

Founded 1969 by the Nordic Council of Ministers



Slideshow 2016 Scandiatransplant activities

Slide presentation of Scandiatransplant activities 2016	
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Scandiatransplant

Scandiatransplant is the organ exchange organization for the Nordic countries Denmark, Finland, Iceland, Norway and Sweden. It covers a population of about 26,9 million inhabitants. It is owned by the ten hospitals performing organ transplantation in these countries. The office is located at Aarhus University Hospital, Denmark.

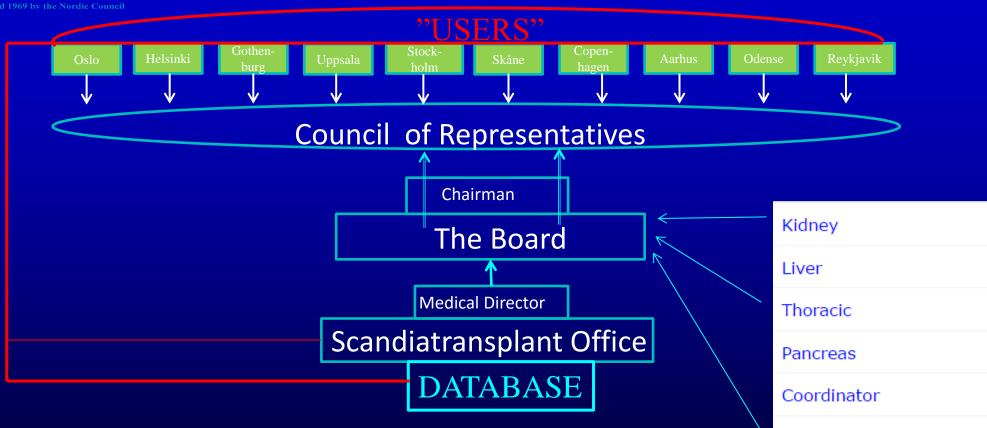


Purpose of Scandiatransplant

- to serve as a common organ exchange organisation and allocation resource for its member hospitals including kidney, liver, heart, lung, pancreas, pancreatic islet, cellular, intestinal and multivisceral transplantation. This is done transparently, using ethical principles and in full compliance with the national legislation of the members' countries,
- to maintain and operate a common waiting list for transplantation,
- to ensure complete traceability from organ donors to patients,
- to maintain and operate follow-up registries of transplanted patients,
- to maintain and operate follow-up registries of living donors,
- to serve as a collaborative platform through specialized working groups and advisory groups in order to facilitate best practice recommendations and policies optimizing retrieval, allocation and transplantation of organs, and
- to form a collaborative network for the member hospitals to promote research and development related to organ donation, allocation and transplantation.



Scandiatransplant organisation



Tissue Typer



Awarded Grants in 2016

Reseach Grant

- "Donor Specific HLA alloantibodies in Liver Transplantation: a prospective blinded multicenter prognostic study" Principal investigator: Allan Rasmussen.220.000 DKK
- Platelets, coagulation and cardiac allograft vasculopathy after heart transplantation.
 Principal investigator: Hans Eiskjær. 150.000 DKK

Travel Grant

- Hans Henrik L. Schultz was granted 12500 DKK.
- Carina Lund Sørensen was granted 24000 DKK.
- Hege Vibstad and Anna Maria Riddervold Nordin were granted 29000 NOK.
- *Timo Saarinen and Anne Polvi were granted 13000 DKK.*
- Petra Vestlund was granted 9600 SEK.



Scandiatransplant Office Activities 2016

- Customize the IT-system to the user's wishes and optimizing security and functionality of the system.
- Educate users and comply with demands from users, owners, researchers and the public.
- Arrange and participate in meetings for groups, committees, board and council of representatives.
- Lead the work in achieving data processor agreements with all member hospitals
- Participate in meetings with Nordic competent authorities and EUcommission.
- Take care of finance and personnel.



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Organ procurement and transplantation activities in Scandiatransplant

2016



Scandiatransplant 2016

- 521 Utilized deceased donors (19.37 PMP)
- Organ transplants performed
 - 1195 kidneys (318 were kidneys from living donors)
 - 419 livers (2 were livers from living donors 0 were domino)
 - 145 hearts (0 were domino)
 - 143 lungs including heart/lung
 - 78 pancreas (65 as combined kidney-pancreas)
- 2487 patients on waiting list at end 2016



Patients entered on waiting list during 2016 (2015 figures)

