

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.30 – 17 February 2021

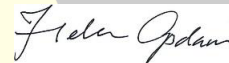
- Transplantation update in Australia:
 - Nationally, the total number of COVID-19 cases since February 2020 is 28,900.
 - There are 14 COVID-19 patients in hospital with there being no patients in ICU.
 - ANZDATA has reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 34 (26 recoveries): 21 kidney transplant patients (19 recoveries and 2 deaths) and 13 dialysis patients (6 recoveries and 7 deaths).
 - There are no issues with ICU capacity.
- Research and vaccination:
 - Further research is endorsed to be undertaken on the vaccination antibody responses performed in immunocompromised patients.
 - The AstraZenica vaccine has been approved by the Therapeutics Goods Administration.
 - Pfizer vaccine has been approved for those over the age of 18.
 - Information regarding which vaccination will be administered and when is not yet confirmed but logistics are being put in place for the rollout of the vaccination in Australia.
 - Transplant Australia are holding a COVID Vaccine webinar for transplant recipients on Wednesday 17th February 2021 (7.30pm AEDT), with Prof Toby Coates facilitating the discussions and Prof Steve Chadban and Dr Peter Boan as guest speakers. You can register on the Transplant Australia [website](#). The webinar aims to assist with any questions that patients may have around COVID vaccination.
- Data:
 - Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 2 new cases in the last 24 hours, with 1 of those being overseas acquired and 1 locally acquired, both in Victoria. In the last week, there have been 41 new cases reported with 28 overseas acquired and 13 locally acquired.
 - Globally, cases have continued to decline. There have been 2.65 million new cases reports in the past week. Weekly case numbers are increasing in Czech Republic, Iran and Iraq. The US reported 64,938 new cases in 24 hours and the UK reported 10,991.
 - Countries with the highest reported vaccination rates include: Israel – 45.1% (29.3% fully vaccinated); UK – 22.2% (0.8%); Bahrain – 14.6% (-); Serbia – 11.5% (2.5%); US – 11.5% (2.5%); Chile – 9.7% (0.3%); UAE – 8.5% (2.5%); and Malta – 7.8% (3.5%).



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



A/Professor Helen Opdam
Organ and Tissue Authority

Update Provided 3rd February 2021

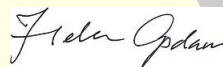
COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.29 – 3 February 2021

- Transplantation update in Australia:
 - Nationally, the total number of COVID-19 cases since February 2020 is 28,818.
 - There are 10 COVID-19 patients in hospital with there being no patients in ICU.

- ANZDATA has reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
- There are no issues with ICU capacity.
- COVID-19 Strains:
 - COVID variants and vaccine responses remain an extremely active area of ongoing research.
- Vaccination Strategy:
 - A consistent communication approach for concerned patients, such as the following, is recommended;
 - Immunisation is a positive thing
 - This Taskforce is supportive of immunisation
 - The allocation of immunisation for organ recipients sits just after frontline health workers (priority 1b), and
 - Which vaccination will be administered and when it will be administered is not yet confirmed, but it will be soon. Speak to your transplant Doctor.
 - Transplant Australia are holding a COVID Vaccine webinar for transplant recipients in February, with Prof Toby Coates as Chair and Prof Steve Chadban and Dr Peter Boan as guest speakers. Further details will be circulated by TA, TNA and TSANZ, shortly. Everyone is encouraged to inform their patients of this webinar to assist with any questions around COVID vaccination.
 - The Australian Government has put in place production and supply agreements for COVID-19 vaccines. This includes:
 - 10 million doses of the Pfizer/BioNTech vaccine;
 - 53 million doses of the University of Oxford/AstraZeneca vaccine;
 - 51 million doses of the Novavax vaccine
- Data:
 - Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 8 new cases in the last 24 hours, with 7 of those being overseas acquired in returned travellers in hotel quarantine, 1 locally acquired in WA.
 - Globally, there have been 3.75 million new cases reports in the past week, which is down from the peak of almost 5.2 million cases reported in the week preceding the 11th of January. Weekly case numbers are increasing in Indonesia, Iran, Malaysia, Peru, Portugal, Thailand and Vietnam.
 - In regards to global vaccination rates, Israel has had 35 per cent vaccinated, with 20 per cent receiving two doses, compared with the UK at 13 per cent, US 7 per cent with other countries at 3 per cent of population or lower.



Professor Steve Chadban
Co-Chair of Taskforce




Dr Helen Opdam
Organ and Tissue Authority

Update Provided 14th January 2021

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.28 – 14 January 2021

- Transplantation update in Australia:
 - Nationally, the total number of COVID-19 cases since February 2020 is 28,614.

- There are 40 COVID-19 patients in hospital with 1 patient in ICU being ventilated.
- ANZDATA has reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
- There are no issues with ICU capacity.
- New COVID-19 Strains:
 - There are currently two new, well characterised COVID-19 variants; one that has been derived from the UK (lineage B.1.1.7) and one from South Africa (lineage 501.V2).
 - Public Health UK has reported that the B.1.1.7 variant is more transmissible, based on reproduction and attack rates from immunological studies, but does not appear to be more virulent with complication and mortality rates comparable to the primary strain.
 - This variant is the dominant virus in the UK and is now being seen in other regions of the world.
 - The efficacy of vaccination in protecting against variant strains is pending. Pfizer has reported a study of serum derived from a small number of immunised patients (n=20) and found evidence of anti-viral activity in in vitro plaque inhibition assays. This study looked at only one spike protein mutation. Data is expected from AstraZeneca and Moderna from similar studies.
 - There is less information on the 501.V2 variant but it has been reported that this lineage has become dominant in South Africa. Data is pending on the mutation in the spike protein E484, which could be problematic for vaccination, but nothing has been confirmed.
 - COVID variants and vaccine responses are an extremely active area of ongoing research.
- Vaccination Strategy:
 - The Federal Government is coordinating an implementation strategy that will include the mechanism of delivery of the vaccination – we await details.
 - This group will be advocating to the Federal Government for further consideration for transplant recipients and their families to be included in the first phase of vaccine distribution (priority 1b).
 - There will be a communication strategy in place for patients and practitioners when we have more information on the vaccination implementation strategy.
- Data:
 - Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 20 new cases in the last 24 hours, with 14 of those being overseas acquired in returned travellers in hotel quarantine, 6 locally acquired (5 in NSW part of known clusters).
 - Globally, there were 5 million cases reported in the last week. The US has passed 22 million cases since February 2020. Weekly case numbers are high and increasing in the UK, Israel, Sweden, Switzerland, Portugal, Ireland, and Japan.
 - Newly published data has demonstrated excellent short-term efficacy of the mRNA-1273 (Moderna) in a multicentre US study (Baden LR, et al, NEJM Dec 30, 2020).



Professor Toby Coates
Co-Chair of Taskforce




Professor Steve Chadban
Co-Chair of Taskforce

Update Provided 23rd December 2020

**COVID-19 - National Transplantation and Donation Rapid Response
Taskforce Communique No.27 – 23 December 2020**

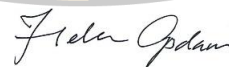
- Transplantation update in Australia:
 - Nationally, the total number of COVID-19 cases since February 2020 is 28,219.
 - There are 22 COVID-19 patients in hospital with no patients being in ICU.
 - ANZDATA has reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
 - There are no issues with ICU capacity.
 - The main challenges units are facing are logistical, including commercial flight availability/cancellations, border issues and cargo limitations. OTA are consulting with Virgin to attempt to resolve the cargo limitation issue.
 - Other challenges include moving patients' family's interstate. Patients are able to be transferred but family members have to quarantine for 14 days.
 - To assist with logistical issues and interstate transfers, the [attached](#) copy of contacts for each jurisdiction is provided for escalation where urgent. This list was previously provided following consultation with the CMO which also suggested that relevant doctors may wish to liaise directly with the CHO in their jurisdiction and request that the CHO speak to the relevant CHO in the other jurisdiction.
- NSW update:
 - NSW reported 18 newly confirmed cases in the 24 hours to 8pm Dec 21, with 7 of those cases linked to the Northern Beaches cluster, and 15 new cases to 8pm Dec 22, including 8 community transmissions of which 7 are linked to the Northern Beaches cluster. The downward trend is pleasing. The majority of new cases are again within returned travellers in quarantine.
 - Transplantation is continuing but is being monitored closely. Each offer is being assessed on a case-by-case basis with the addition of focusing on any hotspots and swabbing donors and recipients.
 - The main current threat is the potential for COVID-19 spread within hospitals and staff.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 21 new cases in the last 24 hours, with 18 of those being in NSW, 10 overseas acquired in returned travellers in hotel quarantine, 7 locally acquired (known cluster) and 1 case locally acquired and under investigation. Internationally, the US reported 190,519 new cases. Weekly case numbers are high and increasing in the UK, Russia, Germany, Colombia, the Netherlands, Spain, South Africa, Sweden, Indonesia and the Czech Republic.
- The Communicable Diseases Network Australia (CDNA) National Guidelines for Public Health Units (COVID-19 SoNG) v4.0 has just been published. This revised version includes updates to Appendix C: Organ Donation and Transplantation (pg 54) with specific reference to the [OTA, DonateLife and TSANZ - Coronavirus \(SARS-CoV-2\) causing COVID-19: Information for donation and transplant professionals](#) which is now available on the [TSANZ website](#).



