

News from Scandiatransplant office

October 2018 - 2

Introduction

Headlines

Database update October 31st, 2018

- Updates in SAE/SAR registration
- DPB1 matching in STAMP
- Kidney recipient search No. of DSAs
- Upload and share images and reports in relation with deceased donors
- Guidelines sample volume on child deceased donors

All previous newsletters can be found on the Scandiatransplant web page <u>http://www.scandiatransplant.org/news/newsletters</u>

Content

- 1 Introduction
- 2 Updates in SAE/SAR registration
- 3 DPB1 matching in STAMP
- 3 Kidney recipient search No. of DSAs
- 4 Upload and share images and reports in relation with deceased donors
- 5 Guidelines sample volume on child deceased donors

Purpose

By this information letter, we wish to communicate to you about status and progress related to the database, collaboration with groups related to Scandiatransplant and on-going working projects.

We hope that you will read it and share the information with whom it might concern.

Do not hesitate to contact us for further information, ideas, problems and help.

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Updates in SAE/SAR registration

Event or reaction?

At the last meeting between the Competent Authorities and Scandiatransplant it became clear that the competent authorities have to divide and report SAEs and SARs separately to the EU Commission. To ease this separation a new field has been added to the SAE/SAR registration and it is now obligatory to specify if it is an event or reaction that is being reported.

Definitions are found as bubble text in the system:

Is this an event or a reaction?:	E: Event × ×	A serious adverse event (SAE) is defined as any untoward occurrence that might lead to the
		transmission of a communicable disease, to death or life-threatening, disabling or incapacitating conditions for patients or which might result in, or prolong, hospitalization or morbidity.
eline data	R: Reaction	
Date for SAE/SAR:		A serious adverse reaction (SAR) is defined as an unintended response that is fatal, life- threatening, disabling or incapacitating or which results in, or prolongs, hospitalization or morbidity.

<u>Sending report – acute</u>

Clicking on the 'Send report' will notify all coordinators acute with a SMS and an email and all competent authorities with an email.

To avoid sending out SAE/SAR reports that are not urgent a new warning message has been added.



<u>Sending report – not acute</u>

Each day at 10:00 CET reports created within the last 24 hours will automatically be included in an email to all coordinators and competent authorities. For reports that needs further evaluation before it is sent out a new facility has been added to the system

Ready to send non- urgent report?	Unexpected or unforseen and unwanted or undesired? If not, please do not report! If you are in doubt, you can see definitions and examples <u>here</u>					
	Is the report ready to be sent out (r: Yes, the report can be sent out automatically at 10:00 CET x v N: No, the report needs further management Y: Yes, the report can be sent out automatically at 10:00 CET Where up the event occurs, or when SCTP					

As long as the report has the status 'N: No, the report needs further management' it will not be sent out.

When the report is ready to be sent you will need to change status to 'Y: Yes, the report can be sent out automatically at 10:00 CET'

Warning before sending urgent report

New field

Event or reaction?

DPB1 matching in STAMP

At the latest tissue typers meeting it was decided to match STAMP patients only on the HLA-DPB1 types where it is possible to detect the antibodies with single antigen bead analyses.

With the update today, the HLA-DPB1 acceptable mismatches list corresponds with these antigens. Furthermore, it has been decided to group/match some of the more common DPB1-types that are not found on the beads according to their G-groups. The current list of these is found here:

http://www.scandiatransplant.org/members/sttg/DPB1 matchinSTAMP.pdf In search it will look like this:



Update current STAMP/LAMP patients with DPB1 acceptable mismatches

All tissue typing labs. should now start to update the patients already included on STAMP and LAMP.

All patients must be updated before DPB1 is included in the STAMP search algorithm.

The current time estimate is that DPB1 match will be launched in production in the first week of January 2019.

Please remember that due to this solution 'Select calculated' and display of 'DSA' might not work as intended for DPB1.

Kidney recipient search – No. of DSAs

In kidney recipient search the DSA column has been added a count of DSAs before display of specificities:

		1	HLA-sea	arch: A24;B6	4,37;C*1,7;D	RB1*17	;DPB1*	0301;D	Q2,6;Bv	rw4,w6					Calcula	ted Bw:	w4,w6		
Y	5	No extra filters added																	
	Pri	Sc	Rec	Surname	First Name	Age	Wa	Тх	Im	AB0	AB	DR	DSA	CW/ 🗸	HCV	НВ	Pre	Туре	ST
	2	198	AR	Surname:	First nam	36	4	2	NI	в	2	1	00:	+	-	-		КI	s
⇒	2	198	TA	Surname:	First nam	50	56	3	Ι	в	1	0	01: DQ6	+	-	-		КI	S
⇒	7	199	AR	Surname: J.	First nam	62	5	1	NI	в	2	1	00:	-	-	-		КI	
⇒	7	200	AR	Surname:	First nam	58	4	1	NI	в	2	1	00:	+	-	-		КI	
⇒	7	196	AR	Surname: J.	First nam	59	24	1	NI	В	2	0	00:	+	-	-		КI	
⇒	7	199	AR	Surname:	First nam	37	6	1	NI	в	3	0	00:	-	-	-		КI	
⇒	7	149	AR	Surname:	First nam	45	2	2	Ι	в	3	1	01: DQ2	+	-	-	DQ	КI	
⇒	7	106	AR	Surname: J.	First nam	66	32	2	Ι	в	3	0	01: DQ6	-	-	-	A24	КI	
⇒	7	110	AR	Surname:	First nam	53	5	3	PI	в	2	1	01: DR17	+	-	-	DQ	КI	
⇒	7	107	AR	Surname:	First nam	53	46	2	I	AB	2	1	02: DQ2,DQ6	+	-	-	Cw7	КI	s
	-	100		e		50	~						43. B03 B07					1.77	

Upload and share images and reports in relation with deceased donors

When organs are offered CT scans, x-rays, histology reports etc. are important in the evaluation process.

In YASWA a new facility to upload and store files have been added in deceased donor. This should make it easier for possible receiving centers to securely download and look at the material.

In deceased donor select the specific donor and go to the new tab 'Files'.



<u>Upload</u>

To upload a file click in the field below 'Name of file' followed by 'Find' to find and select the file on your own computer.

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Files									
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Click on save to upload the file, you can add a desciption of the file as guidance if you want.

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		Birth-date:			Perso	on Number:				Age in ye	ars at donation	:		
		Donor name:	Name:											
Basic	Infec	tion Labor	atory tests	Medical in	1fo Blood g	as & vent	Medication Files	HLA	Organ proc.	Organ offer	Organ QC	Files		
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Share information to ease organ evaluation

<u>View</u>

To view a file that has been uploaded click on the small download icon and open it

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	Files										
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<u>Delete</u>

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New guidelines on sample volume on child deceased donors

September 21st 2018 the tissue typers group had their annual meeting.

At the meeting 'Guideline on routine donor samples required by each laboratory in case of organ exchange within Scandiatransplant for CHILD donors' was discussed and agreed upon by all tissue typing labs.

New guidelines:

http://www.scandiatransplant.org/organ-

allocation/Scandiatransplantguidelinesforbloodvolum edrawnfromchildorgandonors.pdf

Minutes from tissue typer meeting (the subject is described in point 11):

http://www.scandiatransplant.org/members/sttg/Minu tesTissueTypersMeetingAarhus2018.pdf

The guidelines for adult donors are unchanged: <u>http://www.scandiatransplant.org/organ-</u> allocation/Revisionofroutinedonorsamples210217.pdf

New additional guidelines on blood sample volume