SCANDIATRANSPANT
COUNCIL OF REPRESENTATIVES’ MEETING
MAY 19, 2023, HYBRID MEETING

Helsinki:
Ines Beilmann-Lehtonen
Eija Tukiainen
Ilkka Helanterä
Jouni Lauronen

Stockholm:
Gunnar Söderdahl
Johan Nordström

Uppsala:
Vivan Hellström

Skåne:
Alireza Biglarnia
Grunde Gjesdal

Gothenburg:
Markus Gäbel
Niclas Kvarnström
Niklas Bergh
Andreas Schult
Jan Holgersson

Aarhus:
Lars Ilkjær
Pernille B. Koefoed-Nielsen

Reykjavik:
Ragnar Palsson

Tartu:
Marko Murrust
Kaie Lokk

Scandiatransplant board:
Allan Rasmussen, Denmark
Marko Lempinen, Finland
Jóhann Jónsson, Iceland
Virge Pall, Estonia
Are M. Holm, Norway
Johan Nilsson, Sweden

Scandiatransplant office:
Kaj Anker Jørgensen
Ilse Duus Weinreich
Anne Ø. Boserup

Observers:
Tanel Laisaar, Tartu
Margrét B. Andrésdóttir, Reykjavik
Susanne D. Poulsen, Copenhagen

Oslo:
Kristine Fasting
Morten Skauby
Christian Naper
Karsten Midtvedt
Espen Melum

Odense:
Claus Bistrup

Copenhagen:
Søren S. Sørensen
1. Welcome
Welcome by Scandiatransplant board member Virge Pall

2. Election of meeting chair, writer of minutes and controllers of minutes
Chair of the meeting: Tanel Laisaar
Writer of minutes: Ilse Duus Weinreich
Controllers of minutes: Kaie Lokk and Markus Gäbel

3. Registration of the present representatives/substitutes/observers
All present at the meeting are listed at the first page of these minutes

4. Approval of minutes from last meeting
http://www.scandiatransplant.org/about-scandiatransplant/scandiatransplant-representatives/Minutes_council_2022_August_31.pdf

The minutes were approved without any comments

5. Report from the chairman of Scandiatransplant
Presented by Allan Rasmussen

At the last Council meeting it was decided that the board should start a process to sort out if Pauls Stradiņš Clinical University Hospital in Riga in the future can fulfill the requirements to be an associate member and maybe later a full member of Scandiatransplant.
Kaj A. Jørgensen and Allan Rasmussen sent a letter afterwards to address the need of getting the tissue typing laboratory EFI accredited, get written prove of ISO accreditation of infections tests and get written documentation in English on procedures regarding organ procurement and treatment of potential donors. Advised the personal to see how YASWA works, Estonia has volunteered to help with this. Finally personal have been /will be invited as observes in the Scandiatransplant group meetings.
Research and travel applications have been evaluated, the receivers have been informed and are listed on the homepage:
http://www.scandiatransplant.org/resources/grants/scandiatransplant-research-grant
http://www.scandiatransplant.org/resources/grants/scandiatransplant-travel-grant

In YASWA a lot of work have been done around deceased donor functionalities and the database has been moved from Oracle to PostgreSQL.
A new active infection group within Scandiatransplant has led to some suggested changes in the bylaws that will be presented under point ‘Change in article 12’ in the agenda.
Challenge with the economy as Scandiatransplant has a low liquidity, this problem will be addressed in details under ‘Accounts and Budget’.
6. Accounts and Budget
Presented by Kaj A. Jørgensen

Documents from the independent auditor had been distributed to all council members prior to the meeting.
Last year there was a negative balance of 400,000 DKK, which leaves an asset of 8,500,000 DKK. The expenses where within the approved budget.
The asset includes liquidity January 1st 2023 and expected income during 2023 (based on income in 2022).

The budget suggested for 2023 was decided at the Council meeting in August 2022 to be 6,500,000 DKK. If the transplant activity stays unchanged the income will be 5,600,000 DKK, which will give a negative balance of 900,000 DKK in this accounting period. Budget for 2024 is suggested to be 6,800,000 DKK, if this is accepted the negative balance is predicted to be 1,200,000 DKK.