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce

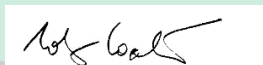


Dr Helen Opdam
Organ and Tissue Authority

Update Provided 16th December 2020

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.26 – 16 December 2020

- **Transplantation update in Australia:**
 - Nationally, the total number of COVID-19 cases since February 2020 is 28,048.
 - There are 28 COVID-19 patients in hospital with one patient being in ICU.
 - ANZDATA has reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
 - There are no issues with ICU capacity.
 - Donation and transplantation teams are continuing to work hard managing logistical issues, especially as there are still limited commercial flights available.
 - ARCBS Lab has no issues. Victoria is continuing to run split shifts until early next year.
 - Victoria has reported access issues continuing with the majority of clinics being via telehealth. There are issues with bed availability in hospitals with one of the main causes being late presentations.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 9 new cases in the last 24 hours, with 8 of those being overseas acquired in returned travellers in hotel quarantine and 1 case being acquired locally via hotel quarantine. Internationally, the US reported 193,454 new cases. Weekly case numbers are high and increasing in the US, Brazil, Germany, the UK, the Netherlands, South Africa, Sweden, and the Czech Republic.
- **Vaccination Policy:** The working group wrote to the Co-Chairs of the Australian Technical Advisory Group on Immunisation (ATAGI) and notified the Commonwealth Government of their recommendations for a vaccine strategy designed to protect Australian organ recipients and those on dialysis who are at increased risk from COVID-19 disease to be incorporated in the delivery of Australia's COVID-19 Vaccine and Treatment Strategy. These recommendations have been received.
- **Communication Strategy:** This working group is looking at a communication strategy and App that is portable and feasible to assist communications between patients and clinicians during a pandemic. The requirement of an App has been driven by the need for rapid information to be distributed to patients and to have the ability to change the updates constantly. The current process is to contact patients via email. The group is being supported by Astellas who have had an App developed that has the basis of what we need. The working group as well as other stakeholders are being involved in the concept and development phase. The group is speaking with the App developer to discuss the feasibility of accommodating our specific requirements. The group will be meeting again early next year.

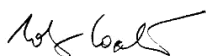


Professor Toby Coates
Co-Chair of Taskforce

UPDATE PROVIDED – 26th November 2020

UPDATED: COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.25 – 25 November 2020

- Transplantation update in Australia:
 - Nationally, the total number of COVID-19 cases since February 2020 are 27,843.
 - There are 21 COVID-19 patients in hospital no patients being in ICU.
 - ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
 - There are no issues with ICU capacity.
 - ARCBS Lab have no issues.
 - There continues to be an impact on the number of donors which fluctuates for a number of reasons including local outbreaks and careful selection of donors and recipients for transplant.
 - Victoria have reported challenges in activating patients on the wait list following the period of reduced transplant activity
- Research/Trials: There are reports from Oxford suggesting that AstraZeneca has 60-90% efficacy, depending on doses and it doesn't require storage at -70°, which would be an advantage for delivery and storage purposes in Australia and developing countries. Both Pfizer and Moderna are reporting 90% efficacy. The U.S FDA have authorised emergency use of regeneron. There is US research that looked at patients 6-months post-infection that had memory b cells persistent and increasing compared to a month after infection.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 13 new cases in the last 24 hours, with 12 of those being overseas acquired and 1 being locally acquired in South Australia. Global cases passed 4 million in the past week. Internationally, the US has reported 169,190 new cases with Russia (24,891), Canada (6,795) and Turkey (6,713) recording daily record case numbers (in brackets). Numbers are high and increasing in the US, Ukraine, Serbia, Indonesia and Sweden also.
- Testing: Some units have changed the requirement of pre-operative testing of patients. With the virus not being eliminated, it is too early and too hi-risk to stop donor testing with the testing of recipients to be discretionary.
- Vaccination Policy: Prof Steve Chadban and Prof Toby Coates have led a group of experts to develop a proposed future strategy for the protection of Australians with organ failure or functioning transplants from COVID-19 through vaccination. These patients are at high risk of acquiring COVID-19 from close contact with an infected person, particularly family members. The TSANZ would like to thank the ANZSN, Kidney Health Australia and Transplant Australia for their input and support for the proposed recommendations. The group will be writing to the Australian Technical Advisory Group on Immunisation (ATAGI) and notifying the Commonwealth Government of their recommendations.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce




Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 11th November 2020

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.24 – 11 November 2020

- Transplantation update in Australia:

- Nationally, there are 27,669 COVID-19 cases.
- There are 20 COVID-19 patients in hospital with 1 patient in ICU.
- ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (25 recoveries): 20 kidney transplant patients (19 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
- There are no issues with ICU capacity.
- ARCBS Lab workloads are returning to normal, with staff in both Melbourne and Sydney continuing to run split shifts.
- Victoria:
 - There have been no new COVID-19 cases recorded in Victoria for 12 days.
 - The main challenges Victorian units continue to face include; access to hospitals (although restrictions have been slightly relaxed for paediatric patients with siblings being able to visit); face-to-face clinics are difficult due to social distancing requirements (limiting the number of people that are allowed to enter clinic); and issues with getting people on the waitlist (due to not being able to be assessed face-to-face).
 - Previous border issues, for example, accessing SA from VIC and patients and family needing to quarantine have been rectified.
- Research/Trials: There are no peer-reviewed, phase 3 trials as yet. The immunogenicity/efficacy of the new range of vaccines in the moderate to severely immune suppressed is unknown and no trials are underway yet.
- COVID-19 vaccines: A presentation to the group by Dr Christopher Blyth and advice and discussions led by both Dr Blyth and Professor Tony Cunningham on COVID-19 vaccinations provided excellent insights and clarified our thinking on how best to proceed in order to protect our transplant recipients from COVID. Following these discussions, the TSANZ will be developing a position statement on a Vaccination strategy for moderate and severely immunosuppressed patients that will be circulated to relevant bodies for input. This will include an approach to Government and a research strategy.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 10 new cases in that last 24 hours, which were all overseas acquired in returned travellers in hotel quarantine. Global cases passed 4 million in the past week. Internationally, the US has reported 111,433 new cases and France has recorded 60,000 in the past 48 hours. Weekly case numbers are increasing in the US, Italy, Poland, Russia (21,577), Ukraine, Iran (10,463), Austria, Portugal, Morocco, Hungary, Canada, Bulgaria, Sweden, Turkey, Georgia (2,927), Croatia, Greece and Serbia. New daily high case numbers are reported in brackets.



Professor Steve Chadban

Co-Chair of Taskforce on behalf of Co-Chair's Dr Helen Opdam and Professor Toby Coates

UPDATE PROVIDED – 21st October 2020

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.23 – 21 October 2020

- Transplantation update in Australia:


- Nationally, there are 27,430 COVID-19 cases.
- There are 18 COVID-19 patients in hospital with 1 patient in ICU (not ventilated).
- ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (19 recoveries): 20 kidney transplant patients (2 active cases, 17 recoveries and 1 death) and 13 dialysis patients (6 recoveries and 7 deaths).
- There are no issues with ICU capacity.
- ARCBS Lab staff in Melbourne are continuing to run split shifts, with Sydney returning to regular shifts, all other labs are business as usual.
- Units are facing challenges with telehealth being the main form of communication with patients, which is suboptimal for some recipients and has provided a barrier to transplant waitlisting in some jurisdictions.
- Victoria:
 - COVID-19 cases in Victoria – in the past 24 hours, there has been 1 newly confirmed case that was locally acquired.
 - Transplantation and surgery assessments returning to normal.
 - The main challenges Victorian units continue to face are, interstate patients having to quarantine in hotel rooms, with limited space and no visitors which is impacting patients and their families as well as the lack of face-to-face clinics with the majority being telehealth.
- Research/Trials: The WHO launched the Solidarity trial with more than 11,000 patients enrolled. The interim results published on the 15th October 2020 found that all 4 treatments evaluated (remdesivir, hydroxychloroquine, lopinavir/ritonavir and interferon) had little or no effect on overall mortality, initiation of ventilation and duration of hospital stay in hospitalized patients. This was not peer reviewed.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 30 new cases with 24 of the new cases being in WA (overseas acquired), 5 in NSW and 1 being in Victoria. Global cases passed 40 million and cases reported in the last week exceeded 2.5 million. Internationally, in the past 2 days, the US recorded 58,387 new cases and Brazil recorded 26,365. New daily high case numbers have been recorded in Russia (15,483), Germany (8,397) and Armenia (1,694). Weekly case numbers are increasing in Europe, South and North America, and the Middle East.
- Consensus statement: The group will be developing a consensus statement related to timeframes from when a patient that has fully recovered from COVID-19 and is well, can resume on the transplant waitlist.
- Working Groups: With the assistance of the Taskforce, two working groups will be created to (1) consider COVID vaccination information, strategies and trials relevant to transplantation; (2) explore APP-based communication strategies to assist with streamlining patient/Doctor communications.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 23rd September 2020

