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New national scheme for assessing patients for the deceased donor transplant waiting list

OR

How do the doctors decide whether I can get on the waiting list for a deceased donor kidney?

A kidney transplant is usually the best treatment for people with end stage kidney disease. Donor kidneys can come from living or deceased people.

Deceased donor kidneys are scarce. When a deceased donor kidney becomes available for transplantation it makes sense to ensure that the best use is made of this special donation.

Anyone who wants to get on the deceased donor kidney transplant waiting list needs to be in good general health. For people in poor health having a kidney transplant may not be the best option. A kidney transplant is not recommended for people who have a high risk of having a heart attack during or soon after surgery. People who have an active cancer or infection cannot have a transplant. There is more information on this at

www.kidneys.co.nz/resources/file/Having%20a%20Kidney%20Transplant.pdf

The three New Zealand kidney transplant teams meet regularly to discuss and review all patients who want to go on the transplant waiting list. From 1 April 2013 these committees will be using a new nationally agreed method or tool for assessing the health and suitability of people who want to go on to the deceased donor kidney waiting list – the “transplant list”.

Things you need to know about this new tool

- A “standard” for acceptance onto the waiting list has been developed by kidney doctors and transplant surgeons in New Zealand and Australia. Patients placed on the deceased donor waiting list should have an estimated 80% chance of living at least 5 years after transplant.
- This tool or protocol estimates the likelihood (chance) that a person with kidney failure who receives a transplant will live for at least five years with their transplant.
- The tool is based on research on kidney patients in North America. Local kidney doctors have checked to see that the tool works on New Zealand patients.
- The score is a ‘rough guide’ and is based on things that predict how well a patient will do after a transplant, such as age, presence of disease, cause of kidney failure and time on dialysis.
- There are other things taken into account by the committees, and a good score does not automatically make a patient suitable.
- A good score doesn’t mean a patient will get a kidney, or that a patient will have a good outcome (patients with high scores may still die after a transplant).
- The tool and its use are endorsed by the Transplantation Subcommittee of the National Renal Advisory Board.
- The tool is only used for the deceased donor waiting list – if a patient does not meet the criteria, a living donor kidney may still be an option for them.

How will the new tool be used?

- Decisions about people going on the waiting list are made by a committee of kidney doctors and transplant surgeons at each of the three transplant centres at Auckland, Wellington and Christchurch Hospitals.
- Scoring is done by the referring kidney specialist, and checked by the transplant centre. Each patient’s case is put to the committee by the patient’s kidney doctor who acts as their advocate.
- Patients with a score of 80% will be placed on the deceased donor waiting list. Patients who scores less than 70% will not be placed on the waiting list by

their local committee. There is a right of appeal by the referring kidney specialist to the Transplantation Subcommittee for people with a score less than 70%, if they consider this justified.

- Because the score is 'rough', patients who fall between 70% and 80% may still get on the waiting list if their local transplant committee considers their score the tool comes up with is unduly pessimistic. Once patients are on the list they must continue to meet the criteria. Scores change with new illnesses and advancing age and so patients should be aware that if they are OK to go on the list now this doesn't mean they will be OK to remain on the list for ever. Transplant units will recheck scores of those on the list annually, or when new illnesses occur.
- The Transplantation Subcommittee will be monitoring the use of this assessment tool.

What does the use of the new tool mean for patients who are already on the deceased donor waiting list?

- The health factors taken into account when assessing patients for the waiting list have not changed.
- The number of patients going on the waiting list is unlikely to change with the use of the new assessment tool.
- All patients on the waiting list will be assessed using the new tool. Patients will be reassessed annually.

If a patient on the waiting list becomes unwell they may need to be removed from the list. The use of the new tool does not change this.

This new scheme has three main aims:

- To ensure everyone with kidney failure has equal access to the transplant waiting list
- To ensure that decisions made about people going on the waiting list are fair
- To ensure that the best use is made of donor kidneys

For further information about this new scheme, speak to your kidney doctor.

