

Quality Improvement Metric 2

Proportion of kidney transplants from living donors occurring as pre-emptive or early kidney transplants.

Definitions

Pre-Emptive Live Donor Kidney Transplant: A live donor kidney transplant performed to treat native or prior transplant kidney failure before any dialysis is required.

Early Live Donor Kidney Transplant: A live donor kidney transplant performed to treat native or prior transplant kidney failure with less than 90 days of dialysis between kidney failure and transplant.

Objectives

Early transplantation following kidney failure (either native kidneys or prior transplant) minimises risk to recipients by avoiding dialysis associated morbidity and minimises dialysis associated health care expenditure. Well organised services should place emphasis on avoiding dialysis for patients with identified and assessed living donors by scheduling transplants just before dialysis is required. This is difficult to predict with accuracy, and the harm associated with short periods of dialysis is likely to be small, therefore to avoid overemphasis on performing transplants too early (ie well in advance of the recipient requiring transplantation), early kidney transplants will also be reported.

This metric aims to aim to minimise the dialysis exposure for transplanted patients while avoiding overemphasis on pre-emptive transplantation.

Reporting

Annually, by Transplant Unit, by provision of updated spreadsheet designed by National Renal Transplant Service (NRTS) in consultation with transplanting units to Clinical Director, National Renal Transplant Service.

Analysis

For each dialysing DHB:

Pre-emptive kidney transplants *divided by* (All living donor kidney transplants) performed in the last year, compared to rolling average of the prior three years.

Early live donor kidney transplants *divided by* (All living donor kidney transplants) performed in the last year, compared to rolling average of the prior three years.

Publication

Annually, by NRTS. Provided to Clinical Directors of Renal Units nationally, and the Ministry of Health via National Health Board.