

## 1. Principles of Kidney TWL matching in OrganMatch

In OrganMatch, recipients listed on the kidney transplant waiting list (TWL) are matched with deceased organ donors using multi-tiered matching algorithms.

There are three parent algorithms, which run separately, in OrganMatch:

- Standard v2
- Interstate Utilisation v2
- ABOi (ABO incompatible) v2

Matching using the above parent algorithms triggers a series of functions.

The new version of the Kidney Matching Algorithm (KAv2) is effective from May 4, 2021.

### 1.1 High-level compatibility check

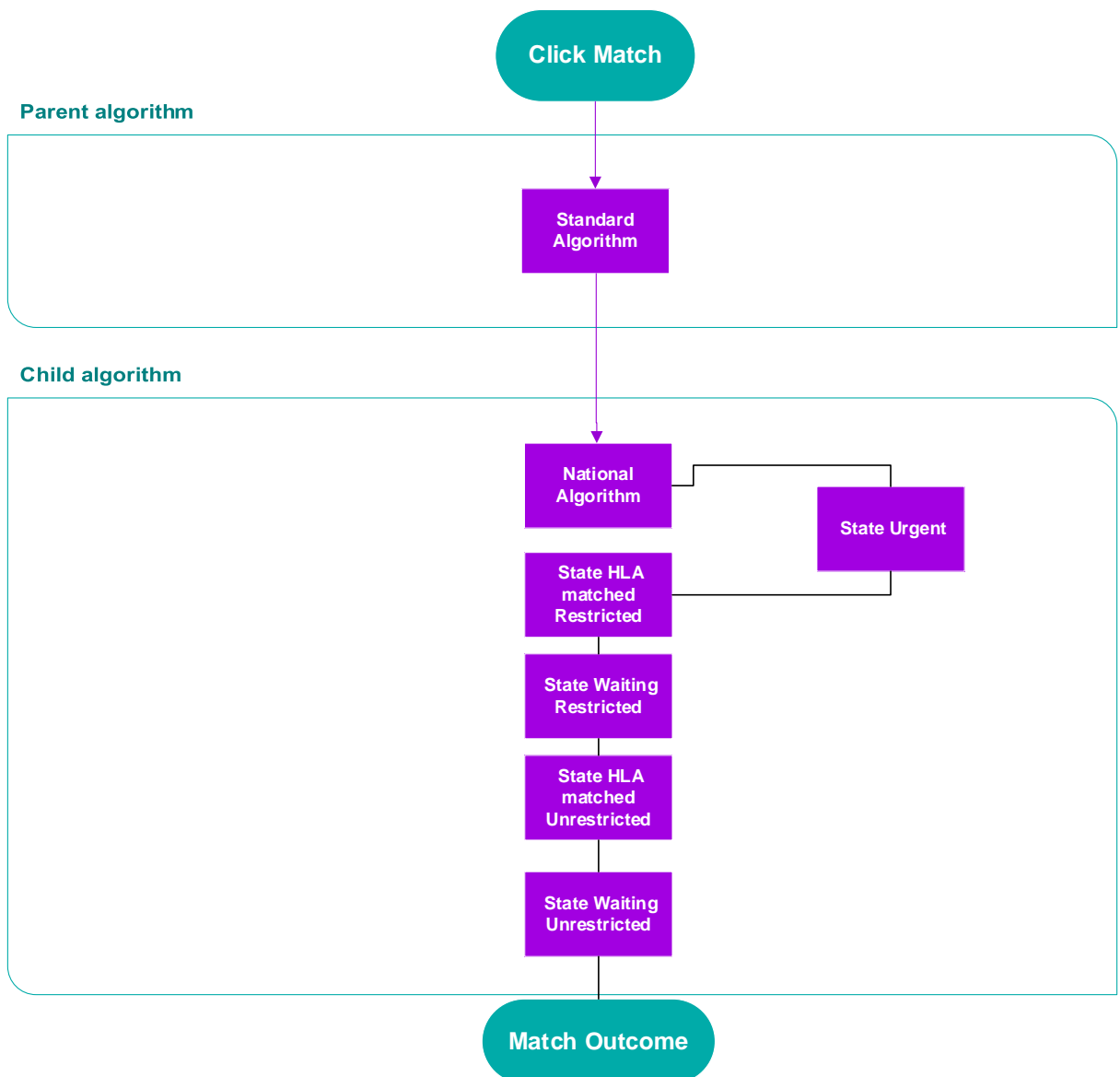
The first step in matching is the high level compatibility check, which determines if recipients will progress to being matched in the next stage of the algorithm.

