

What will the new Kidney Offering Scheme mean for transplant centres?

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Background

Kidney Advisory Group reviewed 2006 Kidney Allocation Scheme to identify if a change was needed

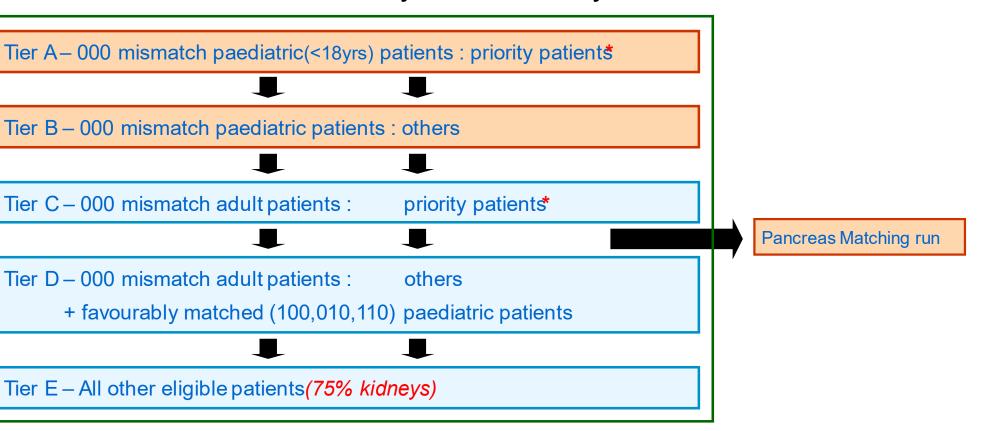
Three working groups were set up to look at:

- Design and review of Kidney Offering scheme
- Philosophy of Allocation
- HLA Working group



Current DBD Scheme

onors after brain death kidneys allocated by national rules -



ulted antigens, Restricted blood group compatible matches, evel 4 mismatches (2 B & 1 DR mm or 2 DR mm grafts)

Current DCD Scheme

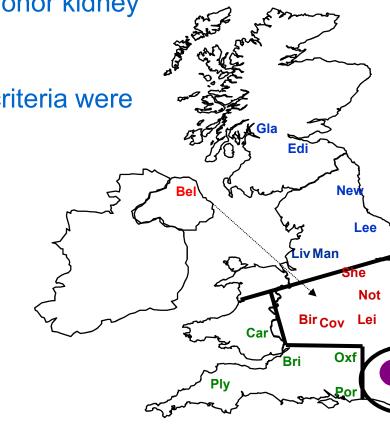
ne kidney retained locally, second kidney shared regionally within four e-defined regions

oth kidneys to be prioritised according to the 2006 DBD donor kidney ocation scheme principles

avoid significant changes to centre activity, donor age criteria were

plied to manage the 'phasing-in' process

Currently one kidney from donors aged 5 to 64 shared regionally



Key Objectives

nify DBD and DCD offering with all DBD and DCD kidneys allocated through the scheme

ore effective 'quality' matching between donor and recipient

etter tailored HLA matching by age

eographical equity of access

oid prolonged waiting times that are predictable

aiting time from earliest of start of dialysis or activation on the list

e should be a continuous factor



Summary of basic principles

I <u>deceased</u> donor kidneys are allocated through scheme:

er A Patients with matchability score = 10 or 100% cRF or ≥7 years

low blood group O to B, HLA level 4 transplants

lithin Tier A; patients prioritised by matchability score and waiting time from dialysis

er B All other patients

low HLA level 4 transplants for matchability score 8 and 9 only

ithin Tier B; patients prioritised by point score

actors included in points score:

onor and recipient risk index match (D1-D4, R1-R4),

/aiting time from earliest of start of dialysis or activation date on the list,

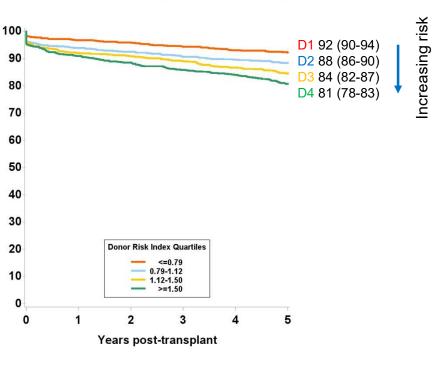
LA match & age points combined, Location points, Matchability points,

otal mismatch points, Blood group points

Risk indices

Donor Risk Index
Cox model: 5 year graft survival

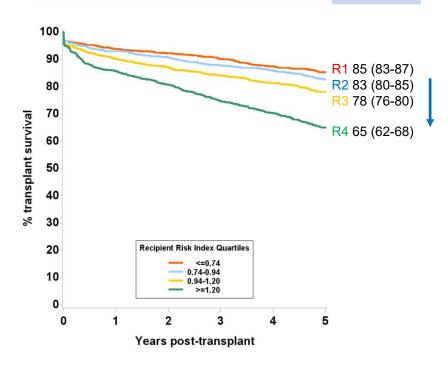
Donor Factor	Hazard Ratio	p-value
Age	1.02	<0.0001
Height	0.86	0.0005
Hospital stay	1.02	0.006
CMV	1.2	0.02
eGFR	0.98	0.02
Female	0.83	0.04
Hypertension	1.15	0.1



