

PANCREAS TRANSPLANTATION



The UW Medicine Pancreas Transplant Program provides compassionate and comprehensive care for people with end-stage pancreatic disease. Physicians across the Pacific Northwest refer patients into our transplant specialists' care.

We have a long history of combined kidney and pancreas transplantation and performed the greatest number of combined kidney/pancreas transplants in the region. In addition, we also perform both pancreas after kidney transplants and solitary pancreas transplants. Patients are evaluated and treated by a multidisciplinary team of nephrology and surgery specialists, who are focused on diabetes-related and other conditions that threaten pancreas function.

We expertly treat common and rare conditions

Candidates for pancreas transplant experience conditions such as:

- Severe complications of diabetes, such as syncope and seizures
- Type I diabetes with renal failure
- Type I diabetes and only partially impaired renal function
- Insulin-dependent diabetes with a successful prior kidney transplant

In such scenarios, pancreas transplant has several benefits:

- Eliminates the need for insulin therapy and the dangers of hypoglycemia
- Ends diabetes-caused restrictions to diet and exercise
- Reduces diabetic complications in the recipient's own or transplanted kidneys
- Significantly improves quality of life and prolongs survival

(over)



UW Medicine has performed over 6,000 organ transplants across our pancreas, kidney, liver, heart and lung transplant programs.

Why patients seek our care

Our capability with pancreas transplantation is demonstrated by our proficiency with kidney-pancreas transplants, outlined in these data points:

Volume of experience: From 7.1.11-6.30.13 to, our program's surgeons performed 15 kidney-pancreas transplants, the most transplants within the Pacific Northwest during that span, according to the Scientific Registry of Transplant Recipients (SRTR).

Shorter waits: Among kidney-pancreas transplant candidates at UW Medicine (7.1.2007-6.30.2010), 68.4 percent had received donor organs by one year; this figure was 39.6 for all programs nationally, the SRTR reported.

Research: Patients transplanted at UW Medicine programs have ample opportunities to participate in multiple research trials aimed at better understanding of disease and refinement of treatments.

Managing patients' health: Among candidates for kidney-pancreas transplant between 1.1.2011-12.31.2011, none at UW Medicine died on the waiting list after twelve months, vs. 3 percent nationwide, the SRTR reported. This demonstrates our ability to keep patients viable for transplant - an ability enhanced by our long-established Diabetes Care Center.

Quality of Transplant: In the most recent span for which the SRTR provided data, UW Medicine kidney-pancreas transplant patients' post-op survival aligned comparably with national averages: one month, 100 percent; one year, 95.6 percent; and three year, 90.4 percent post-op survival aligned comparably with national averages: one month, 98.6 percent; one year, 95.6 percent; and three year, 87.9. percent.