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No. 22 – 23 September 2020

- Transplantation update in Australia:

- Nationally, there are 1,933 active COVID-19 cases.
- There are 100 COVID-19 patients in hospital with 11 patients in ICU, with 7 being ventilated.
- ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 33 (19 recoveries): 20 kidney transplant patients (4 active cases, 15 recoveries and 1 death) and 13 dialysis patients (2 active cases, 4 recoveries and 7 deaths). Four liver and one lung/kidney transplant recipients are all recovering.
- There are currently no issues with ICU capacity.
- The South Australian borders are opening to NSW, assuming no further community cases as at midnight 23/9/20. Queensland borders due to open (1/10/20) which will allow patients from northern NSW to return to receiving treatment from their Brisbane transplant unit.
- ARCBS Lab staff in Melbourne are continuing to run split shifts, with Sydney returning to regular shifts, all other labs are business as usual.
- Sparse commercial flight availability continues to pose problems for inter-state retrievals.
- Victoria:
 - COVID-19 cases in Victoria – in the past 24 hours, there have been 28 newly confirmed cases, with 8 patients in ICU, with 6 of those ventilated.
 - There has been a decrease in COVID-19 patients in hospitals and ICUs.
 - Donor numbers are fluctuating, transplantation services are fully operational (noting the Health Minister's instruction that donation and transplantation surgery are to be prioritised).
 - The main challenges Victorian units continue to face are logistical, including commercial flight availability, border issues (in particular accessing SA from VIC), interstate patients needing to return home and lack of access for family visitation for patients in ICU.
- Research/Trials: A report on a large cohort of kidney transplant recipients (approx. 1500) from New York is being reviewed and is likely to be published in December 2020. The report will provide data on the propensity for kidney recipients with a PCR+ COVID-19 infection to mount an IgG response, and also what proportion of asymptomatic recipients became COVID-IgG(+) following the first wave of infection in New York. Case reports of transplant patient recovery from COVID19 are emerging.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 33 new cases and 3 deaths with 28 of the new cases being in Victoria, 2 being in NSW and 3 in WA. Internationally, in the past 24 hours, India reported 75,083 new cases, the US 52,070 and Brazil 13,411. Record new cases were reported for Indonesia (4,176) and the Netherlands (2,274). Weekly case numbers continue to increase in Spain, France, Russia, UK, Ukraine, Iran, Czech Republic, Turkey, Germany, Italy, Romania, Belgium and Canada.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No. 21 – 9 September 2020

- Transplantation update in Australia:
 - Nationally, there are 3,001 active COVID-19 cases.
 - There are 264 COVID-19 patients in hospital with 26 patients in ICU, with 16 being ventilated.
 - ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipients; 29 (16 recoveries): 19 kidney transplant patients (4 active cases, 14 recoveries and 1 death) and 10 dialysis patients (2 active cases, 2 recoveries and 6 deaths). Four liver transplant recipients have been infected but are now all recovering. One lung/kidney transplant recipient has tested positive with mild symptoms only.
 - There are currently no issues with ICU capacity.
 - Transplantation comparisons between this year and last: Kidney down by 27%; Liver down by 8%; Lung down by 12%, Pancreas increased by 32% with Heart transplantation increased by 26%.
 - ARCBS Lab staff in Melbourne and Sydney are continuing to run split shifts, business as usual.
 - Interstate retrievals are occurring despite ongoing logistical issues.
- Victoria:
 - COVID-19 cases in Victoria – in the past 24 hours, there have been 55 newly confirmed cases, with 20 patients in ICU, with 12 of those ventilated.
 - There has been a decrease in COVID-19 patients in hospitals and ICUs.
 - Centres are continuing transplantation services and assessing risks on a day-to-day basis.
 - The main challenges for Victorian units currently include: staff being furloughed; commercial flight availability; and the availability of single rooms for post-op care in some hospitals.
- Transplantation update for New Zealand:
 - Transplantation is continuing as normal in NZ.
 - In addition to cases arriving in NZ at the border, there have been low levels of community spread of COVID-19, largely in the Auckland region.
 - Currently there are 123 active cases in New Zealand.
 - There are 4 people in hospital with COVID-19 of whom 2 are in ICU.
- Research/Trials: there have been no significant developments with research or trials. Subsequent to the meeting, news that the Phase 3 Oxford vaccine trial has been suspended pending a safety review was received.
- Media: Various publications have been reporting on transplantation in the context of COVID-19, with primary focus on the challenges faced by patients and the health care systems, with the majority of the articles being positive.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 66 new cases and 8 deaths with 55 of the new cases being in Victoria, 9 being in NSW, 1 in WA and 1 in QLD. Internationally, in the past 24 hours, India reported 75,809 new cases, the US 24,257 and Brazil 10,273. Weekly case numbers continue to increase in India, Spain, France (who reported 19,906 cases across the past 3 days), Indonesia, the Ukraine, Israel (who reported a new high of 3,331 cases) and the UK (who reported 2,951 new cases).



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No. 20 – 26 August 2020

- **Transplantation update in Australia:**
 - Nationally, there are 4,927 active COVID-19 cases.
 - There are 644 COVID-19 patients in hospital with 42 patients in ICU, with 23 being ventilated.
 - ANZDATA have reported the following COVID-19 cases among dialysis patients and kidney transplant recipient's population; 28 (11 recoveries): 18 kidney transplant patients (8 active cases, 9 recoveries and 1 death) and 10 dialysis patients (3 active cases, 2 recoveries and 5 deaths). Three liver transplant recipients have been infected but are now all recovering. One lung/kidney transplant recipient has tested positive.
 - There are currently no issues with ICU capacity.
 - Intended donation is down 40% and recipients down by 19% compared to this time last year. Transplantation comparisons between this year and last year: Kidney down by 30%; Liver down by 12%; Lung down by 16%, Pancreas increased by 29% with Heart transplantation increased by 26%.
 - Labs are progressing with business as usual. There have been some issues with transport logistics from Tasmania with flight times and routes not being reliable.
 - Since Queensland's border closure, an agreement has been brokered with a Sydney Unit to perform kidney transplants when offered and accepted. Transplantation will be undertaken in either Queensland or NSW depending on logistics, as such, no patients will be disadvantaged nor denied access to transplantation.
- **Victoria:**
 - COVID-19 cases in Victoria – in the past 24 hours, there have been 148 newly confirmed cases, with 35 patients in ICU, with 19 of those ventilated.
 - ICU's are not being overwhelmed.
 - Centres are continuing transplantation services and assessing risks on a day-to-day basis.
 - The main challenges that Victorian units are still facing include; commercial flight availability; border issues that are also affecting face-to-face assessments
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
- **Research/Trials:** Convalescent plasma has been introduced to ASCOT and REMAP-CAP clinical trials (excluding immunocompromised people). Vaccination development has not provided any further data and availability timeframes are still unclear. There is evidence that singing increases the spread of respiratory droplets, thus increasing the risk of spreading coronavirus among a crowd.
- **Media:** *The Northern Star* published a story on Northern NSW residents waiting for an organ transplant and not being able to travel to Queensland hospitals due to border controls and having to be transferred to Sydney. Queensland Health and TSANZ provided a response noting that no one would be denied transplantation.

Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 151 new cases and 8 deaths with 148 of the new cases being in Victoria and 3 being in NSW. Internationally, India reported 60,975 new cases, the US 38,045 and Brazil 17,078. With numbers also trending upwards in India, Argentina, Spain, Ukraine, Ethiopia and Turkey.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communiqué No.19 – 12 August 2020

- **Transplantation update in Australia:**
 - Nationally, there are 9238 active COVID-19 cases.
 - There are 673 COVID-19 patients in hospital with 52 patients in ICU, with 32 being ventilated.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population is 23 (10 recoveries): 14 kidney transplant patients (4 active cases, 9 recoveries and 1 death) and 9 dialysis patients (2 active cases, 2 recoveries and 5 deaths). One liver transplant recipient has been infected but is now recovering.
 - There are currently no issues with ICU capacity.
 - Donation is down 19% and recipients down by 17% compared to this time last year. Transplantation comparisons between this year and last year: Kidney down by 29%; Liver down by 9%; Lung down by 14%, Pancreas increased by 23% with Heart transplantation increased by 38%.
 - Labs are progressing with business as usual.
 - To assist with states allowing retrieval teams entry, rapid tests could be done with results returned before the flight departs.
- **Victoria:**
 - COVID-19 cases in Victoria – in the past 24 hours, there have been 331 newly confirmed cases and 19 deaths, with 44 patients in ICU, with 25 of those ventilated.
 - ICU's are not being overwhelmed at this stage.
 - All centres are cautiously continuing with transplantation services whilst assessing their risk on a day-to-day basis.
 - Some of the challenges that Victorian units continue to face are; logistical issues such as; commercial flight availability; border issues, including surgical teams being denied entry for retrieval and patients needing to return home; and staff being furloughed.
 - Early medical suitability conversations and strong communication is very important, especially for small donors.
- **Research/Trials:** Vaccination development has not provided any further data and availability is still unclear. Not much has changed in relation to planned trials.
- **Media:** *The Australian* published an interview with Greg Snell and Toby Coates on Thursday last week in relation to fears growing of a lung transplant surge. Channel 10 have shown interest in interviewing Steve Chadban for a story about the impact COVID-19 has had on transplants.

Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 353 new cases with 331 of the new cases being in Victoria, with NSW recording 22 new cases. Internationally, there were record case numbers reported in the Philippines and Iraq. With numbers also trending upwards in Argentina, Spain, Indonesia, France, Germany and Ukraine. There are positive reports from overseas that people who have recovered from COVID-19 have had successful transplant outcomes.



Professor Toby Coates

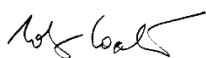
Co-Chair of Taskforce on behalf of Professor Steve Chadban and Dr Helen Opdam.

UPDATE PROVIDED – 5th August 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.18 – 5 August 2020

- **Transplantation update in Australia:**
 - Nationally, there are 7875 active COVID-19 cases.
 - There are 483 COVID-19 patients in hospital with 46 patients in ICU, with 34 being ventilated.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population is 21 (10 recoveries): 13 kidney transplant patients (5 active cases and 8 recoveries) and 8 dialysis patients (3 active cases, 2 recoveries and 3 deaths). One liver transplant recipient has been infected but is now recovering.
 - There are currently no issues with ICU capacity.
 - Donation is down 20% compared to this time last year. Transplantation comparisons between this year and last year: Kidney down by 32%; Liver down by 10%; Lung down by 20%, Pancreas increased by 18% with Heart transplantation increased by 36%.
 - The Paediatric Transplant Advisory Committee have updated the information provided in regards to transplant patients returning to school following an increase in community outbreaks and is available [here](#).
- **Victoria:**
 - COVID-19 cases in Victoria – in the past 24 hours, there have been 439 newly confirmed cases and 11 deaths. ICU's are not being overwhelmed at this stage.
 - All centres are cautiously continuing with transplantation services whilst assessing their risk on a day-to-day basis.
 - Some of the challenges that Victorian units are facing are; face-to-face pre-transplant assessments being an issue as well as other logistical issues such as commercial flight availability.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - All COVID cases in NZ are intercepted at the border currently. There has been no community transmission since late May.
 - New Zealand have 22 active COVID-19 cases.
- **Research/Trials:** The ASCOT trial is adding convalescent plasma to its trial after receiving ethics and governance approval. Vaccine research is an extremely active area; however, data remains preliminary and much needs to be done before a vaccine becomes available for clinical usage. There has been re-recruitment for the BRACE trial that will test if the Bacille Calmette-Guérin (BCG) vaccine can protect healthcare workers exposed to SARS-CoV-2 from developing severe symptoms.
- **Media:** Donatelife week (26th July – 2nd August 2020) has reached a broader audience with this year's campaign moving to online. The Australian is interviewing Professor Greg Snell in relation to the possibility of COVID leading to more people needing lung transplants in Australia. Story due in The Australian Thursday 6th August 2020.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 452 new cases with 439 of the new cases being in Victoria, with NSW recording 12 new cases and one case in South Australia. Internationally, rates of new infections appear to be falling in the USA and Brazil, however resurgent activity in Spain is concerning.
- ALL OF THE ABOVE is subject to regular review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 30th July 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.17 – 29 July 2020

- **Transplantation update in Australia:**
 - Nationally, there are 5825 active COVID-19 cases.
 - There are 259 COVID-19 patients in hospital with 45 patients in ICU, with 24 being ventilated.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population is 20 (10 recoveries): 13 kidney transplant patients (5 active cases and 8 recoveries) and 7 dialysis patients (2 active cases, 2 recoveries and 3 deaths).
 - Donation and transplantation is continuing though both donation and transplantation is lower this year as compared to the same period last year.
 - Discussions with local hospital executives regarding the possibility of accepting or declining Victorian offers is recommended.
 - The Paediatric Transplant Advisory Committee are updating the information provided in regards to transplant patients returning to school following an increase in community outbreaks. This will be available next week.
- **Victoria:**
 - COVID-19 cases in Victoria – in the past 24 hours, 96% of new cases in Australia were in Victoria.
 - All centres are cautiously continuing with transplantation services whilst assessing their risk on a day-to-day basis.
 - ICU's are busy but are not being overwhelmed at this stage. Victorian Government have shut-down non-essential surgery as at 28 July 2020.
 - Some of the challenges that Victorian units are facing are; hospitals introducing a no visitors rule (except under exceptional circumstances) which, following feedback, is causing increased transplant patient/family anxieties; border restrictions causing issues with transplant patients and families needing to travel interstate and not being able to return for long periods, as well as logistical issues with less commercial flights and staff on furlough.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand have 21 active COVID-19 cases.
- **Research/Trials:** Little new peer reviewed data available. Australian trials moving slowly due to the lack of recruitment and vaccine trials still early days.
- **Media:** During Donatelife week (26th July – 2nd August 2020), there have been a number of positive donation and transplantation stories.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 368 new cases and 137 recoveries, taking our number of unresolved cases to 5825, with 353 of the 368 new cases being in Victoria.

Global new case numbers continue to increase at close to 1.5% per day, with cases continuing to trend upwards in India, Brazil, Argentina, Peru and Iraq. The USA recorded 56,336 in the past 24 hours.

- ALL OF THE ABOVE is subject to regular review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 22nd July 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Communique No.16 – 22 July 2020

- **Transplantation update in Australia:**
 - Nationally, there are 3904 active COVID-19 cases.
 - There are currently no issues with ICU capacity. There are 46 COVID-19 patients in ICU, with 44 of those being in Victoria, including 26 patients being ventilated.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population is 17 (10 recoveries): 12 kidney transplant patients (includes 8 recoveries, 2 unknown and 2 active cases) and 5 dialysis patients (2 recoveries and 3 deaths).
 - Donation and transplantation is continuing as per usual with the expectation that numbers may decrease as a result of further outbreaks and logistical constraints.
 - Discussions with local hospital executives regarding the possibility of accepting or declining Victorian offers is worth considering.
- **Victoria:**
 - COVID-19 cases in Victoria – in the past 24 hours, 97% of new cases in Australia were in Victoria.
 - The Royal Melbourne Hospital has formed an agreement with Monash to assist with their transplant service.
 - Other Victorian hospitals are continuing transplantation whilst assessing their risk on a day-to-day basis.
 - Standard allocation is to continue, with the usual impediments still in place with logistical issues remaining, in particular flight availability as well as staff being on furlough. COVID-19 testing is continuing.
 - Tasmanian donors and recipients will be assessed on a case by case basis.
 - Albury Hospital has been granted a permit that allows staff to continue with donation coordination and retrieval services with Victoria.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand have 27 active COVID-19 cases.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 359 new cases and 3 recoveries, taking our number of unresolved cases to 3904, with 347 of the 359 new cases being in Victoria.

Internationally (over the last 3 days); Indonesia has exceeded 5000 cases for the first time, Spain has had a significant increase with 4581 cases in last 3 days (they recently released social measures). South America (excluding Brazil) have increasing cases with the USA recording 56,750 in the past 24 hours and Mexico recording more than 5000 new cases in the past 24 hours.

- ALL OF THE ABOVE is subject to regular review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 15th July 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Fortnightly Communique No.15 – 15 July 2020

- **Transplantation update in Australia:**
 - Nationally, there are 2103 active COVID-19 cases.
 - There are currently no issues with ICU capacity. There are 27 COVID-19 patients in ICU, with 26 of those being in Victoria and 19 of those patients are ventilated.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population is 14 (10 recoveries): 9 kidney transplant patients (all recoveries) and 5 dialysis patients (2 recoveries).
 - Donation and transplantation is continuing as per usual with the expectation that numbers may decrease as a result of further outbreaks and logistical constraints.
- **Victoria:**
 - Resurgence of COVID-19 cases in Victoria has continued – in the past 24 hours, 91.8% of new cases in Australia were in Victoria. Even though this second spike is bigger, and with predominantly community transmission, there is greater preparedness and a better understanding about the virus.
 - The Royal Melbourne Hospital has suspended transplantation.
 - Other Victorian hospitals are continuing transplantation whilst assessing their risk on a daily basis. Remaining units have offered to assist RMH where possible.
 - In alignment with Victorian Government announcing stage 3 restrictions, The Alfred Hospital are introducing a 'no visitor' policy, with exceptional circumstance allowances.
 - Standard allocation is to continue, with the usual impediments still in place with logistical issues remaining, in particular flight availability. COVID-19 testing is continuing.
 - Tasmanian donors and recipients will be assessed on a case by case basis given surgical retrieval services are provided from Victoria. Albury Hospital will continue to have donation coordination and retrieval services provided from Victoria.
 - Discussions with local hospital executives regarding the possibility of accepting or declining Victorian offers is worth considering.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand have 25 active COVID-19 cases.
- **Testing:** is continuing as normal, with enough access to rapid PCR tests, which overall seem very accurate. Commercial antibody tests availability is increasing and many of the tests have good sensitivity and specificity with their role in organ donation remaining uncertain. One of the difficulties in the Australian environment is the overall prevalence of recovered infection is low, so there is low positive predictive value of a reactive antibody test.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 183 new cases and 41 recoveries, taking our number of unresolved cases to 2103, with 168 of the 183 new cases being in Victoria. The US recorded 58,000 new cases in 24 hours with South Africa recording 11,500 in 24 hours. Global new cases continue to increase at an average of close to 1.5% per day.
- ALL OF THE ABOVE is subject to regular review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce




Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 1st July 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Fortnightly Communique No.14 – 1 July 2020

- **Transplantation update in Australia:**
 - Nationally, there are 655 active COVID-19 cases.
 - There are currently no issues with ICU capacity. There are 14 COVID-19 patients in hospital, with 4 being in ICU.
 - The number of reported COVID-19 cases among dialysis patients and kidney transplant recipient's population, stands at 13 (10 recoveries): 8 transplant patients (all recoveries) and 5 dialysis patients (2 recoveries).
 - Deceased donor transplantation has seen a decrease in June. Transplantation comparisons between this year and last year: Kidney down by 33%; Liver down by 11%; Lung down by 25%, Pancreas down by 10% with Heart transplantation increased by 31%.
 - Resurgence of COVID-19 cases in Victoria – in the past 24 hours 71 out of the national total of 81 new cases are in Victoria, with 60 of these being investigated as community transmissions. The local government are mitigating risk by performing enhanced surveillance, testing and isolation in hot spots. Donation and transplantation are continuing as usual and the situation is being monitored by the taskforce who will advise of any future changes.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand have 22 active COVID-19 cases.
- **Research/Trials:** No new peer reviewed data available. Australian trials not moving forward due to the lack of recruitment and vaccine trials still early days.
- **Accuracy of rapid testing:** Both rapid (GeneExpert) and conventional PCR tests for COVID-19 exhibit high test accuracy, however as the prevalence of COVID-19 is very low, we can expect to see occasional false positive tests. For example, if specificity is 99.9%, we can expect a false positive test in 1 out of every 1000 non-infected people who are tested. It should be noted that a more common cause of an apparent "false positive" may be distant infection, where the patient was either relatively asymptomatic or had symptoms and has recovered. Thus, expert ID advice should be sought in cases where a false positive test is suspected. This may have implications for current policy to test donors and recipients prior to transplantation.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded 81 new cases and 15 recoveries, taking our number of unresolved cases to 655. Brazil recorded 24,052 new cases, the US 41,556. Global new cases continue to increase at an average of close to 1.5% per day. Mortality is increasing minimally compared to new cases, with Singapore's mortality rate being low in comparison (0.7% per 100,000 population).
- ALL OF THE ABOVE is subject to fortnightly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce




On behalf of Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 17th June 2020

Dear TSANZ members,

**COVID-19 - National Transplantation and Donation Rapid Response
Taskforce Fortnightly Communique No.13 – 17 June 2020**

- **Transplantation update in Australia:**
 - Nationally, there are 382 active COVID-19 cases.
 - There are currently no issues with ICU capacity. There are 17 COVID-19 patients in hospital, with 4 being in ICU.
 - The number of reported COVID-19 cases stands at 13 (10 recoveries): 8 transplant patients (all recoveries) and 5 dialysis patients (2 recoveries).
 - Deceased donor transplantation has seen a decrease in donation following a busy May. Transplantation comparisons between this year and last year: Kidney down by 31%; Liver down by 5%; Lung down by 21%, Pancreas down by 21% with Heart transplantation increased by 33%.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand have two active COVID-19 cases.
- **Research/Trials:** No new data available as yet. Awaiting data from vaccine trials and on people exposed to COVID the second time.
- **Data:** Current COVID-19 epidemiological data was provided and is available here. Australia recorded 15 new cases and 13 recoveries, taking our number of unresolved cases to 382. Brazil recorded 20,647 new cases, the US 19,968. New case numbers for Saudi Arabia (4,507) increased again and Colombia (4,272) and Egypt (1,691) reported their highest number of new cases. China has reported 150 new cases across the last 3 days.
- ALL OF THE ABOVE is subject to fortnightly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

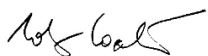
UPDATE PROVIDED – 3rd June 2020

Dear TSANZ members,

**COVID-19 - National Transplantation and Donation Rapid Response
Taskforce Weekly Communique No.12 – 3 June 2020**

- **Transplantation update in Australia:**
 - Deceased donor transplantation is continuing to return to normal levels.

- Nationally, there are 489 active COVID-19 cases, with 365 of those being in NSW.
 - There are 20 COVID-19 patients in hospital, with 2 being in ICU and one of those patients being on ventilation.
 - The number of reported COVID-19 cases remains at 13; 8 transplant patients and 5 dialysis patients.
 - Live donation is slowly resuming.
 - Due to logistical issues (commercial flight availability), the Pancreas and \Islet Transplant Advisory Committee agreed to allow dual-listing for pancreas transplant recipients during this unprecedented time.
 - Outpatient management of newly transplanted patients may provide significant logistic issues for some clinics and will continue to be reviewed.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
 - New Zealand are down to one active COVID-19 case.
 - **Research/Trials:** No new data since last week. PCR rapid testing continues to have limited availability.
 - **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded a total of 9 new cases and 5 recoveries in the past 24 hours. Countries that have recorded their highest number of cases this week are; Chile (5,470) and Columbia (2,165) while Brazil recorded 11,598 new cases and the US 21,188.
 - This group will be documenting the timelines and decision-making process during this pandemic for future reference.
 - ALL OF THE ABOVE is subject to fortnightly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No.11 – 27 May 2020

- **Transplantation update in Australia:**
 - There were 55 deceased donor transplants undertaken in the past 7 days.
 - ICU capacity around the country has resumed to a more regular level this week. Nationally, there are 481 active COVID-19 cases with 5 COVID-19 patients being in ICU and on ventilation.
 - The number of reported COVID-19 cases remains at; 8 transplant patients and 5 dialysis patients.
 - Given the faster than anticipated return of acute transplant activity, outpatient management of newly transplanted patients may provide significant logistic issues for some clinics. We will review this situation weekly.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
- **Returning to school:** Following last week's [information](#) provided by the Paediatric Transplant Advisory Committee in relation to transplant patients returning to school, we have received follow up questions regarding transplant patients who are teachers, health workers and parents of children returning to school. Specific advice is best sought from the individual's health practitioner but what the group agreed on is that ideally, to minimise risk for immunosuppressed adults they should continue to work from home, with opinion-based advice being to do so until the end of term 2 whilst we observe progress in the community as restrictions are eased. Risk of schools is low, but we would advise ongoing health hygiene and social distancing and minimising after school care for children where possible.
- **Research/Trials:** Jeremy Chapman provided information for the group in relation to transplant research globally being brought to a halt, with Australia being an exception in the laboratories with maintained work. It has also been reported that clinical trials have largely ground to a halt, however with the return to near normal deceased donor kidney activity in Australia and New Zealand, the BEST Fluids trial has been restarted this week. Peter Boan reported the difficulty remains in recruiting new patients for trials. PCR rapid testing availability remains an issue with predicting serology testing not moving forward. There is a wait on immunology investigation of recovering patients. There has been a lot of talk around vaccine trials, with no outcomes reported in literature reviews, only in news articles. The preliminary reports make it hard to know what will work.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded a total of 8 new cases and 28 recoveries in the past 24 hours. Global cases have passed 5.5 million. Countries that have recorded their highest number of cases this week are; Chile (4,895) and Bangladesh (1,975) while the UK reported 1,631 new cases which is their lowest in 2 months.
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates



Professor Steve Chadban



Dr Helen Opdam

UPDATE PROVIDED – 20th May 2020

Dear TSANZ members,

**COVID-19 - National Transplantation and Donation Rapid Response
Taskforce Weekly Communique No. 10 – 20 May 2020**

- **Transplantation update in Australia:**
 - Deceased donor transplantation is slowly returning to more typical levels of activity, with a total of 30 transplants being undertaken in the past 7 days.
 - There are no issues with ICU capacity around the country with 623 out of 884 beds being available. There are 11 COVID-19 patients in ICU with 7 ventilated nationally. NSW has reported similar donor referral numbers to the end of April 2020 (407) compared to last April (406).
 - To date there have been 8 transplant patients and 5 dialysis patients with COVID-19.
 - Donation and transplantation teams are working hard managing logistical issues, especially with limited commercial flights.
- **Transplantation update for New Zealand:**
 - Transplantation services are ongoing and unchanged.
- The TSANZ Paediatric Transplant Advisory Committee has produced information in relation to transplant patients returning to school. The document is available on the TSANZ website [here](#).
- **Research/Trials:** Peter Boan reported there is difficulty in recruiting new patients for trials. In Western Australia they are looking at asymptomatic groups' serology and NAT testing and also recovered people with complex immune signatures.
- **Media:** Channel 9 (Gold Coast) contacted TSANZ to provide confirmation that transplantation services had resumed. The story was about a young woman with chronic kidney disease on the waiting list and how relieved she was that transplantation had resumed and that she was an advocate for DonateLife.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded a total of 16 new cases and 28 recoveries in the past 24 hours, while the following new cases were recorded; Brazil - 14,000; India - 4,500; Bangladesh - 1600 and Iran showing signs of a second wave.
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 13th May 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 9 – 13 May 2020