Blood and Tra

Recipient Risk Index
Cox model: 5 year transplant survival

Recipient Factor	Hazard Ratio	p-value
Age (≤25)	1.00	0.9
Age (>25)	1.02	<0.001
Dialysis status	1.43	<0.001
Diabetic	1.32	0.003
Time on dialysis (years)	1.03	0.004



Matchability score

imber in last 10,000 donors

blood group identical and HLA compatible

(calculated Reaction Frequency)

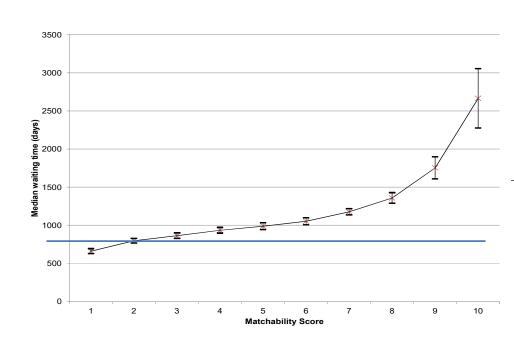
000, 100, 010, 110, 200, 210, 001, 101, 201 mismatch (Level 1 or 2).

All patients on the waiting list are then divided in to deciles.

1, 2, 3 = easy to match,

4, 5, 6, 7 = moderate to match

8, 9, 10 = difficult to match





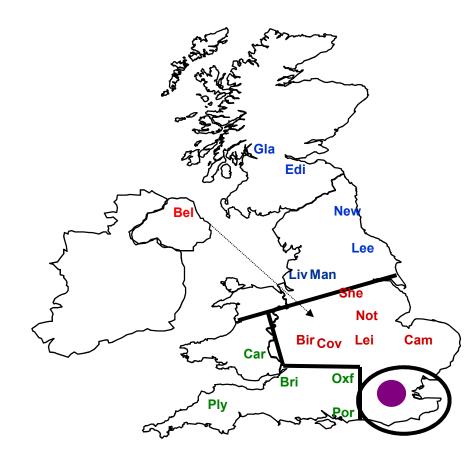
hat it will mean for ansplant centres

DCD Kidneys

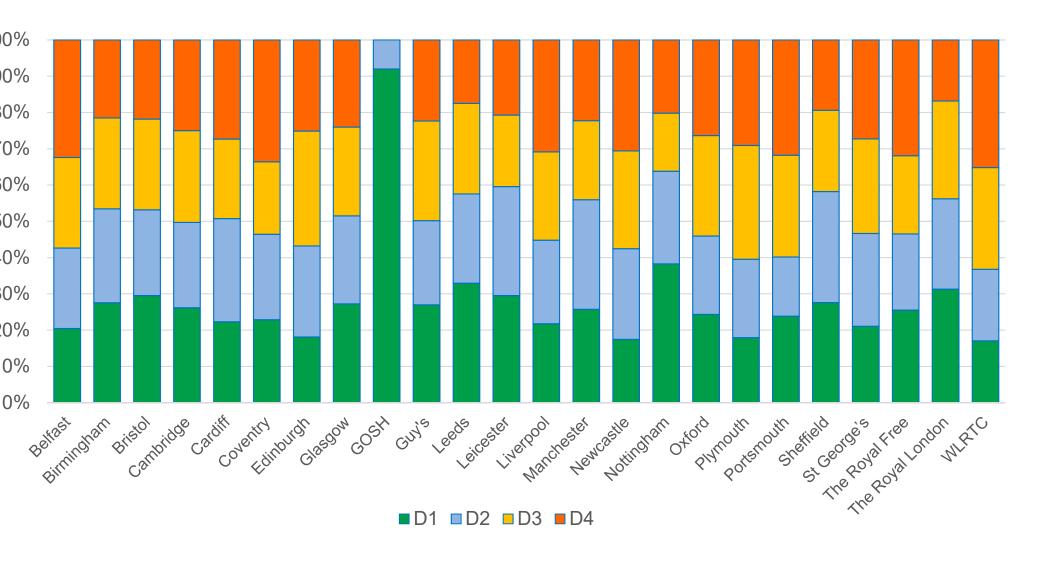
Both kidneys to be allocated via the new kidney offering scheme

