 83	(78-85) (76-84) (80-87) (78-87)	75 72 75	(71-79) (67-76) (71-79)	58 55 56	(53-62) (50-60) (51-61)	35	(31-40)

11.3.5 Adult lung recipients - donors after circulatory death (DCD)

Patient survival for adult recipients after first lung only transplant from donors after circulatory death is shown in **Figure 11.14**, by era, with survival estimates and confidence intervals shown in **Table 11.23**. Super-urgent, urgent and non-urgent patients are included. There were no statistically significant differences in patient survival across eras (p>0.7).



Table 11.23	Patient surv	ival all	ler mist aut	in iun	y only trai	ispiai			
Year of	No. at risk		% Patie	ent su	rvival (95%	∕₀ conf	idence int	erval)	
transplant	on day 0	On	ne year	Τw	o year	Fiv	e year	Te	n year
2011-2013	87	77	(66-84)	69	(58-77)	52	(41-62)	36	(26-46
2014-2016	95	81	(72-88)	67	(57-76)	51	(40-60)		
2017-2019	109	76	(67-83)	73	(64-81)	56	(46-65)		
2020-2023	103	82	(74-89)		. ,		. ,		



11.3.6 Paediatric heart recipients – donors after brain death (DBD)

Long-term patient survival for paediatric recipients after first heart only transplant from donors after brain death is shown in **Figure 11.15**. Superurgent, urgent and non-urgent patients are included. **Table 11.24** shows the patient survival estimates and confidence intervals for one, two, five, and ten years post-transplant. There were no statistically significant differences in patient survival across eras (p>0.7). The number of heart-lung transplant recipients was too small to analyse.

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Table 11.24	Patient surv	ival aft	er first pae	ediatri	c heart on	ly trar	nsplant fro	m a Di	BD
Year of transplant	No. at risk on day 0	On	% Patie e year		rvival (95% vo year		idence inte e year	_'	n year
2011-2013 2014-2016 2017-2019 2020-2023	90 101 78 96	92 91 92 93	(84-96) (84-95) (84-96) (85-96)	91 89 91	(83-95) (81-94) (82-96)	83 82 86	(74-90) (73-88) (76-92)	82	(72-89)

11.3.7 Paediatric lung recipients - donors after brain death (DBD)

Long-term patient survival for paediatric recipients after first lung only transplant from donors after brain death is shown in **Figure 11.16**. Superurgent, urgent and non-urgent patients are included. **Table 11.25** shows the patient survival estimates and confidence intervals for one, two, five, and ten years post-transplant. There were no statistically significant differences in patient survival across eras (p>0.05).



Table 11.25	Patient surv	ival af	ter first pa	ediatri	ic lung onl	y tran	splant fror	n a DE	BD
Year of transplant	No. at risk on day 0	On	% Patient survival (95% confidence interval) One year Two year Five year Ten yea						
2011-2016 2017-2023	32 20	90 70	(73-97) (44-85)	87 70	(69-95) (44-85)	76 46	(55-88) (21-69)	53	(31-70)



11.4 Liver patient survival

11.4.1 Adult liver recipients - donor after brain death (DBD)

Long-term patient survival for adult (\geq 17 years) recipients after first elective NHS Group 1 liver only transplants from donors after brain death is shown in **Figure 11.17**. **Table 11.26** shows patient survival estimates at one, two, five, and ten years post-transplant. There were no statistically significant differences in patient survival across eras (p>0.09). Whole liver transplants are included as well as reduced and split liver transplants.

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Table 11.26	Patient surv from a DBD	ival af	ter first ele	ective	adult NHS	Group	o 1 liver or	nly tran	nsplant
Year of transplant	No. at risk on day 0				idence int e year		n year		
2011-2013	1278	93	(92-95)	91	(89-92)	84	(82-86)	70	(67-72)
2014-2016	1394	93	(92-95)	91	(90-93)	84	(82-86)		
2017-2019	1648	95	(94-96)	93	(91-94)	84	(82-86)		
2020-2023	1706	95	(94-96)						

11.4.2 Adult liver recipients - donor after circulatory death (DCD)

Patient survival for adult (\geq 17 years) recipients after first elective NHS Group 1 liver only transplants from donors after circulatory death is shown in **Figure 11.18**. **Table 11.27** shows patient survival estimates at one, two and five years post-transplant. There is evidence of a change in one- and two-year patient survival over time (p<0.001).

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Table 11.27	Patient surv from a DCD	ival af	ter first ele	ective	adult NHS	Grou	o 1 liver or	ily trai	nsplant
Year of transplant	No. at risk on day 0	On	% Pati e year		rvival (95% o year		idence int e year		n year
2011-2013 2014-2016 2017-2019 2020-2023	400 559 534 742	93 94 94 94	(89-95) (92-96) (92-96) (93-96)	89 92 91	(86-92) (89-94) (89-94)	80 82 83	(75-83) (78-85) (79-86)	67	(62-72)

11.4.3 Paediatric liver recipients – donor after brain death (DBD)

Figure 11.19 and **Table 11.28** show long-term patient survival estimates for first elective liver only transplants from donors after brain death in paediatric (<17 years) recipients. There has been statistically significant changes in two- and five-year patient survival over the time period analysed (p<0.02). The number of paediatric transplants from donors after circulatory death was too small to estimate meaningful patient survival.

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Table 11.28	Patient surv from a DBD		fter first ele	ective	paediatric	liver c	only transp	olant		
Year of transplant	No. at risk on day 0	Or	% Patie ne year		rvival (95% o year		idence inte e year	nterval) Ten year		
2011-2013	161	94	(90-97)	93	(88-96)	90	(85-94)	89	(83-93)	
2014-2016	149	99	(95-100)	98	(94-99)	97	(93-99)			
2017-2019	152	94	(89-97)	91	(85-94)	89	(83-93)			
2020-2023	205	96	(92-98)		. ,		. ,			

11.5 Intestinal patient survival

Figure 11.20 and **Table 11.29** show patient survival estimates for recipients receiving their first intestinal transplant, by recipient age group (adults aged \geq 18 years) and transplant era. Results should be interpreted cautiously due to the small cohort and the heterogeneity of transplant types (both transplants that involve and do not involve the liver are included).

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Table 11.29	Patient survi	val after	first intestin	al transp	plant		
Recipient age group	No. at risk on day 0	On	% Patient su e year		5% confiden o year		/al) ee year
Adult 2016-2019	57	89	(78-95)	82	(69-90)	78	(65-87)
2020-2023 Paediatric	61	80	(68-88)		(00 00)		(00 01)
2016-2019 2020-2023	14 19	79 95	(47-93) (68-99)	79	(47-93)	71	(41-88)

11.6 Corneal graft survival

11.6.1 Cornea grafts for keratoconus

Figure 11.21 shows graft survival estimates for first corneal transplant for keratoconus (KC). Graft survival estimates and confidence intervals are shown by transplant year at one, two and five years in **Table 11.30**.

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			_				
Year of	No. at risk		% Graft su	rvival (9	5% confiden	ce interv	al)
transplant	on day 0	Or	One year Two year				ve year
2011-2013	1537	97	(96-98)	96	(95-97)	93	(91-94)
2014-2016	1431	98	(97-98)	96	(95-97)	93	(91-95)
2017-2019	1232	97	(96-98)	96	(95-97)	90	(87-92)
2020-2023	754	96	(94-97)		. ,		. ,

11.6.2 Cornea grafts for Fuchs endothelial dystrophy

Figure 11.22 shows graft survival estimates for first corneal transplant for Fuchs endothelial dystrophy (FED). Graft survival estimates and confidence intervals are shown by transplant year at one, two and five years in **Table 11.31**.

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Year of	No. at risk		% Graft su	rvival (9	5% confidend	ce interv	al)		
transplant	plant on day 0		nt on day 0		ne year	Ťv	vo year	Five year	
2011-2013	1680	92	(91-94)	89	(87-90)	81	(79-83)		
2014-2016	2107	91	(90-92)	87	(86-89)	81	(78-83)		
2017-2019	2607	91	(90-92)	88	(87-89)	81	(79-83)		
2020-2023	2103	90	(88-91)		. ,		. ,		

11.6.3 Cornea grafts for pseudophakic bullous keratopathy

Figure 11.23 shows graft survival estimates for first corneal transplant for pseudophakic bullous keratopathy (PBK). Graft survival estimates and confidence intervals are shown by transplant year at one, two and five years in Table 11.32.

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Table 11.32 Graft survival after first corneal graft for PBK

Year of	No. at risk		% Graft su	rvival (9	5% confidend	ce interv	al)
transplant	on day 0	Or	ne year	Ťv	vo year	Fiv	ve year
2011-2013	1176	90	(88-91)	81	(78-83)	61	(57-65)
2014-2016	1273	89	(87-91)	82	(80-85)	63	(60-67)
2017-2019	1296	90	(88-91)	82	(79-84)	60	(56-64)
2020-2023	1255	85	(83-87)		. ,		. ,



NHS Organ Donor Register (ODR)

Key messages

- Opt out legislation has been implemented in Wales (2015), Jersey (2019), England (2020), Scotland (2021), Guernsey (2023) and Northern Ireland (2023)
- 28.4 million people were on the opt-in ODR at March 2025 (42% of the population)
- 2.7 million people were on the opt-out ODR at March 2025 (4% of the population)
- 173 people were appointed representative registrations on the ODR at March 2025
- 60% of the 1,403 deceased organ donors last year were on the opt-in ODR
- 4% of ODR registrations last year were through the NHS App

It should be noted that an improved method of recording registrant deaths was implemented in 2023, resulting in a significant reduction in the number of registrants recorded on the NHS Organ Donor Register, but more accurately reflecting the number of living registrants.

By the end of March 2025, the NHS Organ Donor Register (ODR) held just over 28.4 million opt-in registrations. A summary of the number of registrations at the end of each financial year from 31 March 2016 to 31 March 2025, is shown in **Figure 12.1**.

By the end of March 2025, the NHS Organ Donor Register (ODR) held just under 2.7 million opt-out registrations. A summary of the number of opt-out registrations at the end of each financial year from 31 March 2016 to 31 March 2025 is shown in **Figure 12.2**.

Of the 1,403 deceased organ donors in 2024-2025, 60% were registered on the ODR, representing an increase of 4% from 2023-2024.





Those registered on the ODR come from all parts of the UK. **Table 12.1** shows the percentage of the population registered (opt-in) in each country/NHS region at 31 March 2025, and the number of opt-in registrants. No adjustment has been made for any differences in demographics of the populations.

