



Trillium
Gift of Life
Network

Ontario's Referral and Listing Criteria for Paediatric Kidney Transplantation

Version 2.0

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Paediatric Kidney Transplantation Referral & Listing Criteria

PATIENT REFERRAL CRITERIA:

The patient referral criteria are guidelines which a Health Care Provider would utilize to refer a patient to a transplant center for assessment. Paediatric patients should be referred for evaluation by the transplant program once renal replacement therapy is expected to be required within the next 12 months. In some circumstances, patients may need to be referred earlier. Patients expected to require urological re-construction prior to transplant should be referred up to 1-2 years prior to the expected time that renal replacement therapy will be necessary. Patients already requiring dialysis should be referred for transplant evaluation as soon as it is medically indicated.

The criteria below are the agreed upon conditions for which a patient should be referred for a kidney transplant assessment.

- 1) **Progressive Chronic Kidney Disease:** Referral for kidney transplantation should be considered for patients with progressive Chronic Kidney Disease.
- 2) **End Stage Renal Disease (ESRD):** Referral for kidney transplantation should be considered for patients with End Stage Renal Disease (ESRD).

PATIENT LISTING INDICATIONS:

In general, listing for kidney transplantation may be considered for all patients with end-stage renal disease provided no absolute contraindications exist. Each patient is assessed individually for their suitability for kidney transplantation by the kidney transplant program. Eligibility should be determined on medical and surgical grounds and should not be based on social status, gender, race or personal or public appeal.

A patient who does not meet the criteria for transplantation may request a second opinion from an alternative program able to assess the relative risks and benefits of kidney transplantation.

RELATIVE LISTING CONTRAINDICATIONS:

The following are conditions relating to the paediatric kidney candidate that constitute relative contraindications to kidney transplantation. While each patient is evaluated on an individual basis, the presence of one or more of the following will often preclude acceptance as a candidate for kidney transplantation.

- 1) **Active Disease:** Active disease must be in remission or resolved prior to being eligible for transplantation. Diseases that require this consideration may include but are not limited to:
 - a. Active glomerular disease should be in remission;
 - b. Vasculitis should be inactive for 6-12 months off cytotoxic agents;
 - c. Anti-GBM should be inactive for at least 6 months post-treatment;
 - d. HUS or TTP patients should defer transplant until disease process is inactive;
 - e. Wilm's Tumour must be at least 1 year post-active treatment.
- 2) **Proteinuria:** Some patients with proteinuria should have the condition resolved prior to transplant. Patients with severe proteinuria may require a nephrectomy prior to transplant (e.g. congenital nephrotic syndrome).
- 3) **Weight and Height:** It is preferred that patients undergo transplantation when they are above 10kg and above 80cm, but there may be some exceptions.

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