Check	Process	!	✖	✓
<b>HLA mismatches are identified</b>	Compares <b>only</b> loci A, B, and DRB1. Compares at 1 field and 2 fields using the exception table.	HLA mismatches are listed	N/A	No HLA Mismatches
<b>No Unacceptable Antigens (UA) identified</b>	Compares donor HLA with recipient UA. Includes all HLA loci.	Potential UA for the donor are listed Will proceed to matching	UA and donor HLA match. Does not proceed to matching.	Recipient and donor compatible. Proceeds to matching.
<b>Extended criteria checked</b>	Donor extended criteria is checked first and Recipient Extended Acceptance Criteria are compared. If there is no extended criteria for the donor, proceed to matching.	N/A	Does not proceed to matching.	Proceeds to matching.
<b>Valid ABO for program</b>	Checks ABO compatibility.	N/A	Does not proceed to matching.	Recipient and donor compatible. Proceeds to matching.

If a recipient passes the high level compatibility check, they progress to matching, depending on which parent algorithm is selected:

## 2. Standard algorithm (KAv2)

The Standard kidney algorithm consists of a number of child algorithms. The child algorithms are executed in a set order and are dependent on the OrganMatch Lab from where the deceased organ donor is matched:



## 2.1 National algorithm

Table 1: Criteria for National Algorithm levels.

Match level	Description	Criteria	Base score
1	Very Highly sensitised  ABO Compatible	<b>1a</b> mPRA $\geq$ 99.7	99 700 000
		<b>1b</b> mPRA $\geq$ 99	99 000 000
		<b>1c</b> mPRA $\geq$ 98	98 000 000
		<b>1d</b> mPRA $\geq$ 97	97 000 000
		<b>1e</b> mPRA $\geq$ 96	96 000 000
		<b>1f</b> mPRA $\geq$ 95	95 000 000
National Urgent	ABO Compatible	Recipient National urgency >0	90 000 000
2	EPTS restriction  HLA matching Prioritises Low EPTS recipients Matched at HLA DRB1  ABO Matched KDPI max value is applied from this level down	<b>2a</b> 0 mismatches HLA-A or HLA-B and EPTS $\leq$ 25	89 000 000
		<b>2b</b> 1 mismatch HLA-A or HLA-B and EPTS $\leq$ 25	88 000 000
		<b>2c</b> 2 mismatch HLA -A or HLA-B and EPTS $\leq$ 25	87 000 000
		<b>2d</b> 0 mismatches HLA -A or HLA-B and EPTS $\leq$ 60	86 000 000

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Match level	Description	Criteria	Base score
3	a/b/c HLA matching Highly Sensitised	3a 0 mismatch at HLA A or HLA B or HLA DRB1 and mPRA>80	79 000 000
		3b 1 mismatch at HLA A or HLA B or HLA DRB1 and mPRA > 80	78 000 000
	d/e/f/g HLA Matching Centre credit difference	3c 2 mismatches at HLA A or HLA B or HLA DRB1 And mPRA >80	77 000 000
		3d Matched at HLA DRB1 1 mismatch HLA A or HLA B And mPRA<= 80 And Centre credit difference <=-3	76 000 000
		3e Matched at HLA DRB1 2 mismatch HLA A or HLA B And mPRA<= 80 Centre credit difference <=-6	75 000 000
		3f mPRA > 80 Centre credit difference <=-9	74 000 000
		3g Centre credit difference <-20	73 000 000

Table 1: Criteria for national algorithm levels

See Definitions for more information on centre credit difference

## 2.2 Calculation of kidney national algorithm score

The National Score is calculated by assigning a base score – depending on the number of HLA mismatches, Match cPRA (mpa), the patient's National Urgency Index and the centre credit difference between the donor and recipient centres (see *Table 1*) – and then add the following bonus points:

Other parameters	Bonus points added
Paediatric	250 000
Donor centre = patient centre	50
Recipient Centre credit	1000 + recipient centre credit
Recipient and Donor are HLA DRB1 homozygote	500 000 ( except level 3G)
Waiting time (on dialysis)	Number of months x 1

The lowest threshold is 73,000,000. Recipients with a score less than 73,000,000 then progress to the **state algorithms**.