- Transplantation update in **Australia**:
 - Deceased donor kidney transplantation has now recommenced in all States.
 - Deceased donation for liver, lung, heart and urgent paediatric kidney transplants has increased to near usual volumes over the past one to two weeks. Paediatric transplantation is following suit of adult centres at low volume.
 - Interstate flights are limited creating some difficulties with interstate organs offers and transport. There have been some logistical challenges successfully overcome, including a recent donation in Tasmania undertaken by Victorian retrieval staff that involved further subsequent organ movement between states.
 - Retrieval teams are adhering to strict requirements with respect to PPE use and conserving PPE supplies continues to be a concern in some hospitals.
 - ICU capacity has not been reached with general activity lower than normal. There are 20 COVID-19 patients in ICU, 16 patients ventilated nationally.
- Transplantation update for **New Zealand**:
 - Transplanting all organs and all is going well.
- Research/Trials: Not much has changed in relation to planned trials. The New England Journal published an observational study of Hydroxychloroquine in Hospitalized Patients with Covid-19 with the conclusion showing no differences. Still waiting on data for the Remdesivir trial.
- Media: Government media releases relating to school returning has prompted enquiries from patients who are teachers, students and healthcare workers that have concerns about returning to work when they are vulnerable. The Australian Health Protection Principal Committee (AHPPC) have released a [position statement](#) that provides advice on reducing the risk of COVID-19 transmission in schools, including advice for vulnerable students/staff.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia recorded a total of 7 new infections and 42 recoveries in the past 24 hours, while Russia recorded 11,656 new cases.
- Program maintenance for second wave: Deceased donor transplantation has resumed cautiously and any changes in community infection rates and transmission will be followed closely before a decision is made to resume full transplant activity. Processes need to be in place to ensure that patients can be safely managed through the operative and post-operative periods with as little time spent in hospitals and waiting rooms as possible, acknowledging that the safest place for immunosuppressed people being at home with no visitors. Units need to be as well prepared as possible for potential further outbreaks and clusters of infection. Any localised outbreaks should hopefully be picked up quickly using the track and trace [COVIDSafe app](#) and controlled locally.
- ALL OF THE ABOVE is subject to weekly review.


UPDATE PROVIDED – 6th May 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 8 – 6 May 2020

- Transplantation update in **Australia**:

- Queensland, South Australia, and Western Australia deceased donor kidney transplant programs restarted transplant activity early last week.
- New South Wales have recommenced deceased donor kidney transplant programs, gradually, as of yesterday (5th May 2020). Usual allocation of NSW donors will now resume.
- Victorian kidney transplant programs anticipate recommencing from 11th May 2020. The usual national allocation will apply for well-matched and/or highly sensitised potential recipients where logistics can be managed. State allocation of any Victorian donors will be offered to South Australia for the next 5 days, or until Victoria are back up and running, as discussed and agreed on by RTAC.
- Deceased donation for urgent paediatric kidney transplants, liver, lung, heart and multi-organ transplants are continuing.
- Donation has increased over the past week. Early medical suitability conversations and strong communication is still important.
- ICU capacity has not been reached but non-COVID parts of hospitals in NSW are tight. There are 27 COVID-19 patients in ICU, 23 patients ventilated nationally.
- The President of TSANZ, Professor Toby Coates thanked Donatelife for all of their hard work and success in navigating the staged recommencement of transplantation surgery in Australia.
- **Transplantation update for New Zealand:**
 - All three renal transplant units (Auckland, Christchurch and Wellington) are continuing with deceased and live donor transplantation.
 - Other solid organ transplantation is also continuing.
- **Research/Trials:** Not much has changed in relation to planned trials. There is a lack of patients to enrol in the trials. Allison Tong, on behalf of the TSANZ, ran patient workshops to discuss the perspectives of transplant candidates, family members, and potential donors on the suspension of transplant programs due to COVID-19. Data from these workshops will be available within the next few weeks.
- **Data:** Current COVID-19 epidemiological data was provided and is available [here](#). Of the Australian daily cases 22 of 28 were from Victoria. Of these, 19 are part of a cluster linked to an abattoir in Melbourne. Cases have dropped again in Europe with an increase in daily cases for various South American countries as well as Russia and India.
- **COVID-19 testing:** Testing methods for the virus via the various commercial SARS CoV 2 assays are comparable with equal sensitivity and specificity. The GeneXpert rapid turnaround test is still in very short supply. The Communicable Diseases Network Australia (CDNA) National Guidelines for Public Health are currently being updated to include and prioritise deceased donor and living donor and recipient testing following the previous AHPPC Statement. The previously issued advice on the testing of donors and recipients has been revised and incorporated in the CDNA Guideline. The current version 3 of this advice is provided [here](#) for donation and transplantation clinicians.
- Reminder for members and their patients to download the [COVIDSafe App](#).
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 29th April 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 7 – 29 April 2020

COUNTRY	COVID-19 Cases	Transplant Recipients COVID-19 positive
Australia	6725*	7
New Zealand	1472*	0

*As at 27th April 2020

- The Australian Health Protection Principal Committee (AHPPC) endorsed and the National Cabinet noted the TSANZ's recommendation for a cautious recommencement of kidney transplantation at the end of last week. See statement [here](#).
- Restart of transplantation:
 - There will be a slightly staggered recommencement of kidney transplantation in each of the states with RTAC continuing to discuss recommencement plans across the country.
 - Interstate offers – while an initial focus on local offers is expected, there is potential for interstate offers to be explored so that organs are utilised where possible and considered for highly sensitised patients. The importance of early discussions and eligibility is essential and will support the management of logistics to assist with any issues being overcome. We are hopeful that flights will increase over the coming weeks and when all jurisdictions come on board resuming transplantation, interstate donation and transplantation will become more viable.
 - Tissue Typing – The labs need serum and are willing to ship trays around the country. The last serum date, note function and consent details can be found in OrganMatch. Most waiting list patients have current sera, but will encourage those that don't to submit.
- Transplantation update in Australia:
 - Queensland and Western Australia were approved for kidney transplantation to recommence this week. No transplants have taken place as yet.
 - Deceased donation for urgent paediatric kidney transplants, liver, lung, heart and multi-organ transplants are continuing as they have been in recent times. ICU capacity has not been reached, with 42 COVID-19 patients in ICU, 27 patients ventilated nationally.
- Transplantation update for New Zealand:
 - All three units have started both deceased and living donor renal transplantation, in a staggered fashion. Transport logistics have been manageable to date.
- Research/Trials: Trial situation remains the same. Remdesivir may not be active based on Chinese trial data leaked by the WHO, but they didn't get to full recruitment. Still a trickle in supply of Cepheid Genexpert rapid PCR kits. No new insights about serology.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australian active cases have dropped again with more than 80% of COVID-19 cases having recovered. A further resurgence of activity in Singapore was noted again this week.
- COVID-19 testing: The Communicable Diseases Network Australia National Guidelines for Public Health are currently being updated to reflect the 7 April [AHPPC Statement](#) to include and prioritise deceased donor and living donor and recipient testing. While these updates are being finalised, units should refer to the recommendations for testing in the

AHPPC Statement. The GenEx rapid turnaround PCR testing will assist with short timeframes and is up to clinicians to arrange through local jurisdictions.

- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 22nd April 2020

Dear TSANZ members,

**COVID-19 - National Transplantation and Donation Rapid Response
Taskforce Weekly Communique No. 6 – 22 April 2020**


COUNTRY	COVID-19 Cases	Transplant Recipients COVID-19 positive
Australia	6590*	6
New Zealand	1440*	0

*As at 20th April 2020

- Transplantation has not changed in **Australia** from last week's update:
 - All deceased and living kidney transplant programmes suspended, including kidney-pancreas and islet programmes, with the exception of urgent paediatric kidney transplants. Urgent liver, lung, heart and multi-organ transplants are proceeding. ICU capacity has not been reached, with 49 COVID-19 patients in ICU, 34 patients ventilated nationally.
- Transplantation update for **New Zealand**:
 - All units open for deceased donor renal transplants, with cases selected based on clinical risk benefit calculations dependent on donor and recipient factors. Deceased donor rates are low. Live donor transplantation is to recommence where benefits outweigh risks.
- Research/Trials: There are currently two drug trials underway. Australia is waiting on randomised control data from Europe, China, USA. Peter MacDonald notified the group about the Kirby Institute sponsored observational study for immunocompromised patients infected with COVID19, including people with HIV or on chemoRx or immunosuppressive drugs. ANZDATA are collecting similar clinical data on COVID-19+ dialysis or transplant patients across ANZ. Greg Snell mentioned the Alfred's bio-banking study on immunocompromised patients, and the Doherty ASCOT sub-study that is in the pipeline.
- Media enquiries: Toby Coates was interviewed by the ABC in relation to kidney transplantation being on hold, which resulted in a [news article](#) on Sunday 19th April and then also appeared on the [7.30 Report](#) on Monday 20th April (starts at 17.10). Lucinda Barry was interviewed on ABC talkback radio in Melbourne re linking kidney transplantation to the decision to resume elective surgery: Lucinda reminded listeners that the reason kidney transplantation remains on hold is because of patient risk and safety.