Table 12.2 shows the number of opt-out registrants in each country/NHS region at 31 March 2025. The proportion of the population that registered an opt-out was 5.9% in Wales, and less for other countries and NHS regions. In the time period, Wales, England, Scotland, Guernsey and Northern Ireland have opt-out legislation in place, but it is possible for people anywhere in the UK to opt-out. There has been an increase in opt-out registrations from across the UK ahead of the implementation of opt-out. In addition, there have been 173 appointed representative registrations. An appointed representative(s), in circumstances where donation is possible, will be asked if organs should be donated.

	registrations on the NHS Org ntry/ NHS region	gan Donor Register by	31 March 2025,
Country/ NHS region of residence	Ν	Registrants pmp	Proportion registered
North East and Yorksh North West Midlands East of England London South East South West	ire 3,544,981 2,678,130 3,912,652 2,800,908 2,852,640 4,113,059 2,887,805	431,263 356,134 356,994 437,642 321,605 438,492 501,355	43% 36% 36% 44% 32% 44% 50%
England Isle of Man Channel Islands Wales	2,007,005 22,790,175 57,988 30,225 1,387,162	399,058 724,850 177,794 443,183	40% 72% 18% 44%
Scotland Northern Ireland	2,946,671 1,082,155	540,674 566,573	54% 57%
TOTAL¹ ¹ Includes 70,321 registra	28,364,697 nts where the postcode was unkr	419,596	42%



Table 12.2.Opt-out registraby country/ NHS		gan Donor Register b	y 31 March 2025,
Country/ NHS region of residence	Ν	Registrants pmp	Proportion registered
North East and Yorkshire	319,846	38,911	3.9%
North West	297,581	39,572	4.0%
Midlands	475,362	43,372	4.3%
East of England	219,728	34,333	3.4%
London	594,428	67,016	6.7%
South East	246,980	26,330	2.6%
South West	130,688	22,689	2.3%
England	2,284,613	40,004	4.0%
Isle of Man	863	10,788	1.1%
Channel Islands	2,402	14,129	1.4%
Wales	183,692	58,688	5.9%
Scotland	186,259	34,176	3.4%
Northern Ireland	25,847	13,532	1.4%
TOTAL ¹	2,684,786	39,716	4.0%
¹ Includes 1,110 registrants where t	he postcode was unknov	vn	

There are a number of registration routes to opt-in on the ODR: when registering as a patient with a General Practitioner (via the GMS1 paper form); with driving licence applications and other driving services (via the Driver and Vehicle Licensing Agency (DVLA)); the NHS App; online registrations via the NHSBT Organ Donation website (<u>www.organdonation.nhs.uk</u>); Wales and Scotland organ donation websites, NHSBT paper forms and by telephone. There are also various external links delivering traffic to the NHSBT Organ Donation website (such as in newspapers and radio).

The source of applications for opt-in registration on the ODR is illustrated in **Figure 12.3**. This figure shows that 89% of registrations in 2024-2025 arrived by means of registering through driving licence applications and reminders through the DVLA and 7% online through the Organ Donation website. There has been little change in applications for opt-in registrations through the NHS App, 5% in 2023-2024 and 4% 2024-2025.





At the end of March 2025, 82% of registrants, where the information was available, indicated a willingness to donate all organs and tissue (kidneys, pancreas, heart, lungs, liver and corneas). However, of those who were not willing to donate all organs, the majority (65%) did not wish to donate their corneas. Of the restricted registrations, only 6% (1% of the total register) did not wish to donate their kidneys. Willingness to donate, by organ type, is shown in **Table 12.3**.

31 March 202	5 to donate different organs ¹			
Registrants prepared to donate all organs 82%				
Of those not prepared to do	nate all organs ('restricted donoi	rs'):		
Not prepared to donate:	% of 'Restricted donors'	% of all registrants		
Kidney	6	0.9		
Pancreas	15	2.3		
Heart	16	2.3		
Lungs	15	2.2		
Liver	10	1.4		
Corneas	65	9.5		

People of all ages are eligible for organ donor registration: the distribution of age by sex at time of opt-in registration is shown in **Figure 12.4**. The highest proportion of registrations (22.1% of males and 23.9% of females) are in the 21-30 years age group. The lowest proportions are in the under 16 age groups. Of all people registered on the NHS Organ Donor Register, 46% are male and 53% are female (1% unknown).



The distribution of age of people registering an opt-in on the ODR during the latest financial year, 2024-2025, is shown in **Figure 12.5**. The highest proportion of registrations in this year were in the 16-20 years age group. Of the registrants in 2024-2025, 49% were male and 51% were female (<1% unknown).





The breakdown of opt-in registrants on the ODR during 2024-2025 by socio-economic group (using the ACORN¹ classification, based on postcode) is shown in **Figure 12.6**, where it is compared with the general UK population. Though having similar distributions, there were proportionately more 'affluent achievers' and less 'urban adversity' or 'financially stretched' on the ODR than in the general population.



¹ ACORN data supplied by CACI Ltd.




National Potential Donor Audit

Key messages

- There were 35,467 audited deaths reported through the Potential Donor Audit in 2024-2025, including 1,398 (99.6%) of the 1,403 deceased organ donors.
- Compared to the previous financial year, the overall referral rate of potential donors has remained high, 94% in both 2023-2024 and 2024-2025. The proportion of donation decision conversations where a Specialist Nurse – Organ Donation was present has dropped slightly in 2024-2025 from 93% to 92%, and the overall consent/authorisation rate continues to decline in 2024-2025, from 60% to 59%.
- The consent/authorisation rate was 87% when a patient had expressed an opt in decision, but 173 families overruled their loved one's decision to be an organ donor
- A significant difference is still apparent in the consent/authorisation rates for white patients and patients from ethnic minority groups (63% and 33% respectively).

13.1 Introduction

In this chapter, summary data from the National Potential Donor Audit (PDA) are shown for 1 April 2024 to 31 March 2025 and data from the previous three financial years are also provided for comparison purposes. The data comprise all audited patient deaths in UK Intensive Care Units (ICUs) and emergency departments, excluding wards and patients over 80 years of age, in the time period. Paediatric ICU data are included however neonatal ICU data have been excluded. The data are based on information received by 8 May 2025. The number of solid organ donors reported in this chapter will differ from that shown in the rest of the report, due to the national PDA excluding specific patients.

13.2 Definitions

All data shown in this chapter use the following definitions.

Eligible donors after brain death (DBD) are defined as patients for whom death was confirmed following neurological tests and who had no absolute medical contraindications to solid organ donation.

Eligible donors after circulatory death (DCD) are defined as patients who had treatment withdrawn and death was anticipated, with no absolute medical contraindications to solid organ donation.

Absolute medical contraindications to organ donation are listed here: https://nhsbtdbe.blob.core.windows.net/umbraco-assets-corp/32650/pol188.pdf

Imminent death anticipated patients who are not confirmed dead using neurological criteria, receiving invasive ventilation, a clinical decision to withdraw treatment has been made and a controlled death is anticipated within a time frame to allow donation to occur.

Neurological death suspected patients who meet all of the following criteria: invasive ventilation, Glasgow Coma Scale 3 not explained by sedation, no respiratory effort, fixed pupils, no cough or gag reflex. Excluding those not tested as cardiac arrest occurred despite resuscitation, brain stem reflexes returned, or neonates less than 2 months post term.

Neurological death testing rate is the percentage of patients for whom neurological death was suspected who were tested.

Referral rate is the percentage of patients for whom neurological death was suspected or imminent death was anticipated, who were referred to the Specialist Nurse - Organ Donation (SN-OD).

Donation decision conversation is where the family of eligible donors are asked to make or support patient's organ donation decision, this includes clarifying an opt out decision.

SN-OD presence rate is the percentage of eligible donor donation decision conversations where a SN-OD was present (includes telephone and video call conversations).

Deemed consent applies if a person who died in Wales, England, Jersey, Guernsey or Northern Ireland meets deemed consent criteria: aged 18 or over, has not expressed an organ donation decision either to opt in, opt out or appoint a representative, has lived for longer than 12 months and is ordinarily resident in the country in which they died, and had the capacity to understand the notion of deemed consent for a significant period before their death. Note that where a patient has verbally expressed an opt out or opt in decision deemed consent does not apply.

Deemed authorisation applies if a person, who died in Scotland, meets deemed authorisation criteria: aged 16 or over, has not registered or expressed, in writing, an organ donation decision either to opt in or opt out, has lived for longer than 12 months and is ordinarily resident in Scotland, and had the capacity to understand the notion of deemed authorisation for a significant period before their death. Note that, in Scotland, a patient who has verbally expressed an opt in decision is included as a deemed authorisation, whereas a patient who has verbally expressed an opt out decision is not included.

Consent/authorisation rate is the percentage of eligible donor donation decision conversations where consent/authorisation was ascertained. Note that consent/authorisation rates have not been provided where the number of donation decision conversations is less than ten.

13.3 Breakdown of audited deaths in ICUs and emergency departments, 1 April 2024 – 31 March 2025

In the 12-month period there were a total of 35,467 audited patient deaths in the UK. **Figures 13.1 and 13.2** show a detailed breakdown from the number of audited patient deaths to the number of solid organ donors for potential DBD and DCD donors, respectively. In total there were 1,398 solid organ donors reported through the PDA, 99.6% of the total 1,403 deceased solid organ donors.

Table 13.1 shows the key percentages calculated from the flow chart information and **Table 13.2** provides a breakdown by Organ Donation Services Team (ODST). Consent/authorisation rates have also been provided, in **Table 13.1**, for cases where the SN-OD was/was not present for the donation decision conversation and by whether there was an expressed opt in decision or consent/authorisation was deemed. Details of expressed opt in decision and deemed consent/authorisation overrides are included in the footnote of the table.

An expressed opt in decision override is a case where the family overruled their loved one's known decision to donate and includes decisions registered on the ODR, those expressed verbally, or via an appointed/nominated representative. A deemed consent/authorisation override is a case where the family did not support deemed consent/authorisation.



