

MINUTES
Scandiatransplant
Nordic Transplantation Coordinator Group Meeting
Copenhagen November 3th, 2022

Participants:

Janika Kuus, Tartu
Evamarie Braf, Lund
Nadine Weidenberg, Uppsala
Maria Winding Engmann, Copenhagen
Rikke Spanggaard, Odense
Helle Madsen, Aarhus
Carola Schauman, Helsinki
Catharina Yesil, Helsinki
Pernilla Händén, Gothenburg
Anne Ørskov, Scandiatransplant
Ilse Weinreich, Scandiatransplant

Absent: Charlotte Lovèn

Election of chair

Øystein Jynge

Election of secretary

Ingebjørg Kvangarsnes

1. Last meeting – Minutes

Minutes were approved

2. Round the table

Ilse : Short brief about the Stcp office: Anne is very appreciated at the office.

Copenhagen: Preparing for start of DCD program hopefully in 2023. Started use of Liver perfusion Machine for marginal donors, to be in use in Rigshospitalet.

Uppsala: Wants to expand the coordinator group with one more but no money. Use of LifePort for Kidneys

Gothenburg: Expands the group with one more Coordinator. Use of Liver Perfusion, cold to marginal livers, only in Sahlgrenska. LifePort for kidneys, and recently started a project with Heart Perfusion Machine. Coordinators are responsible for the perfusion after donation!

Odense: Preparing for start of DCD, use of LifePort for kidneys.

Tartu: No planning of DCD, LifePort for marginal kidneys.

Lund: Evamarie will retire next year as Coordinator but continue working with other topics connected to the field of transplantation. Ongoing project with Heart Perfusion machine, and one with optimizing marginal lungs. Also use of EVLP for lungs.

Malmö: Soon finished education the last hospitals in their region in DCD.

Aarhus: Want to be 5 Coordinator, due to start of DCD. Been to Gothenburg for training for preparing of DCD program. LifePort for all kidneys.

Stockholm: All Hospitals in Region are ready to carry out for DCD. Always use of NRP when Liver is explanted, good results of transplantation. Coordinator Office is not a part of Karolinska but founded by the Health Authorities in the Region. LifePort >65 years and > 2 hours from Stockholm. Cold Liver Perfusion on selected cases.

Helsinki: Heikki retired this spring. New Coordinator is Anniina who is now ready to work on call. LifePort of DCD and Kidneys >70 years. DCD pilot of 10 donors are now finished, even done 2 more. A rapport is now waiting for approval. Pilot done in Helsinki and Tampere, only kidneys in the DCD program. In process by educating donor hospitals, all of them will be prepared for doing the procedure. A new coordinator for thoracic donation is in process.

3. Education activities in the counties.

Each representative presented on behalf of their office in what way they are involved in education program concerning organ donation.

All coordinators are in some way involved in educational programs, but it showed up that it varies a lot in how much the coordinators participate when it comes to this topic. Most coordinators would like to be much more involved in educational issues if possible.

To summarize shortly; In Sweden and Norway the coordinators are very much involved in educational programs both in universities and in hospitals. In both countries, the coordinators are responsible for carrying out courses within organ donation targeting groups of relevant health workers on national, regional and local level.

Maria Engman was introduced as the new Chair of the NTCG group and she was welcomed by a big applaud! Likewise, we thanked Øystein for his great job as Chair of the NTCG group the last five years!

Maia was Chairing the session after lunch

4. YASWA

Vessels procurement in YASWA: All centers have given feedback on Iles question about the need for procure vessel separately in YASWA. No/limited need, and this will not be implemented in YASWA now.

YASWA as a working tool: All functions are implemented but still there have to be maintenance and small adjustments and changes. But right now no major changes will be done, due to all changes that

already has been done and that we need to get used to work in. Ilse asks us to use it, be patient, and get used to the system before giving too much feedback at once.

All express great satisfaction by the system, it has become a valuable tool for coordination and all the other functions, which lies in the use of YASWA. Most of the data that has been registered is easily accessible to extract into valuable data for research/quality assessment, thus this requires good data input.

In 6 months when next NTCG meeting we can prepare for a bigger evaluation of the system. Please discuss with colleagues about YASWA issues also!

In addition, please; remember to write in English in all tabs/pages except the filed “add new comments” in the coordination tab.

Other news in YASWA:

It is very important that every organ is being allocated and transplanted according to current guidelines. An overview of possible exchange obligations is presented in the allocation tab. In this tab it will be obligatory to document the allocations process when there is exchange obligations to have transparency with the Scandiatransplant cooperation.

Allocation table in YASWA

It makes it possible to **see** and **document**

- Compliance to all the allocation rules on all organs
- It brings forward essential information on why organs are rejected
- Essential for an organ exchange organization
- **Transparency**
- **You follow the rules – show it!**

Please complete all potential, actual and utilized donors from 1. of January 2022.

“Not procured organs” now holds many more organ specific options. Please limit the usage of poor organ function!

Other matters:

Some few changes in thoracic guidelines will soon be published.

Organ offers beyond acceptable quality. Follow up from last meeting. Connecting to this Ilse presented some slides showing that 30 out of 49 offers of heart and lungs was not accepted by any center. Once again, good data in YASWA will give better support for the organ groups to define suitable acceptable organs to offer.

Heart offers January 1st 2021 – October 13th 2022

Resp. donor center	Number of offers	Hearts transplanted	No donation
Aarhus	4	2 (50%)	0
Copenhagen	5	5 (100%)	0
Odense	2	0 (0%)	0
Gothenburg	9	2 (22%)	1
Malmö/Lund	6	1 (17%)	1
Stockholm	5	0 (0%)	0
Uppsala	6	2 (33%)	0
Oslo	8	3 (37,5%)	1
Helsinki	2	2 (100%)	0
Tartu	2	2 (100%)	0
Total	49	19 (39%)	3

30 out of 49
(61%) offers are
not accepted by
any center

Lung offers January 1st 2021 – October 13th 2022

Resp. donor center	Number of offers	Lungs transplanted	No donation
Aarhus	5	2 (40%)	0
Copenhagen	13	6 (46%)	1
Odense	2	1 (50%)	0
Gothenburg	12	4 (33%)	0
Malmö/Lund	17	3 (18%)	0
Stockholm	2	1 (50%)	0
Uppsala	6	0 (0%)	0
Oslo	1	1 (100%)	0
Helsinki	5	3 (40%)	0
Tartu	10	3 (30%)	0
Total	73	24 (33%)	1

49 out of 73
(67%) offers are
not accepted by
any center

Virology tests: Some centers have previously not tested for Herpes and toxoplasmosis, but new guidelines from the infections group have made this obligate within Scandiatransplant. All centers must put these results in YASWA as soon as possible.

Antibiotics: Infections group has discussed NTCG question based on our inquiry. They write in last meetings minutes that the current routines is good enough, and no need for common routine on Scandia level. Local routine needs to be decided of each center.

LifePort and Flights: Request sent to Kaj Jørgensen and will be discussed in next NKG meeting.

Next meeting: 11th may 2022. Suggestion to hold the onsite meeting in may instead of November. Make a note to Maria if you agree on that!