Nordic Pancreas Transplantation Group
Meeting minutes
September 1, 2015

Present:
Lars Bäckman, Uppsala
Ole Øyen, Oslo
Bengt Gustafsson, Gothenburg
Søren Schwartz Sørensen, Copenhagen
Allan Rasmussen, Copenhagen
Paul Krohn, Copenhagen
Marko Lempinen, Helsinki
Torbjörn Lundgren, Stockholm
Ehab Rafael, Skåne
Henrik Birn, Aarhus
Jan Carstens, Odense
Mette Gotlieb, Copenhagen (NTCG)
Ilse D. Weinreich, Scandiatransplant

- Welcome by Chairperson
  Lars Bäckman
- Election of Chairperson for the meeting
  Lars Bäckman
- Election of Secretary for the meeting
  Ilse Weinreich
- Approval of the minutes from last meeting
  Minutes were approved
- Election of a new Chairperson of NPTG
  Bengt Gustafsson was elected – he presented two main areas, which he thinks are important to work towards. One is to try to synchronize the pancreas transplantation programs between the centers (immunosuppression protocols etc.). Another is to strengthen the cooperation between the islet and pancreas transplantation groups.
- A short report on the transplant activity within Scandiatransplant 2015
  Copenhagen:
  Since the final approval was met the first kidney-pancreas transplantation has been performed in Copenhagen. By the end of year 2015 all Danish patients on the waiting list in Norway will be transferred to the waiting list in Copenhagen.
Gothenburg:
Not that many patients on the waiting list at the moment. There are now 3 surgeons who can perform the pancreas transplantations procedure.

Stockholm:
Has done a single pancreas transplantation, which was the first one for quite some time..

Skåne:
Ships most of their pancreases to Gothenburg.

Aarhus:
One patient has been transplanted in Oslo this year. The rest is now one by one being transferred to Copenhagen.

Odense:
Are currently preparing 3-4 patients for the kidney-pancreas waiting list.

Helsinki:
Only two surgeons are able to do the pancreas transplantation procedure.
There are still some problems in the Nordic countries in order to get organs transported in a secure and fast way, which has an impact on CIT and subsequent outcome. Is this a task to be solved by the Scandiatransplant board?
The mean CIT for pancreas transplantations are about 9 hours, one must remember that the distance to the donor hospital can be long in Finland.

Oslo:
Steady number of transplantations. The main points of the scheduled biopsy study was presented, however the final results are not yet ready to be presented. Many single pancreas transplantation are made, 10 of 15 in the first half year of 2015.

Uppsala:
Activity going down, not that many suitable donors. A proposal on new legislation in Sweden in relation with donation has been put forward, it will probably take a year before any decision is made.
• **The pancreas transplant activity /exchange**

Transplantation and procurement figures for the first 8 months of 2015 were presented and compared with the total 2014 figures. In the first 8 months 49 pancreases were procured and 44 transplanted.

From January 1\(^{st}\) to August 27\(^{th}\) 2015 a total of 11 pancreases were exchanged between the centers. As of August 27\(^{th}\) a total of 26 patients are waiting for single pancreas transplantation and 60 are awaiting combined kidney-pancreas transplantation in Scandiatransplant.

• **Our different protocols**

The excel sheet made by Torbjörn Lundgren comparing the protocols used at each center was discussed. The backbone of the protocols are very similar, which gave rise to some questions. Should there be a common protocol? Does the differences mean anything? Do the results between the centers differ?

• **The Follow-up registry**

A short status was given on the current status on the Scandiatransplant user interface conversion. Deceased donor and transplantation registration have been launched in production, which means that all the core elements have now been converted.

Soon the process with prioritizing new projects will start and the pancreas registry is on that list.

All agreed that a follow up registry should be made and is it important to keep it simple. Ole Øyen, Torbjörn Lundgren and Bengt Gustafsson will form a working group and make a suggestion for the content of such a registry.

• **Proposal for studies**

A variety of studies were discussed;

- Do the different protocols have an effect on the outcome?
- Different criteria for inclusion on the waiting list
- DSA in pancreas transplantation
- Outcome in relation with CMV infection
- Anti-thrombin test AT III
• **Further matters**

When a deceased donor fulfils the criteria for pancreas donation, the kidney-pancreas recipients are prioritized over young kidney recipients, is this a problem? It was argued that combined kidney-pancreas are always transplanted to young patients, whom are shown to benefit from the transplantation.

To rise the number of pancreases transplanted, it is necessary to exchange both kidney and pancreas. In these cases it is important that the kidney payback is done as soon as possible after the exchange. It is estimated that the exchange rate will be quite low, 5-6 kidney-pancreas per year.

A working group consisting of Ole Øyen, Lars Bäckman and Bengt Gustafsson was established. The group will make a written proposal outlining rules on payback (timeframe, quality etc.) to the Nordic Kidney Group.

Torbjörn Lundgren and Bengt Gustafsson will attend the next Nordic Islet Network group meeting at Arlanda in December 2015

It is a wish to write an article in order to sum up data on pancreas transplantations within Scandiatransplant for the last 10 years. Bengt Gustafsson will see if he can find a student to coordinate the project.

• **Next meeting**

April 4, 2016 at Hilton, Copenhagen

Minutes are approved by Bengt Gustafsson 21st of September 2015

Minutes are respectfully submitted by Ilse D. Weinreich