Figure 13.1 Donation after brain death



Figure 13.2 Donation after circulatory death



¹ Patients for whom tests were not performed due to; cardiac arrest despite resuscitation occurred or brainstem reflexes returned are excluded from the calculation of the neurological death testing rate

² A large number of DCD donors are not approached due to the DCD screening process which precludes them from solid organ donation

Table 13.1 Summary of key percentages, 1 April 2024 to 31 March 2025

	DBD	DCD	ALL
Neurological death testing rate	72.0		
Referral rate	98.7	93.0	94.3
SN-OD presence rate	96.9	88.8	91.8
Consent/authorisation rate - SN-OD present for donation decision conversation - SN-OD not present for donation decision conversation	68.5 70.2 17.6	53.1 58.9 7.3	58.8 63.3 8.8
 All expressed opt in* Expressed ODR opt in (subset of all expressed opt in) Deemed consent/authorisation** 	94.0 93.4 57.3	81.6 81.1 42.7	86.5 85.7 48.2
- Other***	54.5	29.4	37.7

* 173 families overruled their loved one's expressed opt in decision to be an organ donor ** There were 1003 cases where deemed consent/authorisation applied and in 520 cases the family did not support deemed consent/authorisation *** Includes patients where nation specific deemed criteria are not met and the patient has not expressed a donation

decision in accordance with relevant legislation

Table 13.2 Summary of all deceased donor key percentages by Organ Donation Services Team (ODST), 1 April 2024 to 31 March 2025

ODST	Testing rate	Referral rate	SN-OD presence rate	Consent/ authorisation
0031				rate
Eastern	67.1	92.9	92.1	57.3
London	72.5	92.9	94.8	52.0
Midlands	70.9	90.7	88.7	55.3
North West	70.3	95.4	94.4	60.4
Northern	89.4	96.1	95.0	63.5
Northern Ireland	68.3	96.3	91.6	59.0
Scotland	73.2	97.0	87.2	63.1
South Central	65.9	94.2	90.2	59.1
South East	74.4	94.8	93.7	65.9
South Wales	83.1	98.0	82.2	57.4
South West	67.8	91.4	92.3	71.6
Yorkshire	71.1	98.2	94.6	49.8
TOTAL	72.0	94.3	91.8	58.8



13.4 Eligible donors

The number of eligible donors (as defined earlier) and rates per million population (pmp) are shown in **Table 13.3**, by NHS region. The number of actual donors pmp can be found in Table 3.2 of Chapter 3. Within England, eligible DBD ranged from 13.8 pmp in the East of England to 30.6 pmp in London. Eligible DCD ranged from 51.3 pmp in the Midlands to 71.3 pmp in the East of England.

Across the countries, there was a range of 51.2 eligible donors pmp in Scotland to 83.7 eligible donors pmp in Wales. Overall, there were 1,247 eligible DBD (18.4 pmp) and 3,735 eligible DCD (55.3 pmp) in the UK, resulting in a total of 73.7 eligible donors per million population. **Tables 13.4** and **13.5** show more detailed information by country/NHS region for DBD and DCD data, respectively.

Table 13.3 Eligible dono March 2025,	-			o), in the UK,	1 April 202	4 to 31
Country/	Eligibl	le DBD	Eligib	le DCD	тс	TAL
NHS region of donation	Ν	(pmp)	Ν	(pmp)	Ν	(pmp)
North East and Yorkshire North West Midlands East of England London South East South West	160 116 188 88 271 133 94	(19.5) (15.4) (17.2) (13.8) (30.6) (14.2) (16.3)	457 472 562 456 555 482 297	(55.6) (62.8) (51.3) (71.3) (62.6) (51.4) (51.6)	617 588 750 544 826 615 391	(75.1) (78.2) (68.4) (85.0) (93.1) (65.6) (67.9)
England Isle of Man Channel Islands	1050 2 0	(18.4) (25.0) (0.0)	3281 3 1	(57.5) (37.5) (5.9)	4331 5 1	(75.8) (62.5) (5.9)
Wales	67	(21.4)	195	(62.3)	262	(83.7)
Scotland	86	(15.8)	193	(35.4)	279	(51.2)
Northern Ireland	42	(22.0)	62	(32.5)	104	(54.5)
TOTAL	1247	(18.4)	3735	(55.3)	4982	(73.7)



Country/ NHS region of donation	Number of patients where neurological death was suspected	Neurological death testing rate (%)	DBD referral rate (%)	Number of eligible DBD donors	Number of eligible DBD donation decision conversations	DBD SN-OD presence rate (%)	DBD consen authorisation rate (%)
North East and Yorkshire	221	79.2	100.0	160	143	97.9	64.3
North West	180	68.9	99.4	116	94	100.0	66.0
Midlands	287	71.8	97.2	188	166	97.0	69.3
East of England	145	64.8	97.2	88	80	98.8	70.0
London	399	73.4	98.7	271	222	97.3	59.9
South East	208	67.8	100.0	133	123	98.4	78.9
South West	163	69.3	98.2	94	87	96.6	78.2
England	1603	71.5	98.7	1050	915	97.8	68.1
Isle of Man	2	100.0	100.0	2	2	100.0	100.0
Channel Islands	0			0	0		
Wales	88	81.8	100.0	67	56	91.1	76.8
Scotland	127	73.2	98.4	86	72	90.3	68.1
Northern Ireland	63	68.3	98.4	42	39	94.9	66.7
TOTAL	1883	72.0	98.7	1247	1084	96.9	68.5

Table 13.4DBD key metrics from the Potential Donor Audit, 1 April 2024 to 31 March 2025,
by country and NHS region

-	etrics from the Pote and NHS region	etrics from the Potential Donor Audit, 1 April 2024 to 31 March 2025, and NHS region								
Country/ NHS region of donation	Number of patients for whom imminent death was anticipated	DCD referral rate (%)	Number of eligible DCD donors	Number of eligible DCD donation decision conversations	DCD SN-OD presence rate (%)	DCD consent authorisation rate (%)				
North East and Yorkshire	774	97.2	457	235	92.8	48.5				
North West	783	94.6	472	157	92.4	55.4				
Midlands	794	88.8	562	289	85.1	50.9				
East of England	743	93.0	456	260	88.1	54.2				
London	780	90.4	555	251	92.8	45.4				
South East	669	92.8	482	233	89.3	57.5				
South West	368	90.5	297	161	89.4	65.2				
England	4911	92.6	3281	1586	89.7	53.1				
Isle of Man	3	100.0	3	0						
Channel Islands	1	0.0	1	0						
Wales	262	96.9	195	82	75.6	43.9				
Scotland	241	96.3	193	115	85.2	60.0				
Northern Ireland	85	95.3	62	44	88.6	52.3				
TOTAL	5503	93.0	3735	1827	88.8	53.1				



Tables 13.6 and **13.7** show more detailed information on the key metrics by Organ Donation Services Team (ODST) for DBD and DCD data, respectively. Specialist Nurses for Organ Donation (SN-ODs) work within an ODST, which covers an area of the UK. As seen in **Table 13.6**, the neurological death testing rate was highest for the Northern team and the DBD referral rate was 100% for 4 teams. The SN-OD presence rate was highest for the Northern team, where a SNOD was present for 100% of DBD donation decision conversations.

	BD key metrics fr y Organ Donation			t, 1 April 2024	to 31 March 202	25,	
ODST	Number of patients where neurological death was suspected	Neurological death testing rate (%)	DBD referral rate (%)	Number of eligible DBD donors	Number of eligible DBD donation decision conversations	DBD SN-OD presence rate (%)	DBD consent/ authorisation rate (%)
Eastern	173	67.1	97.7	109	98	98.0	68.4
London	306	72.5	99.3	209	173	97.7	60.1
Midlands	244	70.9	96.7	156	138	97.1	67.4
North West	202	70.3	99.5	132	105	98.1	66.7
Northern	94	89.4	100.0	75	66	100.0	77.3
Northern Ireland	63	68.3	98.4	42	39	94.9	66.7
Scotland	127	73.2	98.4	86	72	90.3	68.1
South Central	126	65.9	100.0	76	69	97.1	71.0
South East	180	74.4	98.3	123	107	99.1	73.8
South Wales	77	83.1	100.0	60	52	94.2	80.8
South West	149	67.8	98.0	84	78	96.2	82.1
Yorkshire	142	71.1	100.0	95	87	95.4	56.3
TOTAL	1883	72.0	98.7	1247	1084	96.9	68.5



Table 13.7 indicates that for DCD patients, the highest referral rate was 97.9% for the Yorkshire team and the highest proportion of DCD donation decision conversations for which a SN-OD was present was 94.1% for the Yorkshire team. No account has been taken of the demographics of the populations within the teams which may impact on the rates presented.

ODST	Number of patients for whom imminent death was anticipated	DCD referral rate (%)	Number of eligible DCD donors	Number of eligible DCD donation decision conversations	DCD SN-OD presence rate (%)	DCD consent/ authorisation rate (%)
Eastern	843	92.2	532	293	90.1	53.6
London	537	90.1	375	175	92.0	44.0
Midlands	706	88.7	506	260	84.2	48.8
North West	871	94.7	535	165	92.1	56.4
Northern	284	95.1	207	93	91.4	53.8
Northern Ireland	85	95.3	62	44	88.6	52.3
Scotland	241	96.3	193	115	85.2	60.0
South Central	448	93.1	318	146	87.0	53.4
South East	471	93.2	348	163	90.2	60.7
South Wales	185	97.3	139	77	74.0	41.6
South West	307	88.9	254	144	90.3	66.0
Yorkshire	525	97.9	266	152	94.1	46.1
TOTAL	5503	93.0	3735	1827	88.8	53.1

Table 13.8 shows key metrics separately for patients meeting the PDA criteria who were referred in an ICU or an emergency department (irrespective of where the patient died), for DBD and DCD, respectively. Note that the total number of patients in this table and the associated rates do not match the other tables throughout this chapter as Table 13.8 is based on the subset of patients who were referred to the ODST.

Table 13.9 shows key metrics separately for adult and paediatric patients, for DBD and DCD, respectively. Note that of the 86 paediatric patients for whom neurological death was suspected, tests were not performed on 36 patients.



Eligible donor type	Unit where patient was referred from	Number of patients who were referred ¹	Neurological death testing rate (%)	Number of eligible donors	Number of eligible donor donation decision conversations	SN-OD presence rate (%)	Consent/ authorisation rate (%)	Number o actual donors ²
DBD	Critical care	1822	72.9	1223	1063	97.1	68.6	681
	Emergency dept.	29	69.0	18	17	94.1	70.6	11
	Other	8	87.5	5	3	66.7	66.7	2
	TOTAL	1859	72.9	1246	1083	97.0	68.6	694
DCD	Critical care	5000		3422	1775	89.6	53.7	691
	Emergency dept.	90		61	30	80.0	43.3	9
	Other	28		19	8	87.5	50.0	4
	TOTAL	5118		3502	1813	89.5	53.5	704

0 DCD donors referred from emergency departments and 1 DCD donor referred from an other unit.



Eligible donor type	Age group	Number of patients who met referral criteria ¹	Neurological death testing rate (%)	Referral rate (%)	Number of eligible donors	Number of eligible donor donation decision conversations	SN-OD presence rate (%)	Consent/ authorisation rate (%)	Number of actual donors ²
DBD	Adult (>=18) Paediatric (<18) TOTAL	1797 86 1883	72.7 58.1 72.0	98.8 96.5 98.7	1206 41 1247	1049 35 1084	96.9 94.3 96.9	68.9 57.1 68.5	674 20 694
DCD	Adult (>=18) Paediatric (<18) TOTAL	5302 201 5503		92.9 95.0 93.0	3576 159 3735	1765 62 1827	89.1 80.6 88.8	54.2 22.6 53.1	691 13 704



13.5 Consent/ authorisation rates

The overall DBD consent/authorisation rate was 69% and the 95% confidence limits for this percentage are 66% - 71%. For DCD, the overall rate was 53% and the 95% confidence limits are 51% - 55%.

