

## Recommendation/policy

To the Eurotransplant International Board

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Committee: TTAC and ETKAC  
Number: R-TTAC02.15  
Title: Choice for AM vs ETKAS and/or ESP  
Meeting date: Board meeting October 14, 2015

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### Recommendation/policy

#### R-TTAC02.15 – Choice for AM vs ETKAS and/or ESP

A highly sensitized patient can either receive a donor kidney via the Acceptable Mismatch waiting list or via the ETKAS and/or ESP waiting list. Double listing for AM and other kidney allocation programs is not possible.

#### Rationale and goal

Highly immunized patients have the possibility to be included in the Acceptable Mismatch (AM) program, which gives them absolute priority when a suitable organ (mismatched for acceptable mismatches) becomes available. However, these patients are currently also included in the ETKAS and/or ESP. The consequence is that many additional offers are made to long waiting AM patients, which in the far majority of the cases are not suitable as the ETKAS and ESP allocation does not consider the acceptable mismatches but only the absence of unacceptable mismatches. The consequence is that the immunologists of the ETRL, who are called for every offer to an AM patient, have to give many negative advices. Considering the absolute priority the patients already get in the AM program, this second chance via ETKAS and/or ESP is not cost-effective.

#### Scientific base

The AM program is well recognized for its efficiency to enhance transplantation of highly sensitized patients with excellent results. Double listing complicates the allocation procedure and may affect graft survival negatively.

#### Involved parties

TTAC, ETKAC, National Authorities.

#### Concurrence with other organ allocation procedures

Not different compared to the current situation.

#### Impact on current national guidelines

This recommendation can in theory be implemented per country. Such an implementation per specific country will have a negative effect on the harmonization of the guidelines of the countries within ET. This recommendation is supported unanimously by all national representatives within the TTAC and ETKAC.

#### Concurrence with other IT innovations within Eurotransplant

None

#### Impact for development

100-250 hours

**Follow-up analysis**

The effect on the referral to the AM program after implementation of the recommendation will be monitored.