Lucinda also mentioned that urgent heart, lung and liver transplants are proceeding on a case-by-case basis.

- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australian active cases have dropped below 2000. A further resurgence of activity in Singapore was noted.
- COVID-19 testing: The group noted that testing turnaround times had improved slightly. The group discussed the need for more GenEx rapid turnaround PCR testing assays. Peter Boan advised of the rapid PCR test being rolled out to some regional areas but there is a limited supply. Serology has been started but data on test performance and clinical implications remain sparse.
- Restart of transplantation:
 - each state is likely to move towards usual activity in a slightly different manor and timeframe, but the group agreed that each state needs to work through this process together with a nationally coordinated and consistent approach.
 - Factors that need to be considered prior to recommencement of kidney transplantation include; transportation (including commercial flights and remote area logistics), tissue typing, allocation, hospitals and local area health positions, DonateLife staffing and waiting list management. There must also be clear and transparent messaging to our patients and the community, in accordance with state and national policies.
 - Each state representative on the Renal Transplantation Advisory Committee (RTAC) are speaking to their respective local TACs to engage all transplant units and discuss further the local considerations and requirements, and communication strategies for their patients, local networks and health ministries.
 - The decision to restart kidneys (and kidney pancreas transplantation) will be made once the risk to patients is deemed acceptable and other logistic issues have been addressed.
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 15th April 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 5 – 15 April 2020

COUNTRY	COVID-19 Cases	Transplant Recipients COVID-19 positive
Australia	6431*	5
New Zealand	1366*	0

*As at 15th April 2020

- Transplantation has not changed in Australia and New Zealand from last week's update.

- New Zealand – Living donor kidney transplants are suspended; Wellington has suspended deceased donation transplantation; Christchurch and Auckland are continuing deceased donor transplantation (very select patients only). Paediatric kidney transplantation is continuing.
- Australia – All deceased and living kidney transplant programmes suspended, including kidney-pancreas and islet programmes, with the exception of urgent paediatric kidney transplants. Urgent liver, lung, heart and multi-organ transplants are proceeding for critically ill patients. There appear to be fewer donation opportunities due to decrease in trauma and possibly stroke.
- Research/Trials: There are currently two drug trials underway. The group discussed possible drug interactions between CNI and LPV/r and agreed such risks preclude inclusion of most Tx recipients. The numbers of Tx patients with COVID are low, thus meaningful insights for Tx would be unlikely.
- Media enquiries: The 7.30 Report is soon to air the interview relating to COVID-19 and transplantation – this may generate media interest in current strategy, duration of suspension and steps to restart.
- Data: Current COVID-19 epidemiological data was provided and is available [here](#). Australia and New Zealand reported more recoveries than new cases. Note resurgence of activity in Singapore.
- Renal Transplant Advisory Committee (RTAC) statement: *Management of Transplant Patients*: RTAC provided a brief statement re management of COVID-19 positive kidney transplant recipients and emphasised the need for case discussions with local transplant units. The statement is available [here](#).
- Serology COVID-19 testing – The group discussed TGA approval of Covid-19 IgG and IgM Serology assays – this will take time and will post-date clinical need. Peter Boan discussed the unknowns of serology, including rates and timing of seroconversion, whether seroconversion indicates immunity, and whether virus shedding can continue despite seroconversion. For transplantation, detection of virus by PCR will remain the main testing option for donors and recipients at least in the short term (next 12 months).
- When and how to resume usual Donation and Transplantation activity: Preliminary discussions:
 - Acknowledging timeframes remain unclear, it was agreed that a comprehensive national planning process needs to commence.
 - A highly coordinated, transparent and nationally consistent (but not necessarily nationally simultaneous) approach will be required, cognizant of workforce and resourcing (reversal of redeployments) & need for clear, consistent communication.
 - Implementation plans must be agreed within each jurisdiction at high level, but will need to be consistent with National Health Policy re COVID containment, PPE supply and health priorities.
 - The decision to restart should be made once the risk to patients is deemed acceptable.
- TSANZ Patient Workshops – COVID-19: The TSANZ is holding patient workshops by Zoom to discuss the perspectives of transplant candidates, family members, and potential donors on the suspension of transplant programs due to COVID-19. Workshops will be in late April 2020. Registrations are now [open](#).
- ALL OF THE ABOVE is subject to weekly review.







UPDATE PROVIDED – 8th April 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 4 – 8 April 2020

On Tuesday 7th April 2020, the COVID-19 National Transplantation and Donation Rapid Response Taskforce met via video conference and discussed jurisdictional updates on suspensions, COVID-19 cases and the status of ICU capacity. The taskforce would like to present the following update;

- **New Zealand** – All living donor kidney transplants are suspended at present. There are three renal transplant units in NZ; Auckland, Christchurch and Wellington. Wellington has suspended deceased donation transplantation; Christchurch and Auckland are continuing deceased donor transplantation (very select patients only). Paediatric kidney transplantation is continuing. The influx into ICU has not yet happened as expected. There are no transplant recipients reported with COVID-19.
- **Australia** – no change to previous advice on suspensions of all deceased and living kidney transplant programmes, including kidney-pancreas and islet programmes, with the exception of urgent paediatric kidney transplants. Urgent liver, lung, heart and multi-organ transplants are proceeding for critically ill patients and paediatric patients.
- **COVID-19 cases in transplant recipients** – Current anecdotal reports suggest that there are low infection rates in transplant patients in low prevalence countries. It is extremely important that ANZ remain in this category. In countries with overwhelming rates of viral infection, mortality rates in transplant recipients appear higher than in non-transplant patients. Overall, infection rates in transplant patients appear to be no higher or possibly less than the general population – a possible explanation may be that recipients receive education about how to minimise their infection risk. We need to emphasise to transplant patients that they need to be extremely careful – even more so than the regular population. ANZDATA has reports of six positive cases in Australia – four transplant patients and two dialysis patients. Australia has a higher proportion of patients being tested for COVID-19 than most other countries.
- **Data** – Current COVID-19 epidemiological data was provided and is available [here](#).
- **Guidelines** – The group noted discussions occurring on the potential development of guidelines on how to manage transplant patient immunosuppression medication and agreed that at this stage there was not sufficient evidence-based data to inform such guidelines.
- **COVID-19 testing** – It was reported that testing turnaround times have improved and that there are no issues with reagent availability. It is hopeful that serology testing will be available soon.
- **Patients and Waitlist information** – Transplant Australia, in collaboration with TSANZ and the Transplant Nurses Association (TNA), are coordinating a series of videos on the coronavirus for the transplant community which is being funded by Astellas. The videos will be housed on the Transplant Australia YouTube Channel. TSANZ, TNA and

Transplant Australia will also have them available on their website. The first video, titled “How to Stay Safe during the Pandemic” by Professor Toby Coates is available [here](#).

- Requirements for transplant programs restarting – Although this point is clearly some time away, recent reductions in new cases of COVID-19 in Australia and New Zealand and remaining ICU capacity warrant increasing focus on this complex decision over the coming weeks and months. A highly coordinated response will be desirable, involving all transplant units in unison and close liaison with the donation network and tissue typing labs as considerations will be needed for; (1) Donatelife staff and transplant staff that have been redeployed to other areas such as ICU; (2) patients will need to resume providing monthly serum for tissue typing trays as many have stopped. The return of transplant programs will be mainly a risk-based clinical decision but will require administrative coordination and input. This matter will be a standard agenda item for this meeting.
- Logistics – It was confirmed that interstate offer and allocation can occur for recipients at high need of transplantation and if the transportation of retrieval teams and organs can be organised. It was noted that current barriers to transplantation were primarily clinical based and related to patient safety rather than logistical challenges. It was agreed that logistical challenges should be reported to the OTA for further consideration on strategies to support these challenges.
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 1st April 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 3 – 1 April 2020


On Tuesday 31st March 2020, the COVID-19 National Transplantation and Donation Rapid Response Taskforce met to discuss COVID-19 as it continues to evolve.

The Taskforce discussed and confirmed the following;

- Kidney living donor and deceased donor programmes, as well as kidney-pancreas and islet programmes, are all suspended in Australia, as per last week’s advice.
- Liver, heart, lung, paediatric and multi-organ transplant programmes are proceeding with recipients at high risk across Australia with careful assessment of the risks and benefits for patients. Patient safety is the key priority in all of these assessments.
- Cardiothoracic units expressed that they desperately need heart transplant to continue for their sick patients to avoid an upturn in waiting list mortality.
- Early suitability communications with local transplant programmes prior to extensive donor workup is recommended. Interstate offer and allocation can occur where there are recipients at high need of transplantation and if the transportation of retrieval teams and organs can be organised. Retrieval by local retrieval services is preferable, although current

jurisdictional travel restrictions do not apply to surgical retrieval teams. It should be noted that substantial logistic challenges exist to interstate sharing that should be considered, including reduced access to domestic air travel and restrictions on aircraft staff movement between states.

