

**Report to the Southwark Health, Adult Social Care, Communities and  
Citizenship Scrutiny Sub-Committee, 1 May 2013**

**1. Introduction:**

1.1 There has recently been national media coverage about liver transplant surgery at King's College Hospital (King's). It has been suggested that by treating fee-paying patients from overseas using NHS donor organs, UK patients needing transplant surgery are being disadvantaged.

1.2 This paper briefly outlines the rules and regulations for liver transplant surgery at King's, as defined by NHS Blood and Transplant (NHSBT) and the Department of Health (DH). This paper also explains the process (regulated by law) by which donor organs are allocated to UK and EU patients, as well as non-EU patients who pay for their treatment privately.

**2. Liver transplant surgery at King's:**

2.1 King's is home to the largest liver transplant centre in Europe, carrying out over 200 transplants every year. King's has a reputation for surgical excellence and innovation in this specialist field. Over the years, our surgeons have established new and pioneering liver transplant techniques; this includes the 'splitting' of livers so that the donated organ benefits more than one patient.

2.2 King's is also one of only a small number of centres to perform 'living related' transplant surgery in adults and children, which involves a living donor giving part of his/her liver to a relative. Similarly, King's has pioneered the successful use of organs retrieved from donors following cardiac death. This innovation has resulted in these organs being increasingly used in NHS practice throughout the UK.

**3. Allocating organs to UK, EU and non-EU patients:**

3.1 The vast majority of liver transplant operations carried out at King's are for UK, NHS patients. However, given our status and international reputation, we also treat NHS entitled patients from other European countries, as well as a small number of patients from countries outside Europe.

3.2 King's treats liver transplant patients from other European countries because they are entitled by law to NHS treatment. They also have limited or no access to liver transplantation in their own countries. All patients are assessed and prioritised for surgery according to clinical need, regardless of where they are from. All UK and European patients have the same rights to NHS treatment, and donated organs.

3.3 Patients from outside Europe come to King's for liver transplant surgery as private patients. These patients number approximately two a year. They only receive UK donor organs once these have been declared unusable for any NHS entitled patient in this country.

3.4 There are a number of reasons why a donor organ may be deemed unusable for an NHS entitled patient; this can be due to donor age, recipient age, clinical

condition of the recipient, clinical condition of the donor, the size of the donor and recipient, blood group, underlying liver disease of the recipient, and a number of other technical factors relating to the organ donation process.

3.5 In rare situations, where retrieved organs cannot be given to a suitable NHS or EU recipient at any transplant centre within the country, they are considered for non-EU patients.

3.6 The alternative to not using these organs is that they would be discarded, and potentially result in the death of an adult or child who might otherwise be given a chance of life.

3.7 No fee is received (by either the hospital or the surgeon) for the donor organ. Payment is received for the costs associated with the transplant operation, not for the organs from the deceased patients which EU patients (and, in turn, non-EU patients) are entitled to.

3.8 King's successfully utilises more donor livers than any other centre in the UK. Between 1 April 2007 and 31 March 2010, King's accepted the majority of livers that were offered to them, followed by Birmingham, who had the next highest acceptance rate. Overall, the proportion of livers declined by transplant centres in the UK ranged from 5% at King's and 13% at Birmingham to 61% at Newcastle, with other centres declining between 23% and 35% of their offers.

3.9 Our transplant team regularly retrieves organs from European countries and transports them back to King's for use in UK NHS patients.

#### **4. The national position:**

4.1 In response to recent media coverage about liver transplant surgery at King's, the Department of Health issued the following statement: "There are strict rules ensuring donated livers from the deceased are always allocated on the basis of clinical need, which is why having a transplant privately in no way means getting an organ more quickly. We have not banned any private organ transplants because there's no evidence they stop NHS patients having transplants or reduce public confidence in donating."

4.2 In addition, NHS Blood and Transplant said: "Our monitoring process has not highlighted any issues nor have issues been raised with us. We currently have no concerns about any of the units. Any unfounded media reports that question the integrity of this system could jeopardise public confidence in organ donation, lead to fewer organs being donated for transplant and lives being lost."

#### **5. The future:**

5.1 Media coverage of this issue is not new, but continues to be damaging to public confidence in the organ donation system. We have always been clear that we follow all the rules and regulations relating to liver transplant surgery at King's, and will continue to do so.

5.3 We report all transplant activity to NHS Blood and Transplant and the processes we have in place are fully audited on a regular basis.