Moustafellos et al. (2008)

DESIGN

Study design:

Retrospective record review

Country (countries):

lik

Number of centres:

1

Recruitment dates:

2004-2006

Length of follow-up:

-

Source of funding:

not reported

ARM(S)

ARM 1:

LifePort

Intervention: Machine perfusion

Number enrolled: 18

ARM 2:

University of Wisconsin cold

storage solution

Intervention: Cold storage Number enrolled: 18 PARTICIPANTS

Number enrolled:

Attrition / dropout:

-

Inclusion criteria:

Class III or IV DCD donors

Exclusion criteria:

ANALYSIS

Primary outcome measure:

Immediate renal function

Secondary outcome measure(s):

Delayed graft function Length of hospitalisation

Mean creatinine levels at discharge

Method of assessing outcomes:

DGF not defined

CHADA	CTEDICTICS	OF PARTICIPANTS	

CHARACTERISTICS OF FA	KIIOII AIVIO										
	LifeF	LifePort					Wisconsin o	Comparison			
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P
Age years -recipient	18	-	36.3[a]	0	18	-	54.5[b]	0	-18.2	0	<0.001[c]
Gender (n male)	18	13	-	-	18	10	-	-	-	-	-
HLA mismatches	18	-	2.4	0	18	-	2.1	0	-	-	-

Notes

- [a] range (20-66)
- [b] range (36 -69)
- [c] student's t-test (calculated by reviewer)

RESULTS											
	LifeF	Port				ersity of age solu	Wisconsin d	Comparison			
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Cold ischemia (mins)	18	-	909	-	18	-	999	-	-90	0	<0.001[b]
Creatinine (umol/L at discharge)	18	-	385.6	-	18	-	503.1	-	-118	0	<0.001[b]
Death due to infection	18	1	-	-	18	0	-	-	3	4.96	0.468[a]
DGF RR	18	5	-	-	18	16	-	-	0.313	1.48	<0.001[a]
Hospitalisation (days)	18	-	8.1	1.8	18	-	14.1	3.1	-6	0.845	<0.001[b]
IRF	18	13	-	-	18	2	-	-	6.5	1.98	<0.001[a]
Rejection of graft	18	0	-	-	18	0	-	-	1	7.2	1.000[a]
LOSS OF GRAFT											
Post-operative period	18	0	-	-	18	0	-	-	1	7.2	1.000[a]
Surgical technique/preparation	18	-	-	-	18	0	-	-	1	7.2	1.000[a]

Notes

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

1. Were inclusion criteria appropriate?

YES

2. Was the method of selection reported?

NO

3. Was the method of allocation reported?

NO

4. were I and C groups treated the same?

NO - the groups received different induction therapies

5. Were I and C groups similar at baseline?

NO - The cold storage group were older by an average of 18 years

6. Were assessors blinded to allocation?

NOT REPORTED

Moustafellos et al. (2007)

7. Was the follow up time adequate?

NOT REPORTED

8. How were missing data accounted for?

NOT REPORTED

9. Were confounders accounted for in analysis?

NOT REPORTED

10. Was inter centre variability reported?

NΑ

11. Are the results generalisable?

NO - method of allocation to group is unknown (not randomised), the groups have baseline differences and the numbers are small (36)

12. Are conflict of interests declared?

NO

Plata-Munoz et al. (2008)

DESIGN

Study design: cohort study

Country (countries):

LIIZ

Number of centres:

1

Recruitment dates:

March 2002 - December 2005

Length of follow-up:

1 year

Source of funding:

.

ARM(S)

ARM 1: LifePort

Intervention: Machine perfusion

Number enrolled: 30

ARM 2:

Marshall cold storage solution

Intervention: Cold storage Number enrolled: 30 **PARTICIPANTS**

Number enrolled:

Attrition / dropout:

Inclusion criteria: DCD Maastricht category III

<65 years

Exclusion criteria:

Donors: Diabetes

Primary renal disease Systemic sepsis Malignancy **ANALYSIS**

Primary outcome measure:

not specified

HLA matching

Secondary outcome measure(s):

Primary non function PNF
Delayed graft function DGF
Immediate graft function IGF

Acute rejection
1 year graft function
1 year graft survival
I year patient survival
Length of hospitalisation
Warm ischaemic time
Cold ischaemic time
Serum creatinine

Method of assessing outcomes:

DGF: the need for dialysis during the first week after transplantation, excluding those episodes of dialysis secondary to fluid overload or hyperkalaemia during the first 24 hours post-transplant.