Across the country/NHS region, the DBD consent/authorisation rates range from 60% in London to 79% in the South East. DCD consent/authorisation rates range from 45% in London to 65% in the South West (**Tables 13.4** and **13.5**).

The overall consent/authorisation rates (combining DBD and DCD) for England, Wales, Scotland and Northern Ireland were 59%, 57%, 63% and 59% respectively.

Consent/authorisation rates by Organ Donation Services Team are illustrated in **Figure 13.3** for both DBD and DCD. Caution should be applied when interpreting these consent/authorisation rates as no adjustment has been made for the mix of patients in terms of age, prior opt in decision and ethnicity.

Across the Organ Donation Services Teams, the DBD consent/authorisation rates range from 56% in the Yorkshire team to 82% in the South West team. DCD consent/authorisation rates range from 42% in the South Wales team to 66% in the South West team.





Table 13.10 shows the consent/authorisation rate separately for white patients and patients from ethnic minority groups. The national DBD consent/authorisation rates for white patients and patients from ethnic minority groups were 75% and 39%, respectively. A similar difference was observed for DCD consent/authorisation rates: 56% and 27%, respectively. Note that there were an additional 25 donation decision conversations where the ethnicity was not known or not reported.

The Northern, Northern Ireland, Scotland, South Wales, and South West teams each accounted for only 3% or less donation decision conversations where patients are from ethnic minority groups, whereas London accounted for 38%. Most teams had a very small proportion, therefore accounting for some of the variation observed in overall consent/authorisation rates between teams. Note that consent/authorisation rates have not been provided where the number of donation decision conversations is less than ten.

	Number of		e eligible don	015		Elig	ps	All			
ODST	eligible DBD donation decision conversations	DBD consent/ authorisation rate (%)	Number of eligible DCD donation decision conversations	DCD consent/ authorisation rate (%)	Overall consent/ authorisation rate (%)	Number of eligible DBD donation decision conversations	DBD consent/ authorisation rate (%)	Number of eligible DCD donation decision conversations	DCD consent/ authorisation rate (%)	Overall consent/ authorisation rate (%)	Overall consent/ authorisatio rate (%) ¹
Eastern	84	67.9	268	57.1	59.7	14	71.4	24	16.7	36.8	57.3
London	97	75.3	115	52.2	62.7	72	43.1	57	29.8	37.2	52.0
Midlands	113	73.5	226	51.3	58.7	25	40.0	33	33.3	36.2	55.3
North West	95	69.5	158	58.2	62.5	10	40.0	7	-	29.4	60.4
Northern	64	79.7	89	55.1	65.4	2	-	4	-	-	63.5
Northern Ireland	36	72.2	43	53.5	62.0	3	-	1	-	-	59.0
Scotland	67	70.1	106	63.2	65.9	5	-	3	-	-	63.1
South Central	56	76.8	133	55.6	61.9	13	46.2	13	30.8	38.5	59.1
South East	90	81.1	148	64.2	70.6	17	35.3	15	26.7	31.3	65.9
South Wales	47	85.1	72	43.1	59.7	5	-	4	-	-	57.4
South West	74	85.1	134	68.7	74.5	4	-	4	-	-	71.6
Yorkshire	67	70.1	142	48.6	55.5	20	10.0	7	-	7.4	49.8

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¹ Includes 25 donation decision conversations where the ethnicity was not known or not reported

Table 13.11 shows the reasons why the family did not give consent/authorisation, by donor type. The most common reason reported for why the families of both eligible DBD and DCD families did not give consent/authorisation was that the patient had previously expressed a decision not to donate. Overall, this reason was reported in 20% of cases. In DCD donation, families also commonly cited the long length of the donation process as the reason for not supporting organ donation, accounting for a further 20% of DCD cases.

	DE	Donor 3D	DC	D	То	tal
Primary reason why family did not support organ						
donation	Ν	%	Ν	%	Ν	%
Patient had previously expressed a wish not to donate	86	25.2	157	18.3	243	20.3
Family felt the length of time for the donation process was too long	14	4.1	173	20.2	187	15.6
Family were not sure whether the patient would have agreed to donation	34	10.0	110	12.8	144	12.0
Family felt patient had suffered enough	26	7.6	82	9.6	108	9.0
Family did not want surgery to the body	39	11.4	68	7.9	107	8.9
Other	20	5.9	66	7.7	86	7.2
Family felt it was against their religious/cultural beliefs	46	13.5	39	4.6	85	7.′
Strong refusal - probing not appropriate	22	6.5	40	4.7	62	5.2
Patient had registered a decision to Opt Out	14	4.1	43	5.0	57	4.8
Family divided over the decision	9	2.6	25	2.9	34	2.8
Family felt that the body should be buried whole (unrelated to religious/cultural reasons)	14	4.1	15	1.8	29	2.4
Family did not believe in donation	5	1.5	18	2.1	23	1.9
Family wanted to stay with the patient after death	4	1.2	12	1.4	16	1.3
Family concerned that organs may not be transplantable	4	1.2	5	0.6	9	0.8
Missing	0	-	3	0.4	3	0.3
Family had difficulty understanding/accepting neurological testing	2	0.6	0	-	2	0.2
amily concerned other people may disapprove/be offended	1	0.3	1	0.1	2	0.2
Family believe patient's treatment may have been limited to facilitate organ donation	1	0.3	0	-	1	0.1
TOTAL	341	100	857	100	1198	100

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13.6 Specialist Nurse - Organ Donation (SN-OD) presence

Table 13.12 shows the proportion of donation decision conversations where a SN-OD was present, for DBD and DCD separately, and overall. Nationally, 97% of DBD and 89% of DCD donation decision conversation had a SN-OD present. There is some variation between teams in the percentage of DCD donation decision conversations where a SN-OD was present, however SN-OD presence rates are good across all teams for DBD donation decision conversations.

ODST	Number of eligible DBD donation decision conversations	Number of eligible DBD donation decision conversations where SN-OD present	DBD SN-OD presence rate (%)	Number of eligible DCD donation decision conversations	Number of eligible DCD donation decision conversations where SN-OD present	DCD SN-OD presence rate (%)	Overall SN-OD presence rate (%)
Eastern	98	96	98.0	293	264	90.1	92.1
London	173	169	97.7	175	161	92.0	94.8
Midlands	138	134	97.1	260	219	84.2	88.7
North West	105	103	98.1	165	152	92.1	94.4
Northern	66	66	100.0	93	85	91.4	95.0
Northern Ireland	39	37	94.9	44	39	88.6	91.6
Scotland	72	65	90.3	115	98	85.2	87.2
South Central	69	67	97.1	146	127	87.0	90.2
South East	107	106	99.1	163	147	90.2	93.7
South Wales	52	49	94.2	77	57	74.0	82.2
South West	78	75	96.2	144	130	90.3	92.3
Yorkshire	87	83	95.4	152	143	94.1	94.6
TOTAL	1084	1050	96.9	1827	1622	88.8	91.8

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Table 13.13 shows the effect on the consent/authorisation rate when a SN-OD is present or not present for the donation decision conversation. Evidence shows that the family is more likely to support organ donation when a trained SN-OD is present for the donation decision conversation, and this is particularly apparent for eligible DCD donors. Again, there is wide variation between teams.

Caution should be applied when interpreting these rates as numbers of donation decision conversations are very small where a SN-OD is not present and no account has been taken of donation decisions which were initiated by the family, a patient's prior opt in decision or ethnicity.

	SN-OD Number of	present for o	donation deci Number of	sion conver	sation	SN-OD no Number of	ot present fo	r donation de Number of	cision conve	ersation	All
ODST	eligible DBD donation decision conversations	DBD consent/ authorisation rate (%)	eligible DCD donation decision conversations	DCD consent/ authorisation rate (%)	Overall consent/ authorisation rate (%)	eligible DBD donation decision conversations	DBD consent/ authorisation rate (%)	eligible DCD donation decision conversations	DCD consent/ authorisation rate (%)	Overall consent/ authorisation rate (%)	Overall consent/ authorisation rate (%)
Eastern	96	69.8	264	58.0	61.1	2	0.0	29	13.8	12.9	57.3
London	169	61.5	161	47.8	54.8	4	0.0	14	0.0	0.0	52.0
Midlands	134	67.2	219	56.2	60.3	4	75.0	41	9.8	15.6	55.3
North West	103	67.0	152	60.5	63.1	2	50.0	13	7.7	13.3	60.4
Northern	66	77.3	85	58.8	66.9	0	-	8	0.0	0.0	63.5
Northern Ireland	37	70.3	39	59.0	64.5	2	0.0	5	0.0	0.0	59.0
Scotland	65	75.4	98	69.4	71.8	7	0.0	17	5.9	4.2	63.1
South Central	67	73.1	127	61.4	65.5	2	0.0	19	0.0	0.0	59.1
South East	106	74.5	147	66.7	70.0	1	0.0	16	6.3	5.9	65.9
South Wales	49	83.7	57	56.1	68.9	3	33.3	20	0.0	4.3	57.4
South West	75	84.0	130	70.0	75.1	3	33.3	14	28.6	29.4	71.6
Yorkshire	83	59.0	143	49.0	52.7	4	0.0	9	0.0	0.0	49.8
TOTAL	1050	70.2	1622	58.9	63.3	34	17.6	205	7.3	8.8	58.8

Comparison with previous years 13.7

Table 13.14 and Figure 13.4 show the key metrics from the PDA for the last four financial years.

Eligible donor type	Financial year	Number of patients who met referral criteria ¹	Neurological death testing rate (%)	Referral rate (%)	Number of eligible donors	Number of eligible donor donation decision conversations	SN-OD presence rate (%)	Number of families who consented to/ authorised donation	Consent/ authorisation rate (%)	Number of actua donors
DBD	2021-2022	1918	80.0	98.8	1375	1241	95.8	862	69.5	787
	2022-2023	1993	78.3	99.2	1442	1247	95.4	845	67.8	782
	2023-2024	2034	75.6	99.4	1428	1261	96.5	858	68.0	788
	2024-2025	1883	72.0	98.7	1247	1084	96.9	743	68.5	694
DCD	2021-2022	5234		90.4	2993	1455	90.3	910	62.5	604
	2022-2023	5345		92.0	3492	1706	90.0	964	56.5	637
	2023-2024	5349		92.8	3648	1853	90.3	1023	55.2	710
	2024-2025	5503		93.0	3735	1827	88.8	970	53.1	704
TOTAL	2021-2022	6802		92.5	4368	2696	92.8	1772	65.7	1391
	2022-2023	6955		93.7	4934	2953	92.3	1809	61.3	1419
	2023-2024	6930		94.3	5076	3114	92.8	1881	60.4	1498
	2024-2025	6880		94.3	4982	2911	91.8	1713	58.8	1398

 ¹ DBD referral criteria: patients where neurological death was suspected (excluding those for which cardiac arrest occurred despite resuscitation or brain stem reflexes returned); DCD referral criteria: patients for whom imminent death was anticipated
 ² Actual donors resulting from eligible DBD donors includes 6 DCD donors in 2021-2022, 21 DCD donors in 2022-2023 and 29 DCD donors in 2023-2024 and 20 DCD donors in 2024-2025

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DBD referral rates have remained unchanged, with DCD referral rates having risen since 2021-2022. The DBD testing rate has been slowly decreasing whilst the SN-OD presence rate has remained unchanged in both DBD and DCD. The consent/authorisation rate for DBD has remained unchanged in recent years, whilst for DCD it has continued to decrease.