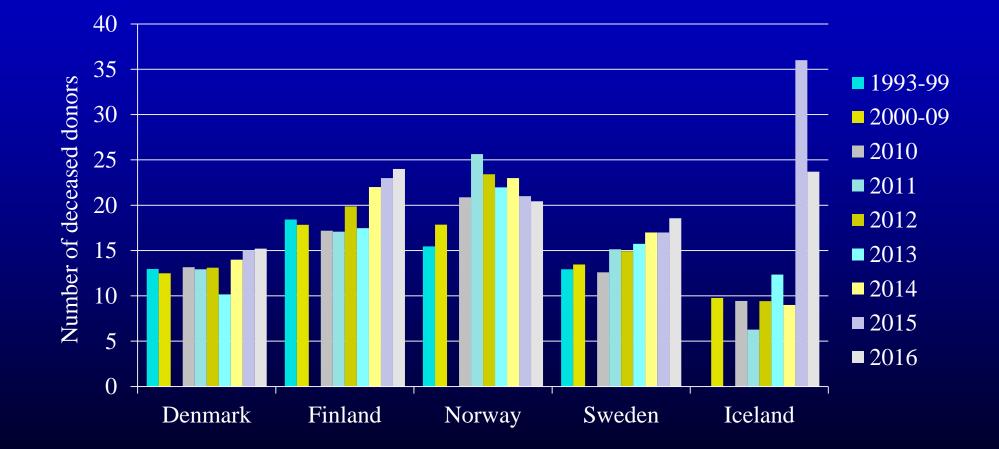
 Kidney
 1312 (1384)

•

- Liver 459 (425)
- Heart 161 (190)
- Lung 191 (193)
- Pancreas 22 (25)
- Kidney+Pancreas 51 (75)
- Liver+kidney 12 (2)
- TOTAL 2208 (2294)

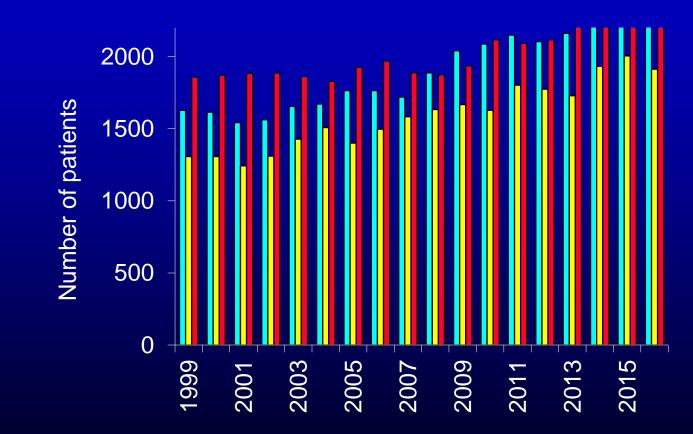


Utilized deceased donors PMP





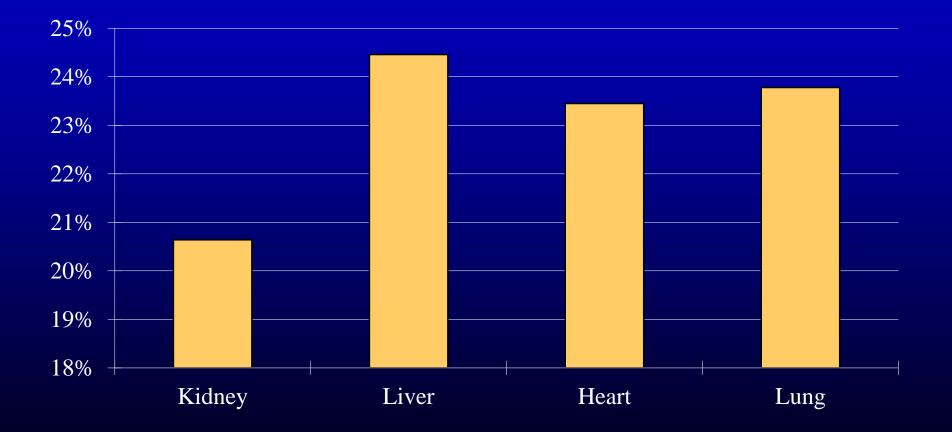
Yearly flow on the waiting list



- Entered during the year
- Transplanted during the year
- On waiting list at end of year