	LifeF	ort			Mars	hall cold	storage sol	ution	Compa	rison	
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Implantation time (mins)	30	-	55[i]	-	30	-	40[h]	-	15	-	-
DONOR											
Age	30	-	41.6	2.9	30	-	40.3	2.6	1.3	0.711	0.073[o]
Cerebrovascular disease	30	11	-	-	30	12	-	-	0.917	1.39	0.791[a]
Creatinine clearance (umol/L)	30	-	95[j]	-	30	-	103[k]	-	-	-	-
Gender (n male)	30	17	-	-	30	18	-	-	0.944	1.24	0.793[a]
Hypertension	30	3	-	-	30	5	-	-	0.6	1.98	0.448[a]
HLA MISMATCHES											
0	30	1	-	-	30	1	-	-	1	4.02	1.000[a]
1-2	30	8	-	-	30	14	-	-	0.571	1.43	0.108[a]
3-4	30	18	-	-	30	15	-	-	1.2	1.27	0.436[a]
5-6	30	1	-	-	30	0	-	-	3	5.02	0.472[a]
INDUCTION THERAPY											
Alemtuzimab	30	15	-	-	30	1	-	-	15	2.72	<0.001[a
Anti-thymocite Globuline	30	2	-	-	30	28	-	-	0.0714	1.98	<0.001[a
Basiliximab	30	13	-	-	30	1	-	-	13	2.73	<0.001[a
MAINTENANCE THERAPY											
Prednisolone	30	15	-	-	30	30	-	-	0.508	1.2	<0.001[a
Tacrolimus/Sir + MMF	30	30	-	-	30	30[I]	-	-	1	1.03	1.000[a]
PRE-IMPLANTATION DATA											
Cold ischaemic time > 24 hrs	30	7	-	-	30	5	-	-	1.4	1.69	0.519[a]
Cold ischaemic time 14-18 hrs	30	9	-	-	30	8	-	-	1.13	1.51	0.774[a]
Cold ischaemic time 18-24 hrs	30	10	-	-	30	12	-	-	-	-	-
Cold ischaemic time (mins)	30	-	1115[e]	0	30	-	1076[d]	0	-	-	-
Cold ischaemic time <12 hrs	30	0	-	-	30	1	-	-	0.333	5.02	0.472[a]
Cold ischaemic time <14 hrs	30	4	-	-	30	4	-	-	1	1.93	1.000[a]
Warm ischaemic time (mins)	30	-	18[b]	-	30	-	18.5[c]	-	-0.5	-	-
RECIPIENT											
Age	30	-	47[m]	-	30	-	54[n]	-	-7	-	-
Days on waiting list	30	-	493[g]	-	30	-	410[f]	-	83	-	-
First transplant	30	25	-	-	30	29	-	-	0.862	1.09	0.085[a]
Gender (n male)	30	20	-	-	30	19	-	-	1.05	1.21	0.787[a]
Highly sensitized PRA (>85%)	30	2	-	-	30	1	-	-	2	3.31	0.554[a]
Pre-transplant antibodies	30	16			30	10	_	_	1.6	1.36	0.118[a]

Plata-Munoz et al. (2008)

[b]	Median	inter-auartile	range	(13-30)

- [c] Median, inter-quartile range (15-23)
- [d] Median, inter-quartile range (876-1320)
- [e] Median, inter-quartile range (918-1363)
- [f] Median, range (176-683)
- [g] Median, range (291-1220)
- [h] Median, range (32-60)
- [i] Median, range (43-630
- [j] Median, range (65-106)
- [k] Median, range (69-120)
- [I] MMF Mycophenolate of Mophetil
- [m] range 20 69 years
- [n] range 34 76 years
- [o] student's t-test (calculated by reviewer)