13.8 Consented/authorised cases not proceeding to solid organ donation

Consent/authorisation for donation was ascertained for 743 eligible DBD donors and 970 eligible DCD donors; 694 (93%) and 704 (73%) of these cases proceeded to donate at least one solid organ, respectively. **Table 13.15** shows the reasons why donation did not proceed for the 49 eligible DBD and 266 eligible DCD cases where consent/authorisation was ascertained. The main reasons reported for consented/authorised eligible DBD donors not proceeding to donate was that the organs were deemed to be medically unsuitable on surgical inspection or by transplant centres. The main reason for consented/authorised DCD donors was prolonged time to asystole, meaning that the donor did not die in a timeframe suitable for organ donation.



Table 13.15	Reasons why consented/authorised eligible donors did not proceed to donate,
	1 April 2024 to 31 March 2025, by donor type

		Donor	type			
	DE	BD	DC	D	То	tal
Primary reason why donation did not proceed	Ν	%	Ν	%	Ν	%
Clinical - PTA post WLST	0	-	131	49.2	131	41.6
Clinical - Organs deemed medically unsuitable by recipient centres	9	18.4	40	15.0	49	15.6
Consent / Auth - NOK withdraw consent / authorisation	3	6.1	19	7.1	22	7.0
Clinical - Organs deemed medically unsuitable on surgical inspection	13	26.5	8	3.0	21	6.7
Clinical - Patient actively dying	4	8.2	14	5.3	18	5.7
Consent / Auth - Coroner/Procurator fiscal refusal	5	10.2	13	4.9	18	5.7
Clinical - No transplantable organ	3	6.1	10	3.8	13	4.1
Clinical - Considered high risk donor	5	10.2	7	2.6	12	3.8
Clinical - Other	3	6.1	8	3.0	11	3.5
Clinical - Absolute contraindication to organ donation	3	6.1	5	1.9	8	2.5
Clinical - Patient's general medical condition	0	-	7	2.6	7	2.2
Clinical - Predicted PTA therefore not attended	0	-	2	0.8	2	0.6
Clinical - DCD clinical exclusion	0	-	1	0.4	1	0.3
Clinical - Patient asystolic	0	-	1	0.4	1	0.3
Consent / Auth - Other	1	2.0	0	-	1	0.3
TOTAL	49	100	266	100	315	100



Appendices

Appendix I provides details of the 1,403 deceased solid organ donors reported in 2024-2025. Details are given for each donating hospital and the hospitals have been grouped by NHS Region and country.

The number of donors by donor country/ NHS Region of residence is given for donors after brain death in **Appendix IIA** and donors after circulatory death in **Appendix IIB**.

The populations used for country / NHS Region per million population are given in **Appendix III** these populations are mid-2024 estimates based on ONS 2021 Census figures.

Appendix IV shows the import and export of organs to and from the UK in the last three financial years. **Appendix IVA** shows the number and type of transplants in the UK into non-UK residents. **Appendix IVB** and **Appendix IVC** show the number and type of transplants resulting from the import to and export from the UK, respectively. When organs are donated from deceased donors and cannot be used in that country, the organs are offered for use in other countries. This is usually because there is no suitable recipient because of blood group or size. The current EU Directive ensures that all organs that are imported into the UK are evaluated to the same high standards as in the UK. The UK has special arrangements with the Republic of Ireland so that some patients from Ireland will come to the UK for the transplant procedure where units in the UK have particular expertise. For those with fulminant hepatic failure, the UK and Ireland will also share livers. International sharing of organs represents a very small proportion of the UK transplant activity and is set up to ensure that all donated organs are used whenever appropriate.



	DBI	D	DCE)	All do	nors	Multi-o dor		Kidney	Pancreas	Liver	Bowel	Heart	Lι
South West							401							
Barnstaple, North Devon District Hospital	0	(2)	1	(0)	1	(2)	1	(2)	1	0	1	0	0	
Bath, Royal United Hospital	3	(O)	3	(4)	6	(4)	3	(0)	6	1	3	0	0	
Bournemouth, Royal Bournemouth General Hospital	5	(5)	5	(3)	10	(8)	8	(6)	10	2	8	0	0	
Bristol, Bristol Royal Hospital For Children	1	(2)	3	(1)	4	(3)	3	(3)	4	2	2	0	1	
Bristol, Bristol Royal Infirmary	5	(6)	6	(11)	11	(17)	10	(7)	10	4	7	0	2	
Bristol, Southmead Hospital	17	(18)	21	(23)	38	(41)	31	(31)	38	15	28	1	10	
Cheltenham, Cheltenham General Hospital	0	(1)	2	(2)	2	(3)	1	(2)	2	0	1	0	0	
Dorchester, Dorset County Hospital	5	(1)	1	(1)	6	(2)	5	(1)	6	1	5	0	0	
Exeter, Royal Devon And Exeter Hospital (Wonford)	7	(5)	1	(2)	8	(7)	7	(5)	8	3	7	Õ	Ũ	
Gloucester, Gloucestershire Royal Hospital	4	(3)	6	(1)	10	(4)	8	(2)	9	2	9	0	2	
Plymouth, Derriford Hospital	8	(19)	11	(15)	19	(34)	15	(28)	18	4	15	0	3	
Poole, Poole General Hospital	0 0	(4)	3	(3)	3	(7)	2	(20)	3	O	2	Ő	0	
Salisbury, Salisbury District Hospital	0	(2)	0	(2)	Ő	(4)	0	(4)	0	0 0	0	0	0	
Swindon, Great Western Hospital	0	(2)	0	(1)	0	(3)	0	(3)	0	0	0	0	0	
Taunton, Taunton And Somerset Hospital (Musgrove	3	(1)	3	(4)	6	(5)	4	(4)	6	0	4	0	0	
Park)	0	(1)	5	(-)	0	(0)	-	(-)	0	0	-	0	0	
Torquay, Torbay Hospital	2	(1)	8	(3)	10	(4)	6	(3)	10	1	6	0	1	
Truro, Royal Cornwall Hospital (Treliske)	4	(4)	9	(1)	13	(5)	10	(4)	13	1	10	0	0	
Weston-Super-Mare, Weston General Hospital	4	(0)	1	(0)	13		10	(4)	13	0	10	0	0	
Yeovil, Yeovil District Hospital	0	(0)	2	(0)	2	(0) (3)	0	(0)	2	0	0	0	0	
TOTAL	64	(77)	86	(Z) (79)	150 ²	(156)	115	(114)	147	36	109	1	19	
	04	(11)	00	(13)	150	(150)	115	(114)	147	50	105		15	
South East														
Ashford, William Harvey Hospital	7	(4)	4	(5)	11	(9)	7	(8)	11	1	6	0	2	
Aylesbury, Stoke Mandeville Hospital	0	(0)	2	(3)	2	(3)	0	(1)	2	0	0	0	0	
Basingstoke, Basingstoke And North Hampshire	1	(2)	2	(3)	3	(5)	3	(2)	3	0	2	0	0	
Brighton, Royal Sussex County Hospital	17	(13)	8	(17)	25	(30)	21	(23)	24	9	21	0	7	
Camberley, Frimley Park Hospital	4	(3)	7	(6)	11	(9)	8	(4)	11	2	7	1	1	
Chertsey, St Peter's Hospital	2	(2)	9	(6)	11	(8)	7	(6)	11	0	7	0	0	
Chichester, St Richard's Hospital	1	(2)	2	(2)	3	(4)	2	(2)	3	0	2	0	0	
Dartford, Darent Valley Hospital	2	(0)	2	(0)	4	(0)	3	(0)	4	0	3	0	0	
Eastbourne, Eastbourne District General Hospital	5	(2)	2	(1)	7	(3)	4	(2)	6	1	5	0	1	
Gillingham, Medway Hospital	6	(7)	3	(8)	9	(15)	8	(9)	9	2	8	0	1	
Guildford, Royal Surrey County Hospital	1	(1)	0	(O)	1	` (1)́	1	(1)	1	1	1	0	0	
Hastings, Conquest Hospital	0	(2)	1	(2)	1	(4)	1	(3)	1	0	1	0	0	