Organ exchange between centers in 2016





Kidney Transplantation



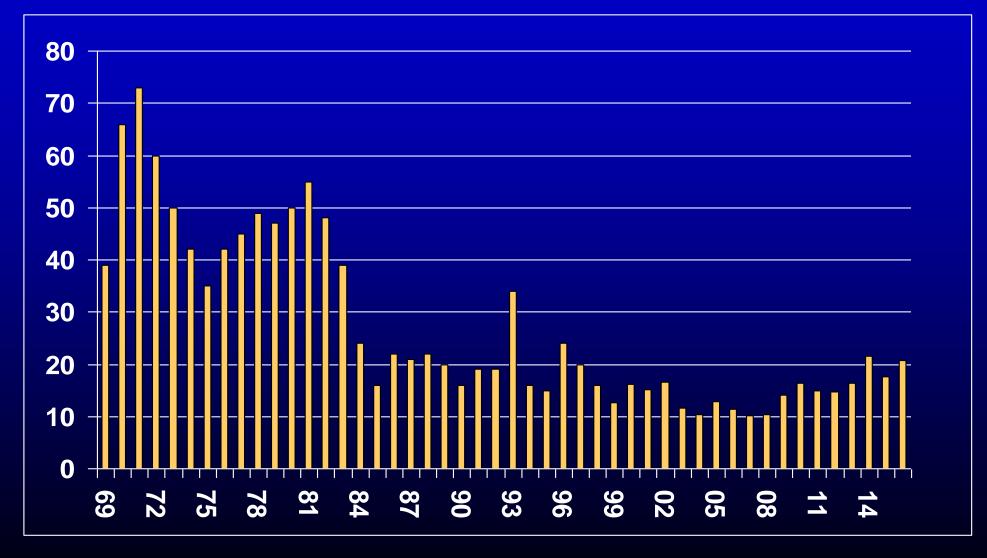
Kidney Transplantation 1989 – 2016



Deceased donors
Living donors

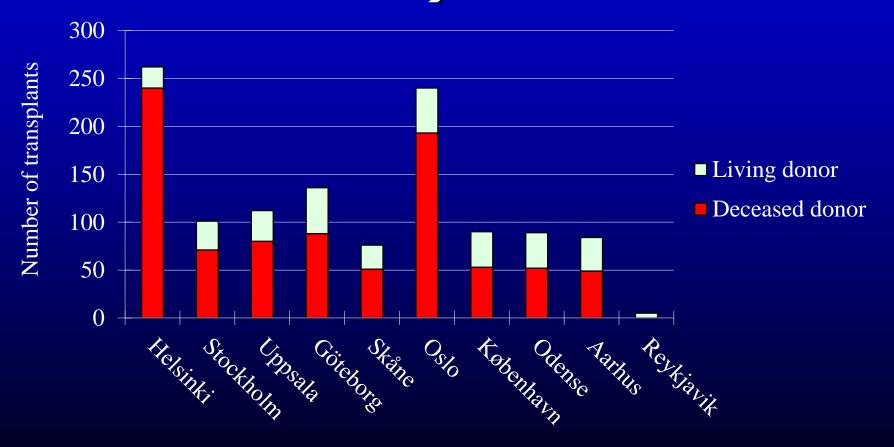


Kidney exchange rate 1969 - 2016



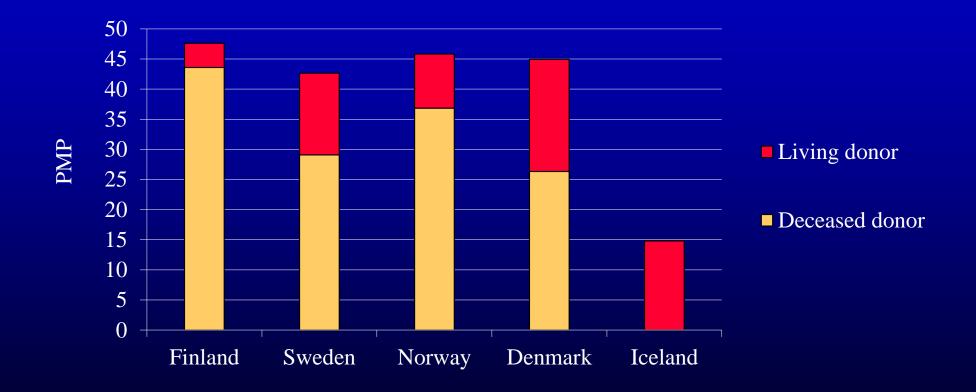


Kidney Transplantation activity 2016 by centre



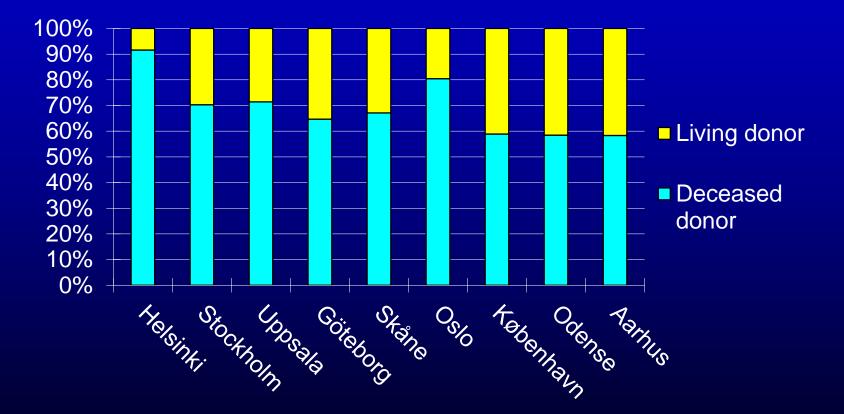