The liquidity January 2023 was 2,900,000 DKK, this is before bills for transplant-fees are sent out to each member hospital. With the expected negative balance of 900,000 this year the liquidity will be 2,000,000 DKK January 2024. With the expected negative balance in 2024 of 1,200,000 DKK, the liquidity January 2025 will be 800,000 DKK.

The liquidity issue at the beginning of the year has been pointed out as a problem by the independent auditor and it is recommended by the present board to have one year budget in liquidity (not including expected income) at the beginning of the year. Therefor a significant increase in fee will be suggested by the board next year. The suggestion will be to rise the fee from 3,000 to 4,000 DKK per transplanted recipient in 2024. However this year the fee is suggested to stay unchanged.

It was suggested to consider a small rise in the fee every year, instead of a big rise. It was noted that economy and fees are evaluated each year by the board and the final decision lies with the representatives. This is a special situation with the combination of the world economy where almost everything gets more expensive and the liquidity problem at the beginning of the year, that have been addressed since 2020.

A survey has been conducted and it is clear that the expenses of running Scandiatransplant is very low compared to other organ allocation organizations.

It was decided that Kaj A. Jørgensen and Allan Rasmussen should compose documentation and detailed background description and distribute this to all representatives. This information can be used in dialogue with local hospital administration if it is decided to increase the fee.

The fee will stay unchanged, accounts and budgets were accepted by the Council,
7. **Election of Board members**

Morten Hagness, Norway, has served as board member for 6 years and is suggested replaced by Are Martin Holm.

Suggestion for new alternate is Espen Melum, Norway

*Suggestions were accepted by the Council*

8. **Change in Scandiatransplant Article of Association article 12**

At the council meeting in 2021 it was announced that Vanda Friman, that had been chairing the prevention of infection disease group for 14 years, wanted to step down. It was decided to form a new group with board member Morten Hagness, Oslo, as chair and include persons with interest in the field of infection disease.

The new group has been very active and should have a more formal place within Scandiatransplant.

In relation to this the board suggested two items one to rename the group and call it ‘Scandiatransplant Infectious Disease Group (SIDG)’ and the other to include a new paragraph under article 12 describing the composition of the group, work procedures, responsibility, duties etc. The suggested change in the articles had been distributed to all representatives prior to the meeting.

*Both suggestions were accepted by the Council and the articles will be updated accordingly*

9. **Report from the groups**

**NKG**

The written report was sent out prior to the meeting and can be found [here](#)

**NLTG**

A written report was sent shortly before the meeting and it was briefly shown. It can be found [here](#)

**NPITG**

The written report was sent out prior to the meeting and can be found [here](#)

**SHLG**

The written report was sent out prior to the meeting and can be found [here](#)

**NTCG**

Short report given at the meeting by Kaj A. Jørgensen on behalf of NTCG chair Maria W. Engmann.

The group have had two meetings some of the primary topics have been the new deceased donor functionalities in YASWA, education plans and possibilities, furthermore an observer from Riga attended the latest meeting.
STTG
Kaie Lokk gave a summary of what the group has have been working with since last year. The written report can be found here.

Scandiatransplant Infectious Disease Group (SIDG) previously Prevention of transmission of infectious disease
Susanne D. Poulsen, Copenhagen, has taken over the chairmanship of the group and presented news on behalf of the group.
Members of the group are listed on the Scandiatransplant homepage
Some of the main topics that have been discussed at the most recent meetings

• Tests that should be run, and results be available, before organs are offered.
• Test that should be taken before donation and analyzed as soon as possible (not necessarily before organ procurement and/or transplant)
• Covid-19 in deceased organ donation
• Active infections in the donor

Based on this a revised version of the guidelines is now ready to be circulated and commented by the groups within Scandiatransplant, this will be handled centrally by the Scandiatransplant office.

Additionally a survey of current practice at all Scandiatransplant centers will be made in order to harmonize current practice and guidelines.

It was suggested and approved that the updated Covid-19 instructions should be effective a.s.a.p.
The Covid-19 part has been thoroughly revised and is less restrictive compared to the previous guidelines. The guide in this aera adheres to the American guidelines as the EDQM guideline is currently under revision.

Any Other Business
No issues were brought up

10. Next meeting
May 29th, 2024, before the STS congress in Aarhus

Minutes are approved by controllers:
Kaie Lokk 23rd of May 2023
Markus Gabel 26th of May 2023

Minutes are respectfully submitted by Ilse D. Weinreich