	DB	D	DC	D	All do	nors	Multi-o don		Kidney	Pancreas	Liver	Bowel	Heart	Lu
Maidstone, Maidstone Hospital	0	(0)	3	(2)	3	(2)	3	(0)	3	0	3	0	0	
Margate, The Queen Elizabeth The Queen Mother Hospital	0	(0)	2	(3)	2	(3)	0	(1)	2	0	0	0	0	
Newport, St Mary's Hospital	0	(4)	1	(2)	1	(6)	0	(3)	1	0	0	0	0	
Oxford, John Radcliffe Hospital	12	(14)	11	(9)	23	(23)	17	(19)	22	5	16	0	1	
Portsmouth, Queen Alexandra Hospital	10	(4)	1	(3)	11	(7)	9	(4)	10	1	8	0	3	
Reading, Royal Berkshire Hospital	1	(4)	6	(7)	7	(11)	4	(7)	7	1	4	0	0	
Redhill, East Surrey Hospital	4	(4)	1	(2)	5	(6)	5	(5)	5	1	4	0	1	
Slough, Wexham Park Hospital	1	(5)	2	(3)	3	(8)	2	(6)	3	1	2	0	1	
Southampton, Southampton University Hospitals	10	(23)	19	(13)	29	(36)	19	(25)	29	4	16	0	2	
Tunbridge Wells, Tunbridge Wells Hospital	0	(1)	3	(1)	3	(2)	1	(2)	1	0	3	0	0	
Winchester, Royal Hampshire County Hospital	2	(2)	1	(0)	3	(2)	2	(2)	3	1	2	0	0	
Worthing, Worthing Hospital	3	(2)	3	(2)	6	(4)	5	(2)	6	1	4	0	1	
Wycombe, Wycombe General Hospital	0	(2)	0	(0)	0	(2)	0	(1)	0	0	0	0	0	
TÓTAL	89	(103)	95	(100)	184	(203)	132	(138)	178	31	125	1	21	
London														
Barnet, Barnet General Hospital	4	(3)	0	(0)	4	(3)	2	(2)	4	1	2	0	1	
Carshalton, St Helier Hospital	2	(0)	0	(2)	2	(2)	2	(2)	2	1	2	0	0	
Chelsea, Chelsea And Westminster Hospital	1	(1)	0	(2)	1	(3)	1	(1)	1	0	1	0	0	
Croydon, Croydon University Hospital	2	(2)	1	(2)	3	(4)	3	(4)	3	1	3	0	0	
Evelina Childrens Hospital	0	(0)	1	(0)	1	(0)	1	(0)	1	0	1	0	1	
Harefield, Harefield Hospital	1	(1)	3	(2) (5)	4	(3)	1	(1)	4	0	1	0	0	
Harrow, Northwick Park Hospital	6	(4)	3	(5)	9	(9)	5	(4)	9	1	3	0	2	
Isleworth, West Middlesex University Hospital	1	(0)	1	(0)	2	(0)	1	(0)	2	0	0	0	0	
Kingston, Kingston Hospital	1	(2)	0	(2)	1	(4)	0	(3)	1	0	0	0	0	
London, Charing Cross Hospital	7	(2)	3	(7)	10	(9)	8	(5)	10	3	8	0	1	
London, Cleveland Clinic	0	(0)	0	(1)	0	(1)	0	(1)	0	0	0	0	0	
London, Great Ormond Street Hospital For Children	0	(0)	0	(1)	0	(1)	0	(1)	0	0	0	0	0	
London, Hammersmith Hospital	3	(1)	1	(4)	4	(5)	3	(1)	3	2	4	0	0	
London, Homerton Hospital	2	(1)	0	(1)	2	(2)	2	(2)	2	0	2	0	1	
London, King's College Hospital	27	(29)	16	(16)	43	(45)	36	(33)	42	11	35	0	5	
London, National Hospital For Neurology And	3	(4)	1	(2)	4	(6)	4	(6)	4	1	4	0	1	
Neurosurgery														
London, Newham General Hospital	3	(0)	1	(0)	4	(0)	3	(0)	4	0	3	0	1	
London, North Middlesex Hospital	1	(1)	2	(3)	3	(4)	2	(1)	3	0	2	0	0	
London, Royal Brompton Hospital	0	(1)	1	(0)	1	(1)	1	(1)	1	1	1	0	0	
London, St Bartholomew's Hospital	2	(0)	2	(5)	4	(5)	3	(3)	4	2	3	0	0	

Donating hospital	DB	D	DC	D	All do	nors	Multi-o don		Kidney	Pancreas	Liver	Bowel	Heart	Lu
London, St George's Hospital	11	(19)	15	(20)	26	(39)	21	(26)	26	5	20	0	1	
London, St Mary's Hospital	6	(4)	6	(6)	12	(10)	9	(7)	12	2	9	0	5	
London, St Thomas' Hospital	4	(3)	3	(3)	7	(6)	5	(5)	6	4	6	0	2	
London, The Queen Elizabeth Hospital	1	(1)	1	(1)	2	(2)	1	(2)	2	1	1	0	0	
London, The Royal Free Hospital	1	(3)	1	(1)	2	(4)	1	(3)	1	0	2	0	0	
London, The Royal London Hospital (Whitechapel)	12	(12)	11	(7)	23	(19)	19	(14)	21	6	19	0	6	
London, University College Hospital	1	`(0)́	1	(0)	2	(0)	2	`(0)́	2	0	2	0	1	
London, University Hospital Lewisham	2	(1)	0	(2)	2	(3)	2	(1)	2	0	2	0	0	
London, Whipps Cross Hospital	0	(1)	1	(1)	1	(2)	1	(1)	1	0	1	0	0	
London, Whittington Hospital	1	(1)	1	(0)	2	(1)	2	(1)	2	0	2	0	0	
Orpington, Princess Royal University Hospital	1	(3)	2	(1)	3	(4)	2	(4)	3	Ő	2	Õ	1	
Romford, Queens Hospital	5	(5)	5	(7)	10	(12)	8	(10)	9	1	9	0 0	0	
Southall, Ealing Hospital	1	(2)	0	(1)	1	(3)	1	(10)	1	1	1	0 0	0	
Uxbridge, Hillingdon Hospital	2	(3)	3	(2)	5	(5)	2	(3)	5	1	2	0	1	
TOTAL	114	(110)	86	(107)	200	(217)	154	(149)	193	45	153	Ő	30	
East of England														
Basildon, Basildon Hospital	4	(4)	8	(5)	12	(9)	7	(7)	10	2	8	0	1	
Bedford, Bedford Hospital	0	(1)	0	(3)	0	(4)	0	(2)	0	0	0	0	0	
Bury St Edmunds, West Suffolk Hospital	1	(0)	0	(1)	1	(1)	1	(1)	1	0	1	0	0	
Cambridge, Addenbrooke's Hospital	9	(11)	37	(29)	46	(40)	38	(31)	45	13	36	1	7	
Chelmsford, Broomfield Hospital	2	(2)	1	(0)	3	(2)	2	(2)	3	1	2	0	0	
Colchester, Colchester General Hospital	0	(3)	5	(4)	5	(7)	2	(6)	5	1	2	Ő	0	
Great Yarmouth, The James Paget Hospital	2	(2)	2	(3)	4	(5)	4	(4)	4	2	4	0	0	
Harlow, Princess Alexandra Hospital	0	(1)	3	(1)	3	(2)	3	(2)	3	1	2	0	0	
Huntingdon, Hinchingbrooke Hospital	1	(0)	4	(0)	5	(0)	3	(0)	5	Ó	2	0	0	
Ipswich, Ipswich Hospital	6	(1)	7	(4)	13	(5)	10	(4)	13	3	9	0	1	
Kings Lynn, Queen Elizabeth Hospital	1	(2)	5	(3)	6	(5)	4	(3)	6	0	4	0	1	
Luton, Luton And Dunstable Hospital	1	(6)	2	(5)	3	(11)	3	(9)	3	1	3	0	0	
Milton Keynes, Milton Keynes General Hospital	3	(3)	1	(0)	4	(3)	3	(3)	3	1	4	1	0	
Norwich, Norfolk And Norwich University Hospital	4	(10)	10	(11)	14	(21)	9	(12)	13	1	10	0	1	
Papworth, Papworth Hospital	4	(10)	4	(5)	8	(8)	6	(12)	8	0	6	0	0	
Peterborough, Peterborough City Hospital		(3)	4	(3)	6	(5)	5	(5)	6	0	5	0	0	
Stevenage, Lister Hospital	2 5	(1)	4	(4)	9	(9)	7	(8)	8	2	8	0	0	
Watford, Watford General Hospital	1	(3)	4	(2)	9 5	(5)	1	(5)	5	2	1	0	0	
Westcliff On Sea, Southend Hospital	5	(3)	4	(2)	6	(5)	5	(1)	6	0	5	0	0	
TOTAL	51	(60)	102	(4)	153	(147)	113	(110)	147	28	112	2	11	

Donating hospital	DBD		DCI)	All do	nors	Multi-o dor		Kidney	Pancreas	Liver	Bowel	Heart	Lu
Midlands							uoi							
Birmingham, Birmingham Children's Hospital	2	(0)	0	(0)	2	(0)	2	(0)	2	1	2	1	1	
Birmingham, Birmingham Heartlands Hospital	0	(1)	2	(4)	2	(0) (5)	1	(3)	2	0	1	0	0	
Birmingham, City Hospital	0	(4)	2	(1)	2	(5)	2	(3)	2	1	2	0	1	
Birmingham, Queen Elizabeth Hospital Birmingham	11	(8)	14	(11)	25	(19)	21	(14)	25	5	19	2	3	
Boston, Pilgrim Hospital	2	(0)	2	`(0)́	4	(0)	3	`(0)́	4	1	1	0	1	
Burton-On-Trent, Queen's Hospital	1	(0)	0	(1)	1	(1)	1	(1)	1	0	1	0	0	
Chesterfield, Chesterfield And N Derbyshire Royal	4	(2)	3	(0)	7	(2)	7	(2)	6	1	7	0	1	
Hospital														
Coventry, University Hospital (Walsgrave)	19	(13)	12	(9)	31	(22)	27	(16)	29	12	27	0	8	
Derby, Royal Derby Hospital	2	(1)	5	(6)	7	(7)	5	(4)	7	2	4	0	2	
Dudley, Russells Hall Hospital	4	(4)	0	(0)	4	(4)	4	(4)	4	0	4	0	0	
Hereford, The County Hospital	5	(1)	0	(1)	5	(2)	5	(2)	5	2	5	1	0	
Kettering, Kettering General Hospital	7	(4)	3	(1)	10	(5)	9	(4)	10	3	9	0	2	
Leicester, Glenfield General Hospital	0	(0)	5	(0)	5	(0)	3	(0)	5	0	3	0	0	
Leicester, Leicester Royal Infirmary	4	(6)	1	(0)	5	(0) (6)	4	(5)	5	2	3	Õ	1	
Lincoln, Lincoln County Hospital	1	(4)	2	(2)	3	(6)	2	(5)	3	2	2	1	0	
Northampton, Northampton General Hospital	Ö	(5)	0	(2)	Õ	(7)	0	(5)	0 0	0	0	O	Ũ	
Nottingham, Nottingham University Hospitals City	0	(2)	1	(0)	1	(2)	Ő	(2)	1	Ő	0	0	0 0	
Campus	Ũ	(-)		(0)	•	(-)	Ũ	(-)		Ũ	Ũ	Ŭ	Ũ	
Nottingham, Nottingham University Hospitals Qmc	19	(20)	17	(17)	36	(37)	31	(28)	36	11	29	2	8	
Campus		(==)		()		(01)	•••	(==)				-	· ·	
Nuneaton, George Eliot Hospital	1	(0)	2	(1)	3	(1)	2	(1)	3	0	2	0	1	
Redditch, Alexandra Hospital	0 0	(2)	1	(0)	1	(2)	1	(2)	1	Ő	1	Õ	0	
Shrewsbury, Royal Shrewsbury Hospital	0 0	(2)	2	(3)	2	(5)	2	(2)	2	Ő	2	0 0	1	
Stoke-On-Trent, Royal Stoke University Hospital	12	(6)	24	(18)	36	(24)	29	(15)	36	8	28	Õ	6	
Sutton Coldfield, Good Hope District General Hosp.	0	(2) (6) (3)	0	(1)	0	(4)	0	(3)	0	0 0	0	0 0	0	
Sutton-In-Ashfield, King's Mill Hospital	0	(2)	3	(3)	3	(5)	1	(4)	3	0	1	Ő	0	
Telford, Princess Royal Hospital	1	(1)	0	(0)	1	(1)	1	(1)	1	1	1	0	1	
Walsall, Walsall Manor Hospital	0	(0)	0	(1)	0	(1)	Ö	(1)	0	0	0	0	0	
Warwick, Warwick Hospital	1	(1)	0	(0)	1	(1)	1	(1)	1	1	1	0	0	
West Bromwich, Sandwell District General Hospital	3	(3)	1	(2)	4	(5)	3	(4)	3	0	4	0	0	
Wolverhampton, New Cross Hospital	5	(1)	6	(10)	11	(11)	9	(4)	10	4	- 8	1	3	
Worcester, Worcestershire Royal Hospital	4	(2)	3	(10)	7	(11)	9 4	(4)	6	2	4	0	2	
TOTAL	108	(98)	111	(96)	219	(194)	180	(140)	213	59	171	8	42	
	100	(00)		(00)	2.0	(104)	100	(140)	210			Ŭ		
North West Ashton-Under-Lyne, Tameside General Hospital	0	(1)	0	(0)	0	(1)	0	(1)	0	0	0	0	0	
			U	(0)	Ū	(1)	J	(1)			Ū	Ū	Ū	

