1. Opening of the meeting
Torbjörn Lundgren welcomed 19 participants in the Zoom room. Torbjörn Lundgren was elected as chairman. Hanne Scholz was elected as secretary.

2. Approval of the agenda
The agenda was approved.

3. Minutes from last meeting 19th October 2021
Latest protocol from 19th October 2021 was approved. All minutes are available on Scandiatransplant’s homepage; Minutes NPiTG October 19th 2021

4. Other resources for the NPiTG group
   a. The Nordic Network For Clinical Islet Transplantation (NNCIT) group has updated their Islet Transplantation SOPs as one single document and this is available on Scandiatransplant’s homepage; Nordic network for islet transplantation - SOP - revised December 2021
   b. Videos with beta cell replacement therapy, one patient with islet transplantation and one patient with SPK. Both are in Swedish and available after contact with Akademiska Sjukhuset, Uppsala, Surgeon Tim Scholz: tim.scholz@akademiska.se

5. Short report from centers regarding activities per March 2022

<table>
<thead>
<tr>
<th>Center</th>
<th>Covid</th>
<th>Pancreas</th>
<th>Islets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stockholm</td>
<td></td>
<td>2 SPK (one DCD + one DBD donor)</td>
<td>1 Allo Islet</td>
</tr>
<tr>
<td>Uppsala</td>
<td></td>
<td>2 SPK</td>
<td>No islet</td>
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6. Register status

- Pancreas: Ilse presented the registration status for the pancreas registry. Discussion of whom is doing it and how to get it done. Stockholm need to improve the registration and will get input from the others how they get it done. Most efficient seem to put the task of one person (e.g. Kristine Fasting is doing this in Oslo). Kristine added some issue/points for the use/interpretate of the registration form in YASWA, these suggestion will be applied in the system.

  Decision: Evaluate on next meeting that every centre has appoint a supervisor/designated person for this task. Even more important if our registry will be connected to a European registry.

- Nordic islet registry (NIR): Ongoing process to transfer the registry (Medscinet) to the Scandiatransplant system, delayed during the corona pandemic. Medscinet is sold to a Norwegian company and is now part of CSAM Health Analytics, but still all contacts are valid.

7. Funding from Helmsley Charitable trust [https://helmsleytrust.org/our-grants/](https://helmsleytrust.org/our-grants/)

This new project aiming at isolation of islets from type 1 diabetic deceased donors for research (duration of illness > 5 years). Until now donors from Sweden and Norway have been identified to be able to join the project. In Finland, Kaisa Ahopelto will apply for ethical approval for research project and will include this. Denmark cannot export organs for research.

The project has been started, and in March the Oslo Center procured a pancreas (ca 50g) from a type 1 diabetic (T1D) donor that was shipped to Uppsala lab for isolation. The results were satisfying and the lab got free islets. Olle Korsgren informed that with these islets there is possible to investigate why the alpha cells (glucagon) is not function in T1D. Especially the problem with hypoglycemia could be solved with such research.
Investigators/researchers that are interested in establishing project can contact Olle Korsgren for distribution of the islets.

Importantly, there is funding in the project for everything that enables pancreas procurement and also to exchange knowledge (especially in the Tx coordinator group).

Decision: The Nordic Transplant Coordinator group will have a meeting on May 12th, and Torbjörn L will give a talk and inform about the project. Olle K will follow up with Kaisa Ahopelto (Helsinki) to include Finland.

8. Lithuania in collaboration

Torbjörn Lundgren gave a brief description of the first clinical islet transplantation performed in Vilnius, Lithuania. Marius Miglinas and colleagues from Vilnius in Lithuania have been preparing a program for islet transplantation in close collaboration with Uppsala and Stockholm for a long time. On November 2nd Uppsala lab got the pancreas organ from Vilnius for isolation which yielded approximately 400 000 IEQ of good clinical grade islets. From Sweden both Torbjörn Lundgren (surgeon) and Maria Svenaeus Lundgren (study nurse) went with the islets to Vilnius as courier and to assist on the islet transplantation. The team in Vilnius was well prepared and a huge interest from many people at the hospital. However, there was a need for assistant for the islet infusion procedure which gave the impression that this should happened also next time. In addition, Torbjörn Lundgren will inform Marius Miglinas that they can visit Uppsala or Stockholm when they perform islet tx.