Kidney Transplantation PMP 2016



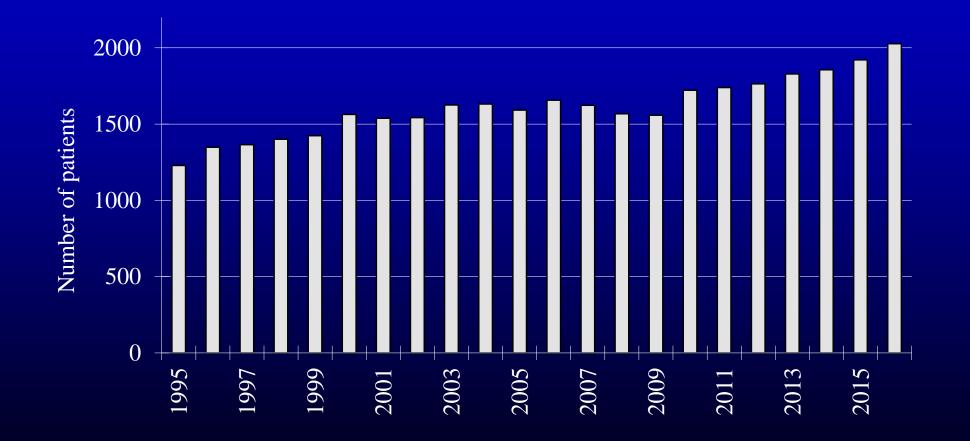


Kidney Transplantation 2016





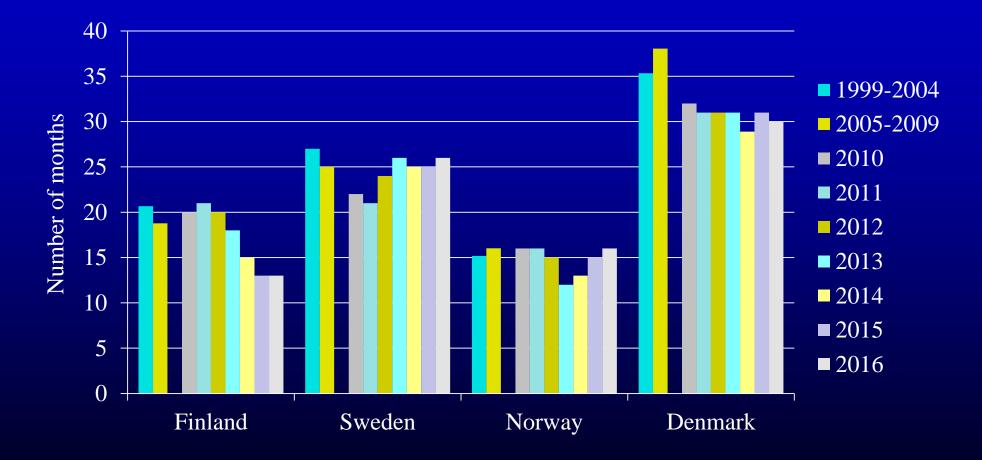
Number of patients on the kidney waiting list at the end of the year 1995 - 2016





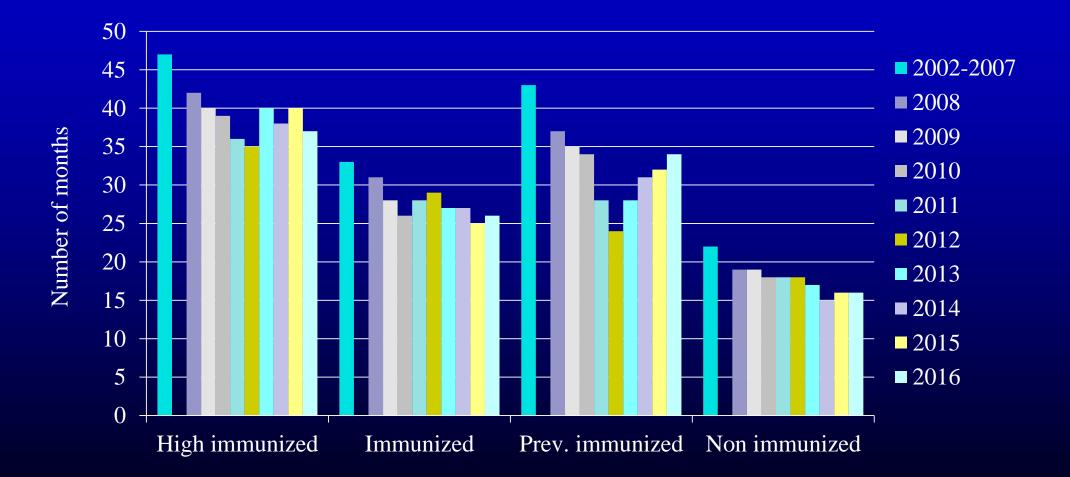
Average months on kidney waiting list at end of year

(including patients active and on hold)