	DBI	כ	DCD)	All do	nors	Multi-o done		Kidney	Pancreas	Liver	Bowel	Heart	L
Blackburn, Royal Blackburn Hospital	4	(2) (5)	0	(2) (7)	4	(4)	4	(3)	4	0	4	0	0	
Blackpool, Blackpool Victoria Hospital	4	(5)	0	(7)	4	(12)	3	(8)	4	0	3	0	1	
Bolton, Bolton Royal Infirmary	0	(0)	1	(0)	1	(0)	0	(0)	1	0	0	0	0	
Bolton, Royal Bolton Hospital	0	(3)	2	(1)	2	(4)	1	(4)	2	1	1	0	0	
Bury, Fairfield General Hospital	0	(0)	0	(1)	0	(1)	0	(1)	0	0	0	0	0	
Chester, Countess Of Chester Hospital	2	(4)	0	(2)	2	(6)	2	(5)	2	0	2	0	1	
Crewe, Leighton Hospital	1	(1)	1	(1)	2	(2)	2 3	(1)	2	0	2	0	0	
Lancaster, Royal Lancaster Infirmary	1	(1)	3	(0)	4	(1)	3	(1)	4	0	3	0	0	
Liverpool, Alder Hey Children's Hospital	0	(2)	1	(1)	1	(3)	1	(3)	1	1	0	0	1	
Liverpool, Liverpool Heart And Chest Hospital	1	(1)	1	(0)	2	(1)	2	(1)	2	0	2	0	0	
Liverpool, Royal Liverpool University Hospital	2	(2)	1	(1)	3	(́3)	0	(3)	1	0	2	0	0	
Liverpool, University Hospital Aintree	2	(1)	5	(2)	7	(3)	5	(3)	7	3	5	0	2	
Liverpool, Walton Centre For Neurology And	5	(10)	3	(2) (3)	8	(13)	6	(10)	8	0	6	0	1	
Neurosurgery	÷	()	÷	(-)	-	()	•	()	Ũ	•	Ũ	Ŭ		
Manchester, Manchester Royal Infirmary	3	(2)	3	(0)	6	(2)	5	(2)	6	1	5	0	1	
Manchester, North Manchester General Hospital	0 0	(0)	1	(0)	1	(2) (0)	1	(0)	1	0	0	Õ	0	
Manchester, Royal Manchester Children's Hospital	1	(0)	1	(0)	2	(0)	2	(0)	2	1	2	1	2	
Manchester, Wythenshawe Hospital	2	(0)	7	(1)	9	(1)	4	(0)	9	2	4	0	2	
Oldham, Royal Oldham Hospital(Rochdale Road)	2	(1)	0	(4)	2	(5)	2	(4)	2	1	2	0 0	0	
Prescot, Whiston Hospital	2	(9)	2	(7)	4	(11)	2	(11)	4	1	2	0	0	
Preston, Royal Preston Hospital	10	(6)	6	(2) (6)	16	(12)	14	(9)	16	5	14	0 0	3	
Salford, Salford Royal	9	(13)	10	(8)	19	(21)	14	(17)	10	1	13	1	3	
Southport, Southport District General Hospital	Ő	(0)	3	(0)	3	(0)	2	(0)	3		2	0	0	
Stockport, Stepping Hill Hospital	3	(0)	1	(1)	4	(0)	2	(0)	4	1	2 1	0	1	
Warrington, Warrington Hospital	3	(3)	0	(1)	3	(1)	3	(3)	4	1	3	0	1	
Wigan, Royal Albert Edward Infirmary	3	(2)	1	(2)	2	(3)	2		2	0	2	0	0	
	1	(Z)	-	(2)	2 4	(4)	2	(4)	2 4	2	2	1	1	
Wirral, Arrowe Park Hospital TOTAL	59	(4) (73)	3 56	(2) (49)	4 115	(6) (122)	85	(4) (98)	4 113	24	83	3	20	
TOTAL	59	(13)	90	(49)	115	(122)	00	(90)	113	24	03	3	20	
North East and Yorkshire	0	(4)	4	$\langle 0 \rangle$	4	(4)	0	$\langle 0 \rangle$	4	0	0	0	0	
Barnsley, Barnsley District General Hospital	0	(1)	1	(3)	1	(4) (3)	0	(3)	1	0	0	0	0	
Barrow-In-Furness, Furness General Hospital	0	(1)	0	(2)	0	(3)	0	(3)	0	0	0	0	0	
Bradford, Bradford Royal Infirmary	0	(3)	3	(1)	3	(4)	3	(4)	3	1	3	0	0	
Carlisle, Cumberland Infirmary	4	(5)	2	(4)	6	(9)	6	(8)	6	1	6	0	1	
Cottingham, Castle Hill Hospital	0	(0)	0	(1)	0	(1)	0	(1)	0	0	0	0	0	
Darlington, Darlington Memorial Hospital	3	(0)	1	(3)	4	(3)	3	(2)	3	1	3	0	1	
Doncaster, Doncaster Royal Infirmary Durham, University Hospital Of North Durham	3	(2)	1	(1)	4	(3)	3	(3)	3	1	4	0	0	
Durbom University Heepitel Of North Durbom	2	(4)	0	(4)	2	(8)	2	(7)	2	0	2	0	1	

onating hospital	DB	D	DCI	D	All do	nors	Multi-c don		Kidney	Pancreas	Liver	Bowel	Heart	Lung
ateshead, Queen Elizabeth Hospital	0	(2)	1	(0)	1	(2)	0	(2)	1	0	0	0	0	(
rimsby, Diana Princess Of Wales Hospital	1	(1)	0	(2)	1	(3)	1	(2)	1	0	1	0	0	(
alifax, Calderdale Royal Hospital	1	(4)	1	(2)	2	(6)	2	(6)	2	0	2	0	0	(
arrogate, Harrogate District Hospital	1	(2)	1	(1)	2	(3)	1	(2)	2	0	1	0	0	
uddersfield, Huddersfield Royal Infirmary	2	(1)	3	(4)	5	(5)	4	(3)	5	1	4	0	0	
ull, The Hull Royal Infirmary	7	(8)	5	(14)	12	(22)	11	(19)	12	4	9	0	3	(
eighley, Airedale General Hospital	0	(1)	0	(1)	0	(2)	0	(2)	0	0	0	0	0	
eeds, Leeds General Infirmary	9	(11)	18	(16)	27	(27)	19	(22)	27	9	19	0	5	4
eeds, St James's University Hospital	0	(1)	0	(3)	0	(4)	0	(2)	0	0	0	0	0	
ddlesbrough, The James Cook University Hospital	9	(8)	6	(6)	15	(14)	12	(13)	14	5	12	0	1	
ewcastle, Freeman Hospital	1	(1)	0	(2)	1	(3)	1	(3)	1	0	1	0	0	
ewcastle, Royal Victoria Infirmary	17	(15)	12	(9)	29	(24)	26	(19)	27	8	25	0	9	
orthumbria, Nsech	6	` (6)	3	(3)	9	` (9)	7	(4)	9	3	6	0	3	
therham, Rotherham District General Hospital	0	(4)	1	(1)	1	(5)	1	(4)	1	0	1	0	1	
arborough, Scarborough Hospital	2	(2)	1	(1)	3	(3)	2	(3)	3	0	2	0	0	
unthorpe, Scunthorpe General Hospital	1	(0)	1	(2)	2	(2)	2	(2)	2	0	2	0	0	
neffield, Northern General Hospital	4	(9)	2	(7)	6	(16)	5	(11)	6	1	5	0	1	
effield, Royal Hallamshire Hospital	3	(3)	4	(4)	7	(7)	6	(5)	7	2	6	0	1	
outh Shields, South Tyneside Dist. Gen. Hospital	1	(0)	0	(1)	1	(1)	1	(1)	1	1	1	0	0	
ockton-On-Tees, University Hospital Of North Tees	2	(5)	4	(2)	6	(7)	5	(5)	6	1	5	0	0	
inderland, Sunderland Royal Hospital	1	(3)	4	(7)	5	(10)	5	(9)	5	1	4	Õ	Õ	
akefield, Pinderfields General Hospital	3	(7)	2	(4)	5	(11)	4	(9)	5	0	4	0	Ő	
hitehaven, West Cumberland Hospital	Ő	(1)	2	(0)	2	(1)	1	(1)	2	Ő	1	Õ	Õ	
ork, York District Hospital	1	(3)	3	(2)	4	(5)	1	(5)	3	1	1	Õ	0	
DTAL	84	(114)	82	(113)	166	(227)	134	(185)	160	41	130	Ő	27	1
e of Man														
ouglas, Nobles I-O-M Hospital	2	(2)	0	(0)	2	(2)	2	(2)	2	1	2	0	0	
DTAL	2	(2) (2)	0	(0)	2 2	(2) (2)	2 2	(2) (2)	2	1	2	0	0	
nannel Islands														
Helier, Jersey General Hospital	0	(1)	0	(0)	0	(1)	0	(0)	0	0	0	0	0	
DTAL	Õ	(1)	Õ	(0)	Ő	(1)	Ŏ	(0)	Ő	Ő	Õ	Õ	Ő	