DCD kidneys will not be automatically retained

Points score used to keep kidneys within current 4 defined regions unless a difficult to match / long waiting patient is identified



Simulated transplants – Donor Risk Index



Local allocation of kidneys

eys will still be available through the scheme for centres to use in a patient of choice:

idneys from donors aged between 2 and 5 will be offered to centres en-bloc

idneys from D4 donors aged over 70 will be offered to centres to use as dual or idividually

idneys dispatched but reallocated because the patient for whom the kidney has een accepted cannot subsequently receive the transplant, assuming no Tier A ecipients are identified

idneys offered through the Fast Track Scheme

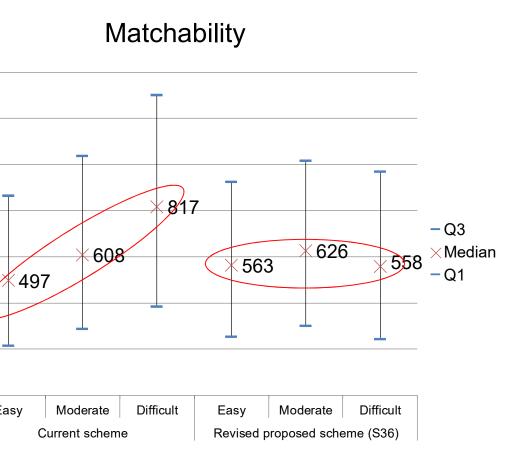


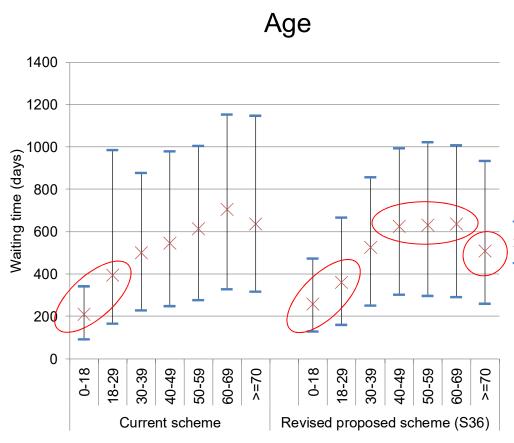


ey benefits

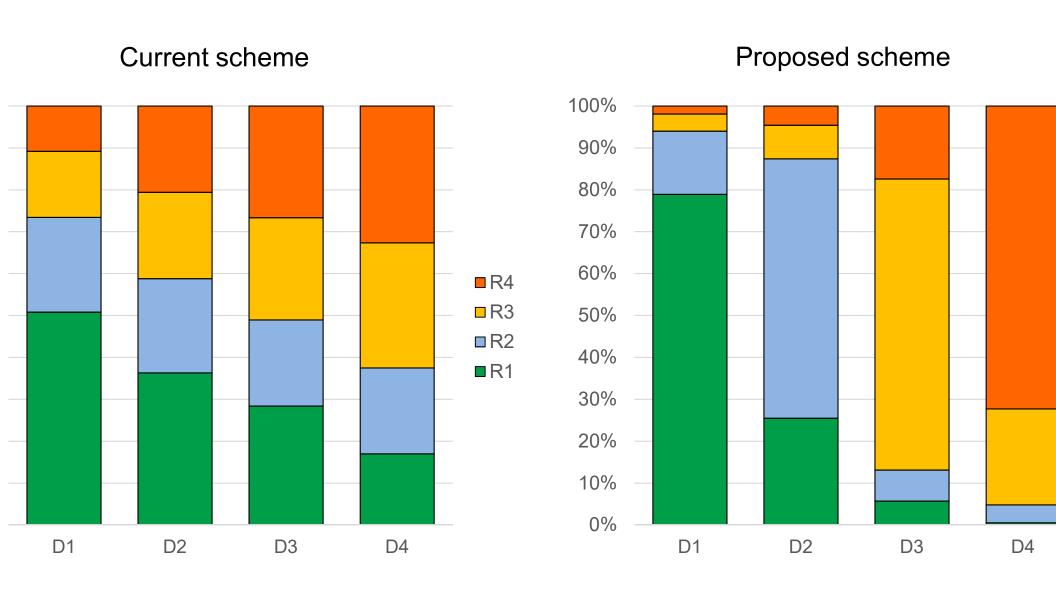
Waiting time

Blood and Tra





Improved longevity matching



Summary

A new Kidney Offering Scheme has been produced in line with key objectives

UK Kidney Advisory Group have approved proposed scheme

Transplant activity not due to change dramatically for transplant centres

Prolonged waiting time avoided where possible for patients in addition to improved longevity matched transplants

Scheme to be implemented summer 2019



Acknowledgments Kidney Offering Scheme Working Group

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