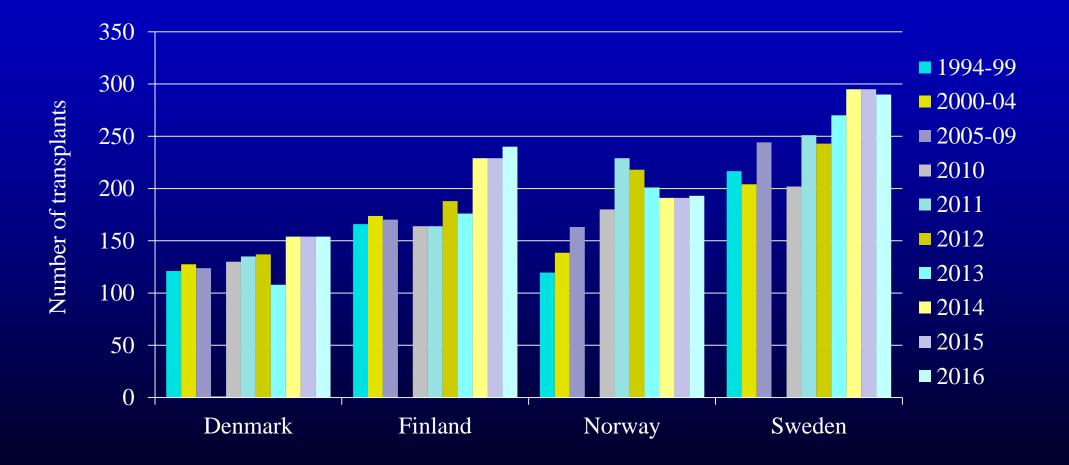


Average months on kidney waiting list by immunisation status at end year



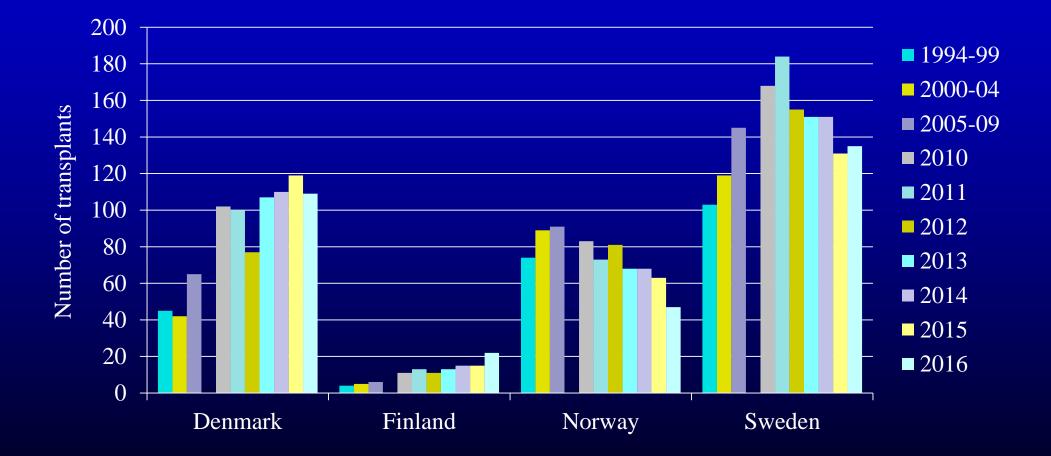


Deceased donor kidney transplants 1994 - 2016





Living donor kidney transplants 1994 - 2016





Kidney exchange obligations

1. Highly immunized (PRA \geq 80%) patients who are HLA-A, -B, -DR compatible with donor.

2. Patient with STAMP-status when all donor HLA-A, -B, -C -DR, -DQ antigens are either shared with the recipient or are among those defined as acceptable.

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

4. If organ donor is <50 years of age, at least one kidney is offered to recipient <16 years of age (counted from time of registration), if there is HLA-DR compatibility and in addition not more than 2 HLA-A,B mismatches.

5. Patients who are HLA-A,-B,-DR compatible with donor unless the proposed recipient is >30 years older than the donor.

- blood group 0 kidneys to blood group 0 recipients.
- blood group B kidneys to blood group B recipients.
- return obligation of a kidney within 6 months.



