

The 2009 Annual Report of the OPTN and SRTR

Intestine Transplantation in the United States, 1999-2008

Overview

- Improving short-term results with intestine transplantation have allowed more patients to benefit with nearly 700 patients alive in the U.S. with a functioning allograft at the end of 2007, leading to an increase in demand.
- Time to transplant and waiting list mortality have significantly improved over the decade, but mortality remains high, especially for infants and adults with concomitant liver failure.
- The approximately 200 intestines recovered annually from deceased donors represent less than 3 percent of donors who have at least one organ recovered.
- Consent practice varies widely by OPTN region. Opportunities for improving intestine recovery and utilization include improving consent rates and standardizing donor selection criteria.
- One-year patient and intestine graft survival is 89 percent and 79 percent for intestine-only recipients and 72 percent and 69 percent for liver-intestine recipients, respectively. By 10 years, patient and intestine survival falls to 46 percent and 29 percent for intestine-only recipients, and 42 percent and 39 percent for liver-intestine, respectively.
- Immunosuppression practice employs peri-operative antibody induction therapy in 60 percent of cases; acute rejection is reported in 30 percent-40 percent of recipients at 1 year.
- Data on long-term nutritional outcomes and morbidities are limited, while the cause and therapy for late graft loss from chronic rejection are areas of ongoing investigation.

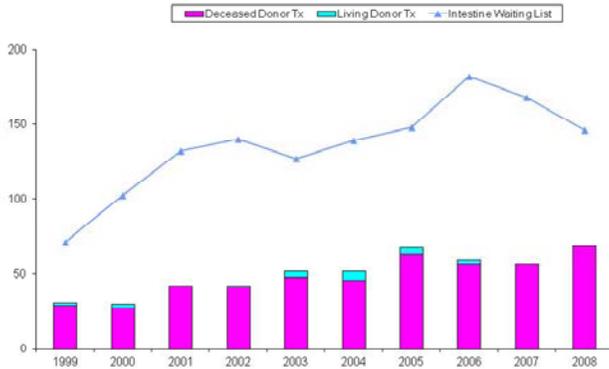
The figures on the following page are “dashboard” views of the state of intestine transplantation. Details on these figures, and explanations of the methods used in creating them are included in Chapter V of this year’s report.

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The data and analyses reported in the 2009 Annual Report of the U.S. Organ Procurement and Transplantation Network and the Scientific Registry of Transplant Recipients have been supplied by the United Network for Organ Sharing and the Arbor Research Collaborative for Health under contract with the Department of Health and Human Services. The authors alone are responsible for reporting and interpreting these data; the views expressed herein are those of the authors and not necessarily those of the U.S. Government.

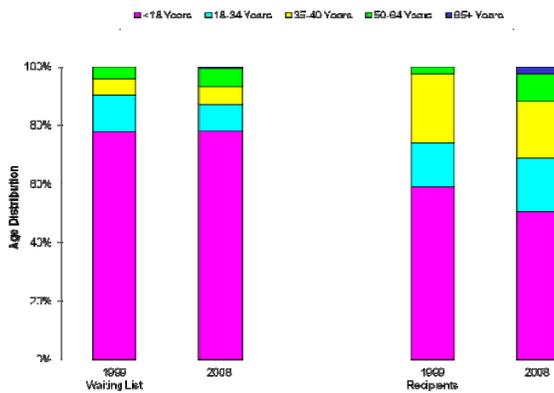
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Figure I-6. Intestine Transplantation at a Glance



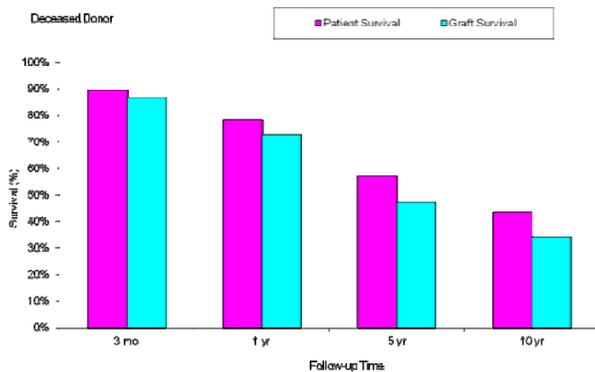
Number of Transplants and Size of Active Waiting List.

The numbers of patients on the intestine waiting list and the number receiving a transplant both more than doubled between 1999 and 2008 despite the fact that the number of patients on the waiting list has declined since 2006. Source: 2009 OPTN/SRTR Annual Report, Tables 1.7, 10.1a.



Age Distribution of Recipients and Active Waiting List.

About 77% of intestine candidates were in the pediatric age group in 1999 compared with 78% in 2008. Adults made up a greater portion of recipients than candidates. Source: 2009 OPTN/SRTR Annual Report, Tables 10.1a, 10.4.



Unadjusted Patient and Graft Survival.

One-year patient survival was 78% in 2008. Survival at 5 years was 57%. Graft survival was lower, since recipients may receive parenteral alimentation or retransplantation after graft failure. Source: 2009 OPTN/SRTR Annual Report, Tables 10.10, 10.14.

