Rules for exchange of kidneys from deceased donor within the Scandiatransplant cooperation

Exchange obligations

By existing HLA compatibility at least one kidney per deceased kidney donor must be applied for transplantation of a recipient on the Scandiatransplant waiting list according to the below-mentioned rules in order of priority: (However, this applies only if both kidneys from a deceased donor are applicable for transplantations)

1. Patient with STAMP-status that are ABO compatible with donor and where all donor HLA-A, -B, -C -DRB1, -DRB3/4/5, -DQA1, -DQB1, -DPA1, -DPB1 antigens are either shared with the recipient or are among those defined as acceptable.

2. Highly immunized (PRA ≥ 80%) patients who are HLA-A, -B, -DRB1 compatible with donor.

3. Immunized patients (PRA ≥ 10% but below 80%) who are HLA-A, -B, -DRB1 compatible with donor.

4. If organ donor is <50 years of age, at least one kidney is offered to recipient <18 years of age (counted from time of registration), in accordance with the specific registration of non-acceptable HLA antigens and/or mismatches.

5. Patients < 60 years of age who are HLA-A, -B, -DRB1 compatible with donor unless the proposed recipient is > 30 years older than the donor

HLA compatibility:
HLA compatibility means 0 (zero) HLA mismatches between donor and recipient as regards to broad HLA-A, -B, DRB1 and furthermore HLA-Bw4/Bw6.

ABO blood group matching:
Exchange obligation priority 1: Donors are matched ABO-compatible
Exchange obligation priorities 2-5: Donors are matched ABO-identical, with the exception of donors of blood group A, which also can be exchanged to recipients of blood group AB.

Prioritization when more than one recipient has the same exchange obligation priority

When more than one recipient shares the same priority level, allocation is determined by a predefined weight score, based on the criteria listed below in descending order of importance.

Exchange obligation priority 1:

1. Lowest Transplantability Score (ABO compatible)
2. ABO-identical recipient
3. Same country as the donor
4. Longest waiting time

Exchange obligation priorities 2 - 5:

1. Same centre as the donor
2. Same country as the donor
3. Longest waiting time

48-hour time limit for exchange obligation search

The time between the search for possible exchange obligations and the actual donation must not exceed 48 hours. If more than 48 hours have elapsed, a new search must be performed unless the patients have been informed. Coordinator team of the donor hospital is responsible to check the situation and re-launch the search.

Payback obligations

- Kidneys, which are exchanged on basis of the above-mentioned obligatory exchange rules, must be "paid back".
- Payback should be offered with the ***first*** available ABO blood group identical kidney with a quality comparable to the primarily received kidney.
- Kidneys from a donor aged ± 15 years, compared to the age of the primary donor, are eligible for payback. The cause of not offering such kidneys must be noted.
- Kidneys outside this age range and in other blood groups may also be offered.
- The kidney offered as payback must be of a quality acceptable to the recipient centre. The receiving centre is allowed to reject any payback offer. The cause of this rejection must be noted in all cases.
- In rare cases two kidneys will have to be paid back from the same donor. Thus, it will not be possible to always keep one kidney in the retrieving centre. However, the primary exchange obligations above, based on HLA-matching, are always in priority before the payback/return obligations. This priority rule applies also when you optionally chose to send both kidneys in the primary exchange.
- If there is a suitable recipient for a kidney transplantation combined with any other organ, i.e. pancreas liver, heart, intestine, this may also be prioritized and regarded as an acceptable reason for not paying back a kidney.
- If there are other extraordinary reasons for not following the payback obligations, this must be agreed after personal contact with the responsible physician at the receiving centre.

Rotation rules (surplus kidneys)

- When a surplus kidney is available other centres within the country should be offered the kidney. If there is no suitable recipient in own country the kidney should be offered to the other Scandiatransplant centres according to the rota list.
- All centres must respond positive/negative to the rota list offer within 30 minutes.
- The country at the highest position on the rota list accepting the kidney will receive it.
- Only the accepting country is rotated and the donor centre is responsible for the rotation a.s.a.p.
- Rotation has to be done when a surplus kidney is offered and accepted by the receiving centre of another country.
- When both kidneys are offered, they should, whenever possible and with respect to kidney quality, be exported to two different countries.
- When a surplus kidney is offered the receiving centre has ***no*** payback obligation. There is no differentiation between causes for offering, the rule applies to all surplus kidneys.

The above rules are active from 1st of January 2027

SCANDIA TRANSPLANT
Founded 1969 by the Nordic Council