Liver Transplantation

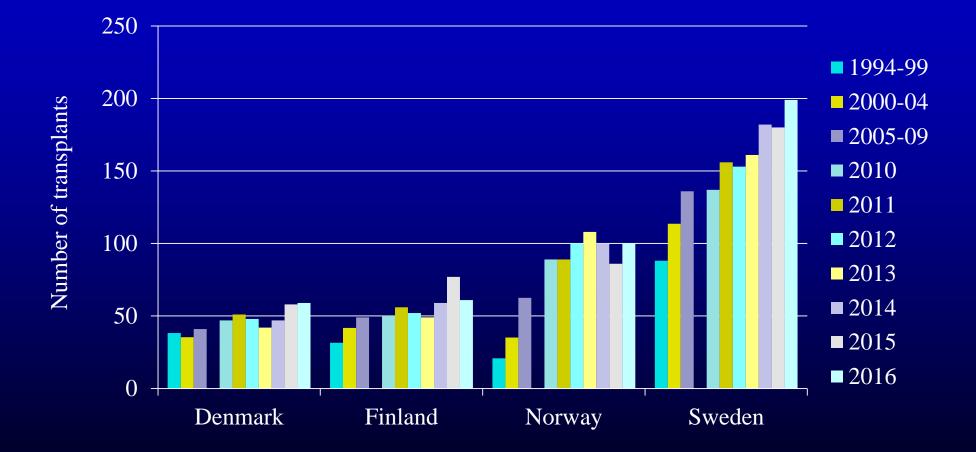


Liver Transplantation 1989 - 2016





Liver Transplantation 1994-2016





Exchange criteria Liver

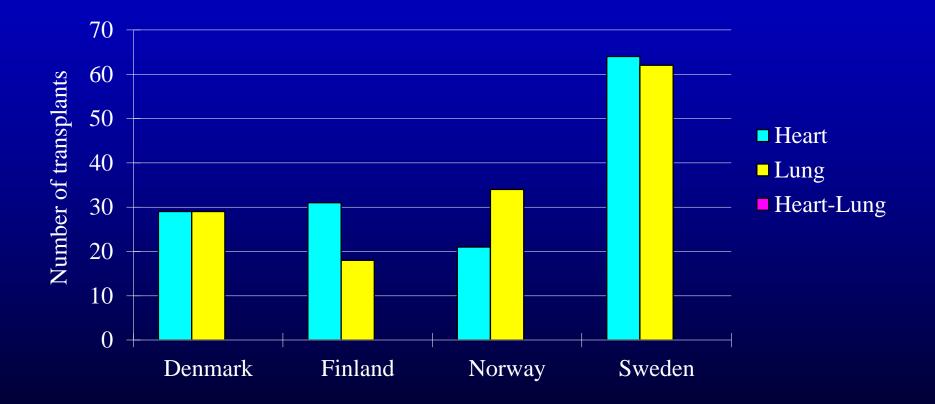
- Exchange obligation to highly urgent patients:
 - acute liver failure
 - acute liver re-transplantation
 - highly urgent patients needs to be transplanted within 72 hours
- Exchange obligation to Pediatric recipients (<18 years at entry on liver waiting list) if donor liver fulfils split criteria
 - Return (pay back) liver to Donor centre
- Rota system for spare livers