See Definitions for more information on lab credit.

## 3. State algorithms

### 3.1 Calculation of state HLA algorithm scores

The base score is calculated for each recipient if:

- their ABO type is compatible with donor as determined by the ABO Type Selection Rules
- they are from the same state centre as the donor.

### 3.2 State Kidney Algorithm

EPTS-KDPI restriction occurs when  $EPTS-KDPI \leq 50$ . The intent of this parameter is to enable low KDPI donor kidney to be prioritised to low EPTS recipients.

If all patients on the transplant waiting list are categorised in the “restricted group ie:  $EPTS-KDPI < 50$ , only the restricted algorithm will appear in the TWL match.

An example would be a high KDPI donor eg;  $KDPI = 80$ , and as the max EPTS is 100, all recipients would fall into the “restricted category” as  $EPTS-KDPI \leq 50$  applies. There would be no patients outside of this category.

For a lower KDPI donor eg;  $KDPI = 20$ , only the patients with  $EPTS < 70$  will fall into the restricted group to meet the restricted criteria. So this group of patients will be prioritised. The remaining patients with  $EPTS > 70$  will be in unrestricted category and they will appear under (lower rank) the restricted patients in the TWL matching.

So you only expect both the restricted and unrestricted lists to appear with the lower KDPI donors , as the restricted list will appear above the unrestricted list

Flexibility for state to nominate at which level to move from state HLA to State waiting. The current state thresholds are

- NSW 1E
- QLD 1E
- VIC 1E
- WA 1E
- SA 1E

ABO rules are aligned for NSW, VIC, SA, WA, QLD. QLD have an additional requirement of B donors to match O recipients.

KDPI max functionality also applies as determined by local clinical units.

The state matching algorithm sequentially flows as follows

- State HLA restricted
- State waiting restricted
- State HLA unrestricted
- State waiting unrestricted

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Table 2: Criteria for state algorithm levels

Level	Description	Details	Base Score
State Urgent	State Urgency Index >0	Urgency index added to base score	60 000 000

Level	Description	Details	Restricted base score	Unrestricted base score
State HLA	HLA mismatches A/B/DRB1	<b>1a</b> 0 0 0	49 000 000	39 000 000
		<b>1b</b> 1 0 0 or 0 1 0	48 000 000	38 000 000
		<b>1c</b> 1 1 0	47 000 000	37 000 000
		<b>1d</b> 0 0 1	46 000 000	36 000 000
		<b>1e</b> 2 0 0 or 0 2 0	45 000 000	35 000 000
		<b>1f</b> 1 0 1 or 0 1 1	44 000 000	34 000 000
		<b>1g</b> 2 1 0 or 1 2 0	43 000 000	33 000 000
State Waiting	Months on dialysis	Number of months x 1	40 000 000	30 000 000

#### Additional scores

- Paediatric bonus of 100 000 for restricted algorithms – state HLA and state waiting
- Recipient and donor are HLA DRB1 homozygous bonus 500 000 to state HLA matching algorithms only.

In the event that a more than one patient has the same score , the ranking is randomised .

#### 4. Interstate Utilisation algorithm

- The Interstate Utilisation Algorithm is an additional algorithm, which is invoked by the OrganMatch user if the standard algorithm did not list enough patients to enable transplantation.
- The score is calculated by assigning a base score and bonus points, by applying the criteria described in *Table 3: Interstate Utilisation Algorithm*.
- Interstate utilisation considers all states other than the donor state , base scoring as described in *Table 3: Interstate Utilisation Algorithm*
- In the event that a patient from a OM lab which is different to the donor OM lab is matched via the national algorithm, there will be a duplication of this patient on the Interstate utilisation list.

