

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-008

OUTCOME 13: Acute Care

Topic: PAIRED KIDNEY EXCHANGE

Written Question on Notice

Senator Carol Brown asked:

Please provide information of the Paired Kidney Exchange, number of people, wait times etc.

Answer:

The Australian Paired Kidney Exchange (AKX) program increases live donor kidney transplants by identifying biologically incompatible donor/recipient pairs and matching them with other incompatible donor/recipient pairs. Exchanging donors creates two compatible matches.

The AKX program is managed by the National Coordination Centre, based at Fremantle Hospital in Perth. The first match-run of the AKX Program occurred in October 2010.

Donor/recipient match-runs and subsequent surgeries occur on a quarterly basis, with the August 2011 match-run identifying 13 pairs for possible transplants and the October 2011 match-run identifying 9 pairs for possible transplant.

Since its inception, the AKX program has matched 29 donor/recipient pairs, resulting in 17 successful kidney transplants to date and 12 pairs waiting for surgery (as at 8 November 2011) that are unlikely to have occurred in the absence of the AKX program.

Most recipients registered for the AKX program have been enrolled in the program because they are highly sensitised. This means they have many antibodies in their system that prevents them from being able to accept a kidney from the majority of kidney donors, deceased or alive.

The waiting time for surgery depends on the availability of a donor, the donor and recipient surgeons' assessment of the viability of the kidney for exchange, the availability of operating theatre time, and unexpected medical issues.

The ability of recipients to be matched with living kidney donors in the AKX program, and therefore the amount of time they wait for a kidney, is influenced by blood group incompatibility and the level of antibodies in the recipient. The more antibodies a recipient has, the less likely they are to find a suitable donor.

The AKX program results achieved in the first year exceed the numbers achieved in the first 12 months of similar programs internationally. England, for example, only achieved six kidney transplants in the first 12 months.

A review of the effectiveness of the first 12 months of operation of the AKX program has commenced. As part of the review process, a workshop for renal physicians, transplant surgeons, transplant nurses and pathology staff was held in Sydney on 27 October 2011.