Wales

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Donating hospital	DBI	כ	DCI)	All do	nors	Multi-o don		Kidney	Pancreas	Liver	Bowel	Heart	Lι
Aberystwyth, Bronglais Hospital	0	(0)	2	(0)	2	(0)	2	(0)	2	0	2	0	0	
Bangor, Ysbyty Gwynedd District General Hospital	1	(3)	2	(2)	3	(5)	2	(3)	3	0	2	0	0	
Bodelwyddan, Glan Clwyd District General Hospital	3	(2)	2	(0)	5	(2)	4	(1)	5	1	4	0	1	
Bridgend, Princess Of Wales Hospital	2	(1)	0	(0)	2	(1)	2	(1)	2	0	2	0	1	
Cardiff, University Of Wales Hospital	16	(10)	12	(11)	28	(21)	22	(17)	25	5	22	0	8	
Carmarthen, Glangwili General Hospital	1	`(1)́	0	(2)	1	(3)	1	(1)	1	1	1	0	0	
Haverford West, Withybush General Hospital	2	(0)	0	(0)		(0)	2	(0)	2	1	2	0	0	
Llanfrechfa, The Grange University Hospital	0	(6)	5	(2)	2 5	(8)	1	(4)	5	0	1	0	0	
Merthyr Tydfil, Prince Charles Hospital	2	(3)	2	$(0)^{(-)}$	4	(3)	2	(2)	4	1	2	0	1	
Pontypridd, Royal Glamorgan Hospital	0	(1)	1	(1)	1	(2)	1	(1)	1	0	1	0	0	
Swansea, Morriston Hospital	8	(6)	4	(0)	12	(6)	10	(5)	12	3	10	Õ	2	
Wrexham, Maelor General Hospital	0	(4)	0	(2)	0	(6)	0	(5)	0	0	0	Ő	0	
TOTAL	35	(37)	30	(20)	65	(57)	49	(40)	62	12	49	0	13	
		()		()		()		(,				-		
Scotland Aberdeen, Aberdeen Royal Infirmary	F	(7)	e	(7)	11	(11)	10	(10)	11	2	10	1	0	
	5	(7)	6	(7)	11	(14)	10	(12)	11	3	10	1	0	
Airdrie, University Hospital Monklands	1	(0)	1	(0)	2	(0)	2	(0)	2	1	2	0	0	
Ayr, University Hospital Ayr	0	(1)	0	(1)	0	(2)	0	(2)	0	0	0	0	0	
Crosshouse, University Hospital Crosshouse	0	(3)	4	(0)	4	(3)	3	(3)	4	0	3	0	0	
Dumfries, Dumfries And Galloway Royal Infirmary	2	(0)	0	(0)	2	(0)	2	(0)	2	1	2	0	0	
Dundee, Ninewells Hospital	2	(7)	4	(3)	6	(10)	5	(9)	6	3	3	0	1	
Edinburgh, Royal Hospital For Children And Young	0	(1)	0	(1)	0	(2)	0	(2)	0	0	0	0	0	
People														
Edinburgh, Royal Infirmary Of Edinburgh	6	(13)	17	(12)	23	(25)	19	(23)	22	2	17	0	2	
Glasgow, Glasgow Royal Infirmary	3	(4)	1	(2)	4	(6)	4	(6)	4	1	4	0	0	
Glasgow, Golden Jubilee University National Hospital	2	(2)	1	(1)	3	(3)	2	(3)	3	1	2	0	0	
Glasgow, Queen Elizabeth University Hospital	8	(10)	8	(11)	16	(21)	13	(18)	16	5	11	0	3	
Glasgow, The Royal Hospital For Children	0	(2)	0	(0)	0	(2)	0	(2)	0	0	0	0	0	
Hairmyres, University Hospital Hairmyres	1	(0)	1	(3)	2	(3)	1	(2)	1	1	2	0	0	
Inverness, Raigmore Hospital	2	(4)	1	(3)	3	(7)	2	(6)	3	1	2	0	0	
Kirkcaldy, Victoria Hospital	5	(0)	4	(4)	9	(4)	8	(2)	9	0	8	0	3	
Larbert, Forth Valley Royal Hospital	4	(1)	4	(2)	8	(3)	7	(3)	8	3	7	0	1	
Livingston, St John's Hospital	1	(2)	1	(3)	2	(5)	2	(5)	2	1	2	0	1	
Melrose, Borders General Hospital	0	(0)	0	(2)	0	(2)	0	(2)	0	0	0	0	Ó	
Paisley, Royal Alexandra Hospital	1	(2)	4	(1)	5	(3)	4	(2)	5	0	4	0	0	
Wishaw, University Hospital Wishaw	2	(5)	3	(0)	5	(5)	5	(5)	5	1	5	0	2	
TOTAL	45	(64)	60	(56)	105	(120)	89	(107)	103	24	84	1	13	

Donating hospital	DB	D	DCI	D	All do	onors	-Multi do	-	Kidney	Pancreas	Liver	Bowel	Heart	Lung
Northern Ireland														
Belfast, Antrim Hospital	2	(1)	0	(2)	2	(3)	1	(2)	2	0	1	0	0	0
Belfast, Belfast City Hospital	0	(0)	0	(4)	0	(4)	0	(1)	0	0	0	0	0	0
Belfast, Royal Belfast Hospital For Sick Children	0	(1)	1	(0)	1	(1)	1	(1)	1	1	0	0	0	0
Belfast, Royal Victoria Hospital	17	(21)	6	(19)	23	(40)	21	(33)	22	5	20	0	8	0
Belfast, The Ulster Hospital	1	` (3)́	2	(4)	3	(7)	2	` (3)	3	0	2	0	0	0
Coleraine, Causeway Hospital	2	(1)	1	(0)	3	(1)	2	(1)	3	2	2	0	0	1
Enniskillen, South West Acute Hospital	1	(2)	1	(0)	2	(2)	1	(2)	2	0	1	0	0	0
Londonderry, Altnagelvin Area Hospital	0	(1)	5	(1)	5	(2)	3	(1)	5	0	3	0	0	1
Portadown, Craigavon Area Hospital	2	(3)	3	(1)	5	(4)	3	(3)	5	0	3	0	1	2
TOTAL	25	(33)	19	(31)	44	(64)	34	(47)	43	8	32	0	9	4
TOTAL	676	(772)	727	(738)	1403	(1510)	1087	(1130)	1361	309	1050	16	205	166



		Do	nors			Orga	ins			
Country/ NHS region	All donors	ртр	Multi-organ donors	ртр	Kidney	Pancreas	Liver	Bowel	Heart	Lung
North East and Yorkshire	84	10.2	78	9.5	81	24	79	0	16	8
North West	59	7.8	53	7.0	57	14	54	3	14	10
Vidlands	108	9.9	102	9.3	102	47	102	8	31	21
East of England	51	8.0	45	7.0	48	12	47	2	5	7
_ondon	114	12.9	98	11.0	110	30	100	0	22	16
South East	89	9.5	80	8.5	86	23	74	1	18	11
South West	64	11.1	56	9.7	62	23	56	1	12	12
England	569	10.0	512	9.0	546	173	512	15	118	85
sle of Man	2	25.0	2	25.0	2	1	2	0	0	0
Channel Islands	0	0.0	0	0.0	0	0	0	0	0	0
Wales	35	11.2	32	10.2	33	10	34	0	9	2
Scotland	45	8.3	43	7.9	45	16	41	1	11	9
lorthern Ireland	25	13.1	24	12.6	25	6	23	0	6	2
OTAL	676	10.0	613	9.1	651	206	612	16	144	98



	Donors			Organs						
Country/ NHS region	All donors	ртр	Multi-organ donors	ртр	Kidney	Pancreas	Liver	Bowel	Heart	Lun
North East and Yorkshire	82	10.0	56	6.8	79	17	51	0	11	10
North West	56	7.4	32	4.3	56	10	29	0	6	6
/lidlands	111	10.1	78	7.1	111	12	69	0	11	7
East of England	102	15.9	68	10.6	99	16	65	0	6	15
ondon	86	9.7	56	6.3	83	15	53	0	8	10
outh East	95	10.1	52	5.5	92	8	51	0	3	8
South West	86	14.9	59	10.2	85	13	53	0	7	6
ingland	618	10.8	401	7.0	605	91	371	0	52	62
sle of Man	0	0.0	0	0.0	0	0	0	0	0	C
hannel Islands	0	0.0	0	0.0	0	0	0	0	0	(
Vales	30	9.6	17	5.4	29	2	15	0	4	1
Scotland	60	11.0	46	8.4	58	8	43	0	2	3
lorthern Ireland	19	9.9	10	5.2	18	2	9	0	3	2
OTAL	727	10.8	474	7.0	710	103	438	0	61	68



Appendix III Populations for NHS regions, 2024-2025 Mid-2022 estimates based on ONS 2021 Census figures							
Country/ NHS region	Population (millions)						
North East and Yorkshire North West Midlands East of England London South East South West	8.22 7.52 10.96 6.40 8.87 9.38 5.76						
England Isle of Man Channel Islands	57.11 0.08 0.17						
Wales	3.13						
Scotland	5.45						
Northern Ireland	1.91						
TOTAL	67.60						



Appendix IVA

UK solid organ transplants from deceased UK donors¹ to non-UK residents, 1 April 2022 to 31 March 2025

Transplant	type by year								
		Residency of recipient							
Year	Transplant type	ROI	Other EU	Non-EU	Total				
2022/23	Liver	6	0	0	6				
	Bilateral lung	1	0	0	1				
	Total	7	0	0	7				
2023/24	Kidney	0	1	0	1				
	Heart	3	0	0	3				
	Liver	3	0	0	3				
	Bowel	0	0	1	1				
	Modified multi-visceral	1	0	0	1				
	Total	7	1	1	9				
2024/25	Liver	4	1	0	5				
	Total	4	1	0	5				
	ROI = Republic of Ireland ¹ Based on country of donor hospital								



Appendix IVB

UK solid organ transplants from deceased non-UK donors¹ to UK residents, 1 April 2022 to 31 March 2025

Transplant	type by year								
		Country of donation							
Year	Transplant type	ROI	Other EU	Non-EU	Total				
2022/23	Kidney	4	2	0	6				
	Heart	5	3	0	8				
	Liver	9	0	0	9				
	Bilateral lung	3	0	0	3				
	Bowel	1	0	0	1				
	Total	22	5	0	27				
2023/24	Kidney	0	1	0	1				
	Heart	3	5	0	8				
	Liver	9	1	0	10				
	Bilateral lung	2	0	0	2				
	Total	14	7	0	21				
2024/25	Heart	4	5	0	9				
	Liver	11	5	0	16				
	Bowel	0	1	0	1				
	Multi-visceral	0	1	0	1				
	Total	15	12	0	27				
ROI = Repub	lic of Ireland								
¹ Based on c	¹ Based on country of donor hospital								



Appendix IVC

Non-UK solid organ transplants from deceased UK donors¹ to non-UK hospitals, 1 April 2022 to 31 March 2025

Transplant type by year								
Year	Transplant type	Resi	dency of reci Other EU	-	Total			
2022/23	Heart	0	1	0	1			
	Liver	1	1	0	2			
	Bilateral lung	0	3	2	5			
	Total	1	5	2	8			
2023/24	Heart	0	1	0	1			
	Liver	5	0	0	5			
	Bilateral lung	0	2	0	2			
	Total	5	3	0	8			
2024/25	Heart	0	6	0	6			
	Liver	2	0	0	2			
	Bilateral lung	0	2	1	3			
	Total	2	8	1	11			
ROI = Republic of Ireland ¹ Based on country of donor hospital								



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