Table 3: Interstate Utilisation Algorithm

Level	Description	Details	Restricted base score	Unrestricted base score
State HLA	HLA mismatches A/B/DRB1	<b>1a</b> 0 0 0	19 000 000	9 000 000
		<b>1b</b> 1 0 0 or 0 1 0	18 000 000	8 000 000
		<b>1c</b> 1 1 0	17 000 000	7 000 000
		<b>1d</b> 0 0 1	16 000 000	6 000 000
		<b>1e</b> 2 0 0 or 0 2 0	15 000 000	5 000 000
		<b>1f</b> 1 0 1 or 0 1 1	14 000 000	4 000 000
		<b>1g</b> 2 1 0 or 1 2 0	13 000 000	3 000 000
State Waiting	Months on dialysis	Number of months x 1	10 000 000	0



## 5. Other matching algorithms

### 5.1 ABOi

- ABOi matching algorithm can only be used to match blood group AB donors with blood group A and B recipients that are registered on the TWL kidney program, and willing to accept an ABOi donor.
- The score is calculated in the same manner as the state algorithm; by assigning a base score and bonus points using the criteria described in *Table 2*

### 5.2 Increased Viral Risk Donors (IVRD)

- Donors that are registered as IVRD in OrganMatch will be matched using the standard algorithm, but with patients only registered as willing to accept IVRD donors.

### 5.3 Hepatitis C ( Hep C)

- Donors that are registered as Hep C in OrganMatch will be matched using the standard algorithm, but with patients only registered as willing to accept Hep C donors.

## 6. ABO selection rules

The ABO selection rules determine the acceptable organ matches, as shown:

Algorithm	Level	Donor ABO type	Patient ABO type
National	Level 1	A	A
		A	AB
		B	B
		B	AB
		AB	AB
		O	O
		O	A
		O	B
		O	AB
National		A	A

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Algorithm	Level	Donor ABO type	Patient ABO type
	Level 2 and Level 3	B	B
		AB	AB
		O	O
State	NSW WA VIC SA	A	A
		A	AB
		B	B
		B	AB
		AB	AB
		O	O
State	QLD	A	A
		A	AB
		B	B
		B	AB
		AB	AB
		O	O
		O	B

## 7. Use of KDPI min max

Currently the default setting for all recipients in OrganMatch – Kidney TWL program, the min-max KDPI is set at 1 -100. The max value can be set by the clinical unit, which will restrict the recipient being matched at the national level (level 2 and Level 3) and also the state level.

## Abbreviations

Abbreviation	Definition
ABOi	ABO incompatible
EPTS	Estimated Post transplant survival
HEP C	Hepatitis C
HLA	Human Leucocyte Antigen
IVRD	Increased viral risk donor
KAv2	Kidney Matching Algorithms version 2
KDPI	Kidney Donor Prognosis Index
OM	OrganMatch
TWL	Transplant waiting list

## Definitions

Term	Definition
Centre	OrganMatch Lab
OM lab Credit	<p><b>OM Lab credit = total number of kidneys donated – total number of kidneys received</b></p> <p><b>This information can be found in OrganMatch by generating the organ exchange report.</b></p> <p><b>Eg : NSW lab credit = 4862- 4868 = -4</b></p> <p><b>QLD lab credit = 3195- 3198 = -3</b></p>

Organ exchange report

OrganMatch

Donor OM Laboratory	Recipient OM Laboratory						Total Organs Exchanged
	NSW	NZ	QLD	SA	VIC	WA	
NSW	3671	0	373	216	477	125	4862
NZ	0	0	0	0	0	0	0
QLD	365	0	2457	80	216	47	3195
SA	216	0	119	1400	138	41	1912
VIC	440	0	198	176	3670	84	4568
WA	145	0	51	41	89	939	1245
Total Organs Exchanged	4868	0	3198	1913	4568	1236	15783

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Term	Definition
<b>Centre Credit difference</b>	Donor state lab credit –recipient OM lab centre credit <b>Eg : If NSW donor and QLD recipient the centre credit difference</b> <b>= -4- -3 = -1</b>

### Referenced external documents

N/A

### Referenced OrganMatch documents

N/A

### Change history

Version number	Effective date	Summary of change
1	04/05/2021	First version
2	26/05/2021	Reformatting to align with OM documents
3	Refer to footer	Change to QLD state matching algorithm threshold. Change from 1F to 1E

### Electronic signature

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