Pancreas transplantation in Singapore

Requisites for Successful Pancreas Transplantation in Singapore

Introduction

While renal transplantation has been performed for over 50 years and organ transplantation for over 10 years in Singapore, there remains a disparity in organ transplantation programmes in Singapore and in the neighbouring region. However, we are exploring the feasibility of a harmonised model of organ transplantation in Singapore.

Pancreas transplants have been performed for over 40 years and have not required a temporary dialysis.1,2 It has been shown that dialysis survival in patients with diabetes and renal failure has shown significant improvements over the last 3 decades with significant improvements in functional outcomes and some studies reporting a lower mortality than in the transplant group.3

A combination of islet-enriched grafts with immunosuppressor protocols. Worldwide, about 1,000 pancreas transplants take place annually, according to the International Pancreas Transplant Registry (IPTR) and the University of Arizona. To date, more than 20,000 pancreas transplants have been reported to the IPTR, with more than 22,000 patients currently living with a pancreas transplant outside the USA. The 1-year graft survival remains at 80% and the 10-year patient survival rates on 70%. The 5-year patient survival rate exceeds 80% and the 10-year pancreas graft survival is about 80% for autologous pancreas renal recipients.4

Indications

The main objectives of pancreas transplantation are to achieve an independent, to improve quality of life and to reduce long-term diabetic complications.5

Tissue matching and Immunosuppression

Tissue matching for pancreas transplantation is performed similar to kidney transplantation, using matching blood group match. Matched donor and recipient is a less important parameter for pancreas transplantation than for kidney transplantation.

Inlet transplantation

Allergic rejection seems to be more common after pancreas transplantation than after kidney transplantation. This may be due to the differences in the nature of the transplanted organ. Successful pancreas transplants are not as common as successful kidney transplants. However, the use of immunosuppressants for kidney transplants is more common and is well established. A number of factors may contribute to this difference, including the use of immunosuppressants for kidney transplantation, the use of immunosuppressants for kidney transplantation, the use of immunosuppressants for kidney transplantation, the use of immunosuppressants for kidney transplantation, and the use of immunosuppressants for kidney transplantation.

References