THE SUCCESS OF THE URGENT HEART OFFERING SCHEMES IN THE UK

F M Seeney¹, J H Dark², R L Potter¹, J C Hussey¹, C J Rudge¹. ¹ UK Transplant, Bristol, United Kingdom; ² Cardiopulmonary Transplantation, Freeman Hospital, Newcastle, United Kingdom

Background: Since 1 April 1999 the UK has operated urgent allocation schemes for heart transplant candidates. These enable centres to register rapidly deteriorating patients to receive priority over more stable patients. Such schemes can only remain viable if the outcome of urgent heart grafts is acceptable. Methods: Data on 81 adult and 78 paediatric patients registered for urgent heart transplants between 1 April 1999 and 31 March 2003 were obtained from the UK National Transplant Database. Registration outcomes (transplant, death or removal) were monitored. Three month Kaplan-Meier patient survival rates were estimated. Results: Of the 159 urgent patients registered, 115 (65 adult) were transplanted, 19 (5 adult) died while waiting and 25 (11 adult) were removed from the urgent list. The adult scheme used 7% of usable adult donor hearts in the same period. Adult urgent recipients were younger: on average 40 years of age (range 16-67 years) compared with 47 (range 16-65 years) for elective recipients. Paediatric urgent patients who died were on average aged 3 years (range 0-11 years). Half were aged under 2 years and 12 died in the first two years but only 2 in the third. Paediatric elective patients who died were on average aged 2 (range 0-6 years). Transplanted paediatric patients were older: 8 years (range 0-15 years) for urgent and 9 years (range 0-15 years) for elective. Three month patient survival rates for urgent first heart grafts were comparable with those for elective heart transplants over the same period.

		Ν	Patient survival (%)	95% CI (%)
Adult	Urgent	62	90	83 - 98
	Elective	533	84	81 - 87
Paediatric	Urgent	42	95	89 - 100
	Elective	57	96	91 - 100

Conclusions: The paediatric scheme has almost eliminated deaths on the urgent list although finding hearts for infants remains a problem. Only a small proportion of adult donor hearts (7%) were used in the urgent scheme. Early survival was equal to that for elective transplants. Significant numbers of lives have been saved under these schemes.