

Accept or reject? Factors influencing the decision-making of transplant surgeons who are offered a pancreas: results of a qualitative study

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Background: The majority of offered pancreata are not transplanted. The reasons for this pancreas under-utilization are not well understood. This study aims to analyse the individual organ rejection process.

Methods: Semi-standardised, face-to-face interviews were conducted with 11 consultants from 11 transplant centers in Germany. All interviewees were highly qualified transplant surgeons who are in charge of accepting or declining organ offers. The interviews focused on the criteria on which the accept/reject decision following a pancreas offer depends. Interviews were recorded, transcribed and underwent content analysis after de-identification.

Results: The interviewees agreed upon a number of criteria on which they base their accept/reject decision: donor age, BMI, ICU stay, patient history and pancreas macroscopy, although clear cut-offs do not exist. We found completely diverse assessments, however, of the factor 'donor resuscitation' and of P-PASS. Knowing (and trusting) the explant surgeon is also an important factor in organ acceptance. The following criteria play a minor role: previous rejection of another centre, the 'fit' to the intended recipient (although some interviewees stated that the relatively small waiting lists render it more difficult to place the organ). It is rarely only a single factor that accounts for the rejection, but "the sum of a bad gut feeling". The majority of interviewed surgeons explained that sometimes, organs are turned down because of staff and capacity shortage, while officially declaring other reasons. Surgeons admitted they did not always feel certain when turning an offer down, but tended not to doubt their decision afterwards.

Discussion: It transpired that medical accept/reject criteria are used inconsistently and differ between different surgeons. Non-medical aspects play an important role, too, e.g. surgical capacity or trust in the retrieval team. The results are part of a larger study including quantitative analysis of ET-data.

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