Thoracic Transplantation

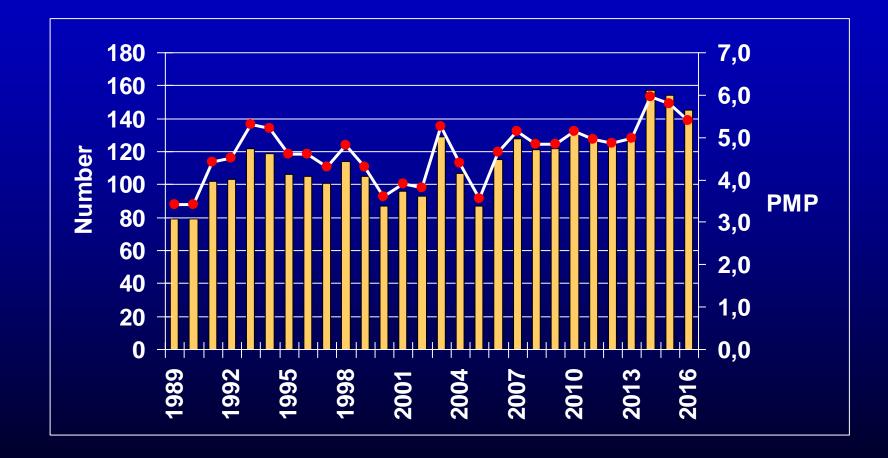


Thoracic transplantation 2016



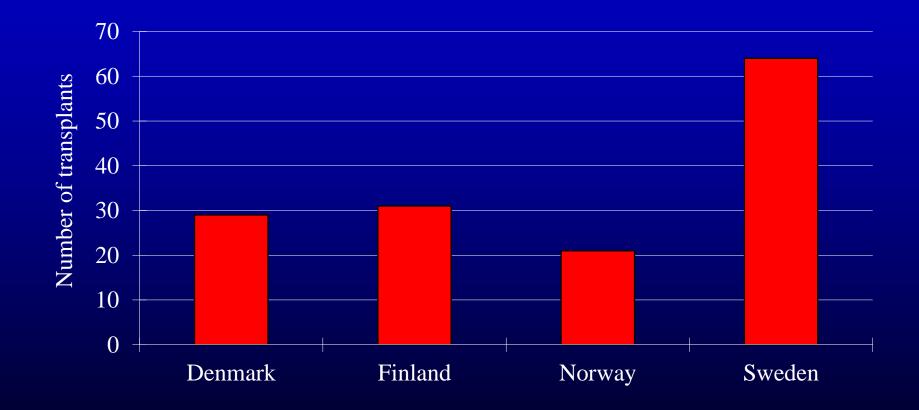


Heart Transplantation 1989 - 2016



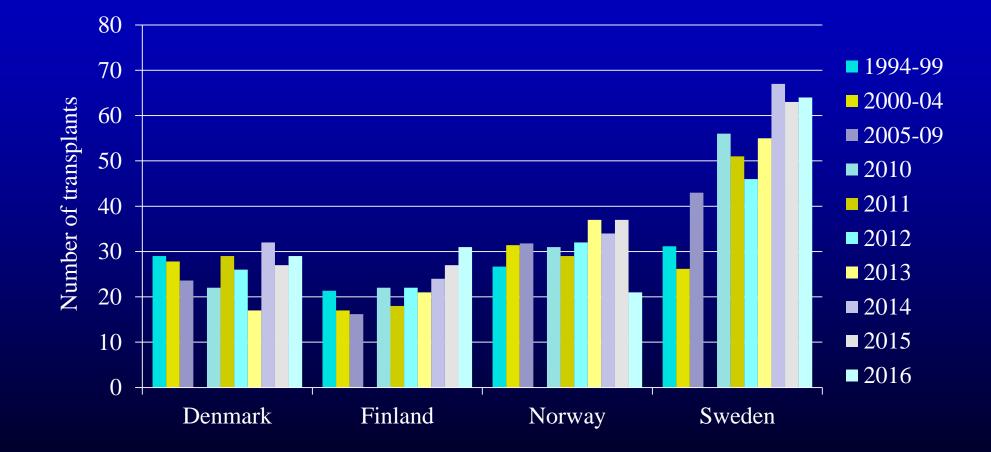


Heart transplantation 2016

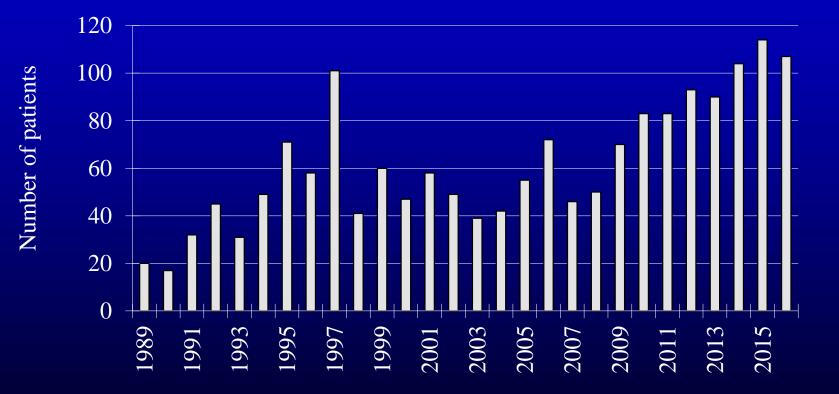




Heart Transplantation 1994 - 2016



Number of patients on the heart waiting list at the end of the year 1989 - 2016



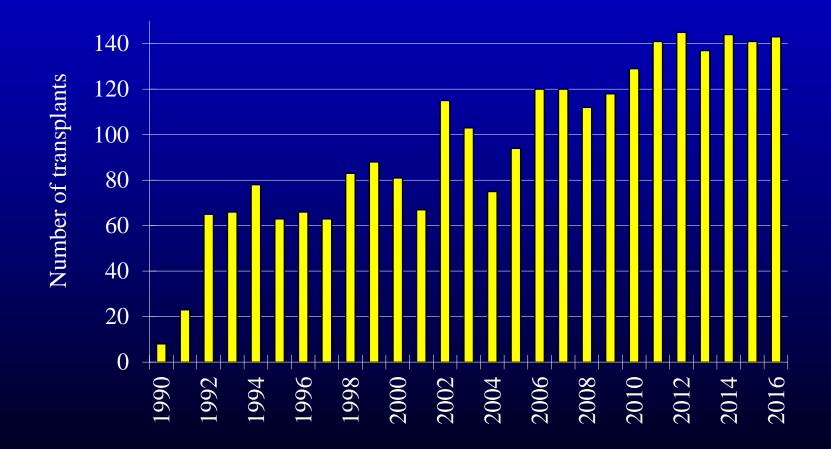


Exchange criteria Heart

- Exchange obligation to highly urgent patients on waiting list:
 - Patient on short-term assist devices (ECMO, centrifugal pump).
 - Patient on para corporeal or implantable blood pump with device failure or uncontrollable device infection.
 - Patients below 16 years on inotropic support for more than 12 months support on implantable LVAS.
- Rota system for exchange of hearts between countries.