9. Studies -ongoing (NNCIT02, AutoTregIst, Vertex)

- The NNCIT02 (ClinicalTrials.gov: NCT03867851. Sponsor TikoMed) is ongoing and Stockholm/Uppsala/Oslo/Gothenburg are participating.
- Autologus Tregs (ClinicalTrials.gov: NCT04820270) together with allogenic islets has been completed. Stockholm/Uppsala has participated. The study was included in Markus Bergströms thesis in January and will also be presented as part of Ming Yaos PhD degree (Supervisor Torbjörn Lundgren) in Stockholm in May 2022.
- Vertex VX-880 (ClinicalTrials.gov: NCT04786262) is under planning.
- A robot pancreas tx study is planned in Gothenburg.

Report form the Working groups:

10. Studies and Better end points

Miscommunication between the transplant area and the diabetology area. Can a new islet transplantation project focusing on end points from current diabetology research improve our interaction with diabetologists? Olle Kosrgren has been in contact with professor Marcus Lind in Uddevalla and Bengt Gustafsson Gothenburg and protocol has been shared. Discussions are ongoing. Focus on QoL – type 1 diabetes patients have to live with their disease 24/7 planning treatment, exercise and calorie intake. What variables are most important for the patient in contrast to c-peptide levels. We should also invite diabetologists as authors/coauthors. Torbjörn Lundgren will share the study protocol draft with NIPTG members – comments are welcome.

Decision: No meetings have been held since the last meeting in the PI group
The group consist of Torbjörn Lundgren, Olle Korsgren, Bengt Gustafsson, Trond Geir Jenssen and Kaisa Ahopelto. Paul Krohn tries to find a Danish representative.

11. Auto islet

Morten Hagness lead the group and there will be a common meeting with people from NPiTG and people that treat these patients (GI surgeons), nurses, and transplant coordinator in Oslo (during the Islet Workshop) on Monday June 20th from 09-12. Discussion how to collaborate, patients recruitment and quality of the organ will be on the agenda and interested people can join.

Registration of autotransplantations is now possible in YASWA. In general, there is an issues in regards to access to registry, as many more hospital will wish to perform such transplantation that is not a Tx center and will need special training. Torbjörn Lundgren have contacted the board of Scandiatransplant to see how formally autotransplantation can be included as this will require expanded

Decision: Morten Hagness (coordinator) will lead the Oslo group meeting with Torbjörn Lundgren. The report will be presented next PI meeting.

12. DCD

Ilse informed that registration of DBD or DCD donor is part of core YASWA and therefore the information is available through registries and reports. Donation after circulatory death (DCD) is rapidly increasing in Sweden and is also recently been implemented in Norway (DSC- normothermic approach). The group discussed what the criteria for the donor should be in order to be used for clinical islet isolation. Torbjörn felt that if the islet isolated from a DCD and the islets pass the quality control he would have accepted it for islet transplant. There has already been DCD isolations in research projects and there are numerous reports in Europe and North America of using DCD for clinical islet transplant. Leiden has reported lesser yields but good quality, but other groups have reported normal yields. Norway will restart their DCD program – normothermic approach.

Decision: If the CIT is less than 10 hours and the transplant surgeon would have accepted the organ for clinical pancreas/islet tx then the islet labs could perform clinical grade isolation.

13. Pancreas – lack of studies late outcomes (not surgical)

General discussion regarding lack of studies. Small materials and low rate of long term metabolic follow up by the Tx-surgeons. Olle Korsgren proposes a working group.

Decision: This will be followed up next meeting

14. Hanne Scholz informed and initiated everybody to the EPITA Islet isolation Workshop that will be held in in Oslo Jun 19-21 Oslo EPITA Islet Isolation Workshop in Oslo June 2022.

15. Next meeting

Decision: The next meeting will be face to face at Arlanda Airport, Sweden October 25th-22

Zoom April 7th, 2022

Torbjörn Lundgren Hanne Scholz
Chairman Secretary/Co chairman