Newsletter

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Dear colleagues,

We were very happy to see many of you at the 2023 Extramural meeting in Belgium. The meeting was very interactive and once again showed the need for in-person meetings. This ETRL Newsletter contains information on the virtual crossmatch, the use of HLA-DQA, DPB and DPA unacceptable antigens for AM eligibility, and an announcement of the ET desensitization program. We hope you enjoy reading and look forward to hopefully seeing you at EFI in Nantes.

Extramural Meeting 2023

The extramural meeting was held on the 10th of March in Mechelen, Belgium. Topics that were discussed are external proficiency testing, virtual crossmatching, and CDC screening, followed by a scientific lecture on post-transplant rejection diagnostics. On the ETRL website you can find a report and all presentations.

Virtual crossmatch

On the 24th of April the shadow phase of the virtual crossmatch project will end, negating the necessity of performing physical donor center crossmatches, and the accompanying serum exchange. Please be aware that sera for patients awaiting a heart, liver, lung, intestine, combined kidney/heart and kidney/liver transplant must remained stored at the donor centers, since for these recipients a prospective physical donor center crossmatch may be requested in case of an organ offer or acceptance.

We are happy to share that all Eurotransplant affiliated laboratories are now submitting donor HLA data through HML, resulting in well over 95% of donor HLA typing data being submitted through HML. Some manual entry is still performed in case no typing result could be obtained for HLA-DQA, -DPB and/or DPA, resulting in HML files not passing validation. From the 24th of April onwards, HML file lacking data on these loci will pass validation of the immunology application. This means that for the other loci the data on the allelic level can still be used. Confirmation that data on HLA-DQA, -DPA and/or -DPB are lacking in the HML file must be given by using the check boxes for these missing loci. Additional fine-tuning of immunology application has been performed to smoothen the HML upload process, and additional improvements will be made in the near future.

Based on an analysis performed by the ETRL on April 1st, 60 out of 77 kidney transplant programs have updated their recipient immunological profile to include unacceptable antigens based on allele-specific antibodies and/or unacceptable antigens for the loci HLA-DQA, -DQB, and/or DPA. The remaining programs have received a letter explaining the consequences of improper unacceptable antigen listing.

AM program reminders

- We would like to remind you that for the time being the acceptable and unacceptable antigens for the AM program remain on the split/broad match determinant level.
- When an AM patient returns to the kidney waiting list, please make sure to send a fresh serum sample together with the update form and serum information sheet for re-evaluation of the acceptable and unacceptable antigens once the patient is on a transplantable status. The current rule is that patients who have been accepted for the AM program will remain in the program after a failed graft.
- Please be aware that removing unacceptable antigens for an AM program is only possible if the patient still meets the inclusion criteria of the AM program. Since AM matching is based on self-HLA-A, -B and -DR combined with acceptable antigens for these loci, removing unacceptable antigens for HLA-A, -B and -DR should be accompanied by adding these antigens to the acceptable antigen list to actually increase the chance of an organ offer.

HLA-DQA, -DPB and -DPA unacceptable antigens for inclusion in the AM program

In their last meeting, the TTAC has decided how to deal with unacceptable antigens for HLA-DQA, -DPB and -DPA with respect to AM program inclusion. Unacceptable antigens for HLA-DQA, -DPB, and -DPA will be taken into consideration for AM program acceptance in case of clear antibody reactivity according to the following rules. There are no changes in the prerequisite that CDC reactivity directed at HLA class I and/or class II must be present.

HLA-DQA-specific antibodies

- DQA typing from immunizing event(s) is known.
- In case the DQA typing from the immunizing event(s) is unknown, it can be derived from the DRB1-DQB1 typing based on linkage.
- In case of several DQA antibody specificities, these can be taken into consideration provided that they share an antibody verified eplet with the immunizing DQA allele(s) and clear antibody reactivity is present in the serum against all alleles that share this eplet.

HLA-DP-specific antibodies

- DP typing of immunizing event(s) is known and can be taken into consideration.
- In case of several DP antibody specificities, these can be taken into consideration provided that they share an antibody verified eplet with the immunizing DP allele(s) and clear antibody reactivity is present in the serum against all alleles that share this eplet.
- DP typing of immunizing event(s) is unknown. In this case the DP antibody which has the highest MFI value is considered to be the immunizing event and antibody verified eplets are taken into consideration in the same way as described above.

Obviously, self-typing of the recipient for these loci must be taken into consideration in the unacceptable antigen analysis. All DQA/DP antibodies that are taken into consideration for acceptance in the AM program have to be registered as unacceptable antigens in ENIS. As described above, for patients in the AM program unacceptable antigens should be registered at the split/broad level according to the ETRL HLA tables.

ET desensitization program

Eurotransplant is working on the technical implementation of the ET desensitization program which is intended to start before July 1st, 2023. This program is for highly sensitized patients that have an extremely low chance to be transplanted, with ≥3 years waiting time within the AM program. For inclusion, the ETRL will contact the centers with the patients that have the longest AM waiting time first, regardless of country. A total of five patients will be evaluated per round.

Fax number ETRL will be discontinued

Because of the General Data Protection Regulation in the EU the ETRL fax number will be discontinued from the 1st of May this year.

- For ordering of control reagents you can contact us via our general e-mail address: etrl@eurotransplant.org.
- For information concerning the AM program you can use the AM program e-mail address: etrl.am@eurotransplant.org.