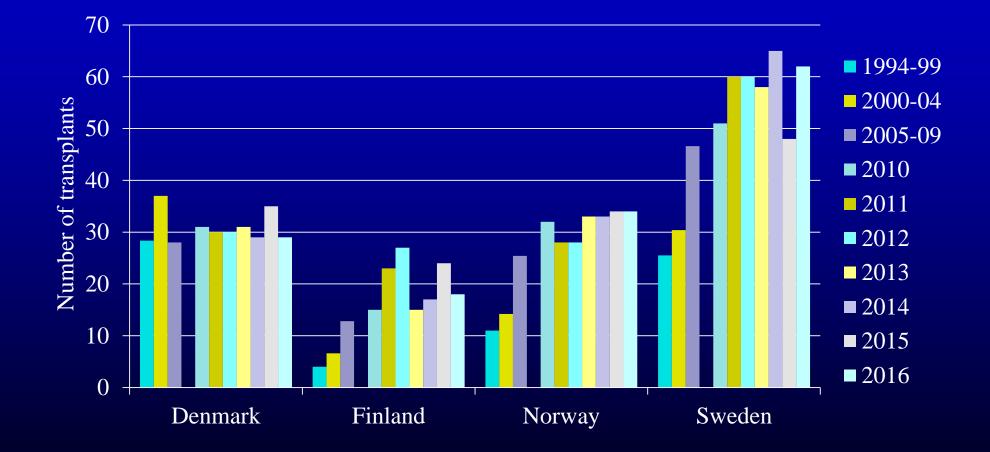


Lung transplantation including heart-lung



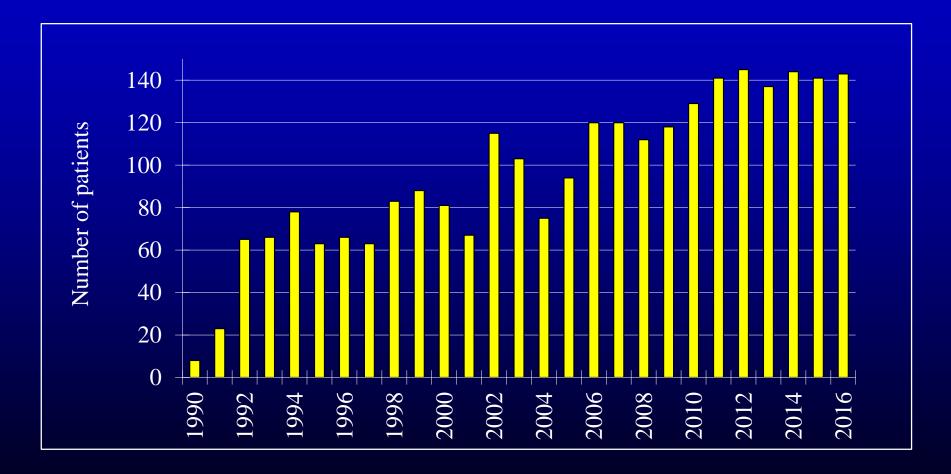


Lung Transplantation 1994 - 2016





Number of patients on the Lung waiting list at the end of the year 1991 – 2016





Exchange criteria Lung

- Exchange obligation to highly urgent patients on waiting list
 - Priority 0: Patient on extra-corporeal circulatory support (ECMO, Novalung or other device) or ventilatory support*.
 - Priority 1: Patient with a rapid progression of organ failure with poor prognosis in a short time defined by the responsible centre*.
 - *max. three patients per centre per year.
- Rota system for exchange of hearts between countries.



Pancreas Transplantation

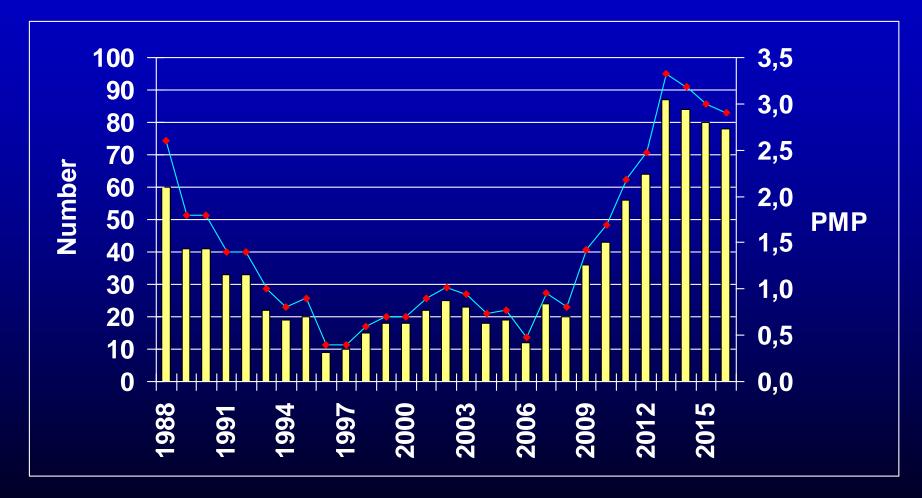


Exchange recommendations Pancreas

If there is no suitable recipient in own centre, the pancreas (and kidney if SPK) is recommended to be offered to AB0 compatible recipients in other centres. The centre at the highest position on the rota list accepting the pancreas will receive it and be put last. Shipment of a kidney is only performed if no other kidney exchange obligation with higher priority (as defined by Scandiatransplant) exists. The receiving centre has the responsibility for the pancreas procurement. The receiving centre has to pay back, as soon as possible, with an AB0 identical kidney of a quality acceptable to the recipient centre. There is no mandatory payback for the pancreas.



Pancreas Transplantation 1988 – 2016





Thank you