- COVID-19 cases in transplant patients are at very low numbers, with new data coming forward as we learn more.
- ICU capacity around Australia is not yet under pressure. Units are preparing that if the COVID-19 pandemic begins to overwhelm the health system that they have plans in place.
- People on the transplant waiting list and patients that have been transplanted are advised to contact their local health departments. TSANZ have provided a FAQ and advice document on their [website](#) and will be providing an additional update to assist them with specific questions with links to KHA and Transplant Australia websites for TSANZ patient suggestions.
- Professor Steve Chadban has been interviewed for [Sydney Morning Herald](#), 730 report and Channel 7. Patients and other clinicians are being interviewed for 730 report. Chris Thomas from Transplant Australia was also interviewed. Unfortunately, there was a headline portraying the wrong information about organs being discarded, but the body of the article was more positive.
- Current COVID-19 Data was provided and is available [here](#).
- Professor Toby Coates presented findings provided by Kidney international of data from Italy and England and will be on the TSANZ website as soon as available (likely within a week).
- Testing status – insight on test availability and turnaround times from each jurisdiction found that there has been an improvement in testing turnaround time.
- ALL OF THE ABOVE is subject to weekly review.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 25TH MARCH 2020

Dear TSANZ members,

COVID-19 - National Transplantation and Donation Rapid Response Taskforce Weekly Communique No. 2 – 24 March 2020

Global prevalence and outcomes data for general and transplant populations were presented and discussed, along with local developments and projections. The following positions were established:

Transplantation Activity:

Considerations:

1. Donor requirements for ICU resources in an increasingly constrained environment
2. Projected increases in COVID-19 (+) patients within hospitals and in the general community, thereby increasing risks of nosocomial and community infection of donors and recipients
3. Recipient requirements for ICU resources (non-kidney recipients)
4. Recipient risks of COVID-19 infection during the highly-immunosuppressed post-op period
5. Recipient risks without transplantation for at least 4 months (death from organ failure, complications of organ failure, dialysis related morbidity)

6. Logistic constraints related to COVID-19 testing of donor and recipients and the transportation of surgical retrieval teams, organs and recipients (especially interstate).

The Australian Transplant community plans to change current practice in transplantation:

1. Kidney – living donor and deceased donor programmes suspended
2. Kidney-pancreas (and islet) – suspend as above
3. Liver, Heart, Lung, Paediatric and multi-organ transplant programmes – restrict to those likely to die within 4 months if untransplanted, subject to case by – case review in light of donor-recipient characteristics. COVID-testing results desirable, not essential if low risk.
4. ALL OF THE ABOVE subject to weekly review.


Donation:

1. Continue supporting donors subject to local ICU capacity constraints, prevalence of COVID-19 in donor ICUs, and local demand/requirements by transplant teams as advised by direct contact between DonatLife and transplant teams, on a case by case basis.
2. Organ offer and allocation will be restricted to local programmes – DonatLife Agencies should undertake early suitability communications with local transplant programmes prior to extensive donor workup.
3. Attempt to provide COVID-19 testing results (nose and throat swab and, if can be safely obtained, an endotracheal aspirate; bronchoscopic samples not required) for all donors and recipients, subject to local availability.

The transplant community of Australia and New Zealand would like to thank Lucinda Barry for her sterling leadership of OTA to date. We wish her every success in joining the Department of Prime Minister and Cabinet for the crucial 3 months ahead in coordinating a national response to COVID-19. We welcome Judy Harrison as the acting Chief Executive Officer of the OTA and look forward to an ongoing constructive working relationship.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 18TH MARCH 2020


Dear TSANZ members,

**COVID-19 - National Transplantation and Donation Rapid Response Taskforce
Weekly Communique No. 1 – 18 March 2020**

- On Tuesday 17th March 2020, the new COVID-19 National Transplantation and Donation Rapid Response Taskforce met for the first time. This Taskforce has been formed with transplantation, donation and infectious disease professionals to consider the clinical impact of COVID-19 on donation and transplantation in Australia.
- The Taskforce will meet weekly, or more frequently if required, to consider COVID-19. as it evolves and will send weekly communiques to the sector providing advice and leadership on the COVID-19 issue
- Organ donation and transplantation is proceeding across Australia with careful assessment of the risks and benefits for patients. Patient safety is the key priority in all of these assessments.
- Assessments are being made on a case by case basis with the below impacts currently experienced:

- **Kidney** transplantation – the majority of living kidney donations have been postponed following assessment of the perceived post-transplant risks of immunosuppression and hospitalisation compared to the potential benefits for a recipient who is well and stable on dialysis, particularly home dialysis. Deceased donor transplantation continues, with kidney offers assessed on a case by case basis to assess risks and benefits specifically focussing on risks of requiring extended dialysis post-transplant, excessive immunosuppression and incurring complications that may require prolonged hospitalisation. As such, donor risks of DGF, recipient sensitisation and donor matching and comorbidity will be specifically considered for every kidney offer by clinical teams.
- **Paediatric** transplantation – living kidney donation have ceased in the short term and deceased donation proceeding though being selective with donors. Paediatric data is limited though correspondence from Italy indicates that the Lombardi population have 50 confirmed paediatric cases (of the confirmed COVID-19 cases), no cases amongst kidney or dialysis patients. Remarkably low severity in the paediatric population, no signal yet of increase risk of immunosuppressed paediatric patients.
- **Liver, lung and heart** transplantation – being clinically assessed on a case by case across the country, balancing the risk of death on waitlist with the risks of transplanting in the COVID-19 environment. Screening potential donors and recipients highly desirable. Internationally the Toronto Lung Transplant program will be closing for a couple of weeks.
- Following a review of current access to testing and results from local labs across the country, the Taskforce noted variability and agreed that prioritisation of donor testing should be sought locally where possible.
- The Taskforce agreed to develop specific advice for the sector on the testing of donors with guidance on routine testing of deceased donors and the availability of tests prospectively or retrospectively on defined criteria. This advice was issued to the sector on 18 March 2020 and will be reviewed as the situation evolves.

The group discussed the screening of recipients noting that a more accurate history is generally available than for donors. The length of time from donation offer to transplant can be short, results may not be back in time however tests would still enable reassurance, management and tracing.



Professor Toby Coates
Co-Chair of Taskforce



Professor Steve Chadban
Co-Chair of Taskforce



Dr Helen Opdam
Organ and Tissue Authority

UPDATE PROVIDED – 16TH MARCH 2020

Dear TSANZ members,

The TSANZ in combination with the Transplant Liaison Reference Group and the Organ and Tissue authority are closely monitoring the COVID-19 infection and its implications for Australian and New Zealand transplantation. A new committee with infectious diseases and epidemiology input has been formed, which will meet every Tuesday to follow the infection and its impact on organ donation activity and transplant activities across all disciplines.

Organ specific transplant advice is best provided through the advisory committee chairs for each discipline.

The TSANZ will keep its members regularly up to date with the changes as the situation evolves.

Toby Coates
President, TSANZ

UPDATE PROVIDED – 11TH MARCH 2020

Dear TSANZ members,

With regret because of the COVID-19 viral infection the TSANZ Council have decided not to hold our ASM and its associated meetings including the Post Graduate Course, TSANZ Liver Meeting, Masterclass, the Machine Perfusion Workshop, the National Review of Paediatric Kidney Recipients Workshop and the Virtual cross match session.

TSANZ plans to hold a virtual session on Monday 23rd March afternoon for an update on TSANZ response to COVID-19, the President's Prize Session and the Annual General Meeting. Details to follow this week.

TSANZ is investigating next year's ASM - registration fees paid for this year's ASM will be held over for next year. Refunds can be made available if needed. Unfortunately, TSANZ is not in a position to compensate people for incurred travel expenses, and we thank everyone for their understanding in these difficult circumstances

In the light of the rapidly changing situation the Council will continue to communicate as the situation evolves.

Toby Coates
President, TSANZ

UPDATE PROVIDED – 7TH MARCH 2020

Dear TSANZ members,

As you all know the situation regarding the emerging infection with the novel corona virus is a rapidly changing in Australia and New Zealand. The TSANZ is actively monitoring the situation and is extensively involved in dialogue with the Organ and Tissue Authority around transplantation and maximal safety for our patients and all involved in the care of transplant

patients. At this stage individual hospitals and Departments of Health will be providing advice to their staff about local responses to the infection, and infection control means.

A link to the position statement from the International Transplantation Society (TTS) can be found [here](#).

With regard to the TSANZ Annual Scientific Meeting (ASM), the TSANZ meeting convenors and the Council are actively monitoring the viral situation in Adelaide - still a low risk city with a small number of reported cases. The ASM planning is well advanced and we will keep members informed of any changes to the program as events unfold. We look forward to seeing as many as possible at the TSANZ meeting in March.

