The Scandinavian Tissue Typers’ Meeting; Malmö, September 22nd, 2017, 10:00 – 16:00

Minutes

1. Welcome and presentation of participants
Ann-Sofie Liedberg welcomed the representatives to the Tissue Typers’ Meeting, followed by a presentation of the representatives present. (appendix 1)

2. Election of chairman and secretary
Ann-Sofie Liedberg was elected as chairman and Barnabas Kolumban as secretary.

3. Election of two persons to adjust the minutes
Ilse Duus Weinreich and Bjarne Møller was elected to adjust the minutes.

4. Confirmation of the agenda
The suggested agenda was accepted.

5. Election of the person that will give a report at the meeting of the council of representatives (2017)
Christian Naper was chosen to report to the council of representatives.

6. Election of the person that will give a report at the Nordic Kidney Group (NKG) meeting (2017)
Helle Bruunsgaard was chosen to report to the NKG.

7. Election of the contact person of the Tissue Typers (TT) group.
Ann-Sofie Liedberg was elected as representative for the TT group.

8. STEP (ScandiaTransplant kidney Exchange Program)
Tommy Andersson held a presentation on the history of exchange programs in Europe and on how STEP is designed to work. (appendix 2).

9. STAMP/STEP considerations
Presentation by Mats Bengtsson and follow up discussion (appendix 3). A suggestion to being able to report P and G groups in the Scandiatransplant database (YASWA) was discussed.

10. Inventory of answers from the questionnaire sent to participants
Ann-Sofie Liedberg summarized and presented the results from the questionnaire sent to participants (Appendix 4). Suggestion for discussing NGS the next meeting. The questionnaire will be sent to participant again for additional answers.

11. Scandiatransplant Office report
Ilse presents the news from the Scandiatransplant office. (appendix 5)

The Scandiatransplant office will start working on an import facility between Fusion and YASWA. For STEP raw data will be imported and the data will be kept isolated from the rest of the antibody information in YASWA. For other patients an import of final assignment will be established.
Everybody was encouraged to use the solution for registration of sending/receiving sera for crossmatch on heart/lung patients. The address list have been updated and now also includes Tartu (link).

TS (transplantability score) is now implemented as acceptance criteria for STAMP, and a new donor pool, of 2000 donors with HLA-A, -B, -C, -DR, -DQ will be implemented in late September 2017.

Suggestion to be able to add DPB1 antigens in the acceptable mismatch program (STAMP). The suggestion will be brought forward at the next NKG meeting.

12. Update of EFI Standard
Juha Peräsaari presented the EFI Standards v 7.0. (appendix 6)

13. Report from the STAMP steering committee
Jouni Lauronen presents news from the STAMP steering committee. (appendix 7)

Suggestion to remove the >1Y on waiting list criteria for acceptance in STAMP was discussed. The suggestion will be discussed further during the upcoming meeting of the NKG.

It was decided that the Scandiatransplant office will provide an annual report in February/March, which includes number of STAMP patients transplanted, STAMP on wl etc.

14. STAMP cases
Difficult cases from the different laboratories/transplant centres presented by:
- Jouni Lauronen (>1000 MFI → 2000 – 3000?)
- Ann-Sofie Liedberg
- Christian Naper
- Helle Bruunsgaard (Historical antibodies – do not take into consideration)
- Pernille Bundgaard (DPB antibodies/antigens, should they be included in TS?)
- H.D. Piirsalu (presentation of a candidate patient for STAMP)

Please note that presentations containing patient data will not be published with the minutes. If you wish to view these presentations please contact the representatives above.

13. General discussions
STAMP
C1q analysis might help in the evaluation of clinically relevant antibodies in some patient cases, CDC positivity might also help in others. Furthermore, the general idea is that the local clinicians and surgeons are willing to accept antibodies with higher MFI levels (2-3000) when transplanting patients on the kidney waiting list.

Should we have less stringent criteria in difficult cases? When patients have a TS of <0.1% and waiting time >1 year, increase cut-off up to 3-5000 MFI (to have more acceptable mismatches) and send to the STAMP committee? However, some antibodies are more common in the donor pool and adding these antibodies as acceptable will affect the TS. It is suggested that altered cut-offs for individual patient samples are explained in the STAMP notes. Antibodies that have been reported prior to cut-off manipulation should not
be removed from the list, but it is possible to add acceptable mismatches for reactivities at 3-5000 MFI (this will leave some criteria “orange” in the quality control).

Data on how many patients fall within the above-mentioned criteria will be provided by the Scandiatransplant office. The suggestion will be further discussed at the upcoming meeting of the NKG.

**LAMP**

It was decided that AB0 rules for LAMP (prio. 6) should be the same as for the list of own recipients (prio. 7) in YASWA. (AB0 identical -> AB0 compatible)

**Exporting both kidneys?**

It was suggested that both kidneys should be exported if there is more than one kidney exchange obligation. Scandiatransplant office will provide data on how many cases the number of exchange obligations are > 1 and the suggestion will be brought forward at the NKG meeting.

**14. DPB1 DQA1 typing**

All laboratories are doing HLA-DPβ1 and HLA-DQα1 typings today.

**15. Donor retyping in recipient centre?**

It was discussed and decided that it is up to each transplantation centre to decide if retyping of received donors should be done.

**16. Status of laboratories**

Can we decrease the number of HLA-antibody analysis per year done on patients waiting for transplantation? The subject will be discussed more during the next STTM meeting.

**17. Next meeting**

Question that will be discussed further during the next meeting:

- UKNEQAS and ETRL clinical scenarios for discussion in future TTSM.
- Should we decrease the number of HLA-antibody analysis per year done on patients waiting for transplantation?

The next meeting will be held 21st of September 2018 in Aarhus, Denmark.

Secretary

Barnabas Kolumban

Adjusted by

Ilse Duus Weinreich                             Bjarne Møller