RESULTS											
	LifeF	ort			Mars	shall cold	d storage so	lution	Compa	rison	
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Acute rejection	30	4	-	-	30	2	-	-	2	2.29	0.389[a]
Creatinine (umol/L at 1 month)	30	-	199	20	30	-	282	33	-83	7.05	<0.001[b]
Creatinine day 7 (umol/L)	30	-	259	27	30	-	461	33	-202	7.78	<0.001[b]
GF 1 year	30	-	154	9	30	-	193	25	-39	4.85	<0.001[b]
GF 6 months	30	-	163	10	30	-	201	21	-38	4.25	<0.001[b]
Graft loss	30	1	-	-	30	1	-	-	1	4.02	1.000[a]
Graft survival (1 year)	30	30	-	-	30	28	-	-	1.07	1.06	0.237[a]
Graft survival (2 year)	30	29	-	-	30	27	-	-	1.07	1.07	0.301[a]
Hospitalisation (days)	30	-	10	-	30	-	14	-	-4	-	-
IRF	30	17	-	-	30	4	-	-	4.25	1.64	<0.001[a]
Patient loss	30	1	-	-	30	1	-	-	1	4.02	1.000[a]
Patient survival (1 year)	30	30	-	-	30	28	-	-	1.07	1.06	0.237[a]
Patient survival (2 year)	30	29	-	-	30	27	-	-	1.07	1.07	0.301[a]
PNF	30	0	-	-	30	0	-	-	-	-	-
Serum Creatinine mmol/dl (1 year)	30	-	112	14.9	30	-	184	23	-72	5	<0.001[b]
DGF											
DGF total	30	16	-	-	30	25	-	-	0.64	1.21	0.012[a]
First 15 transplants	30	8	-	-	30	14	-	-	0.571	1.43	0.108[a]
Second 15 transplants	30	8	-	-	30	12	-	-	0.667	1.46	0.273[a]

Notes

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

1. Were inclusion criteria appropriate?

YES

2. Was the study prospective

YES

3. Was method of selection reported?

NO

4. Was the method of allocation reported?

YES

5. Were I and C groups treated the same other than the intervention?

UNCLEAR

6. were I and C groups similar at baseline?

NO - The machine preservation recipients were younger

7. Were I and C groups assessed the same?

UNCLEAR

8. Was there a power calculation?

NO - Not applicable

9. Were assessors blind to allocation?

UNCLEAR

10. Was follow up time adequate to show outcomes to change?

Plata-Munoz et al. (2008)

11. Was analysis by ITT?

UNCLEAR

12. Was attrition reported?

NO

13. Were missing data accounted for?

UNCLEAR

14. Were confounders accounted for in analysis?

UNCLEAR

15. Was inter centre variability reported?

NΑ

16. Are the results generalisable?

PARTIALLY - To DCD III donors

17. Was ethical approval given?

NOT REPORTED

18. Were conflict of interest declared?

NO

Guarrera et al. (2007)

DESIGN

Study design:

Retrospective record review

Country (countries):

Number of centres:

1

Recruitment dates:

Dec 2001 - Sep 2006

Length of follow-up:

1 year

Source of funding:

ARM(S)

ARM 1:

RM3

Intervention: Machine perfusion

Number enrolled: 280

ARM 2: LifePort

Intervention: Machine perfusion

Number enrolled: 305

PARTICIPANTS

Number enrolled: 774

Attrition / dropout:

190 kidneys were discarded after storage (RM3 = 98 (26%), LifePort = 91 (23%), ns)

Inclusion criteria:

ECD:

Donor age > 60 years Donor age > 50 -59 + hypertension Diabetes > 5 years

GFR < 70 ml/min or an admit serum

creatinine of >1.5 mg/dl

Any DCD

a serum creatinine level that doubles

from admit to final

Other: prolonged cold ischaemia, disseminated intravascular

coagulopathy

Exclusion criteria:

ANALYSIS

Primary outcome measure:

DGF

Secondary outcome measure(s):

Graft function, 6 months, 1 year Graft survival

Primary non-function Recipient 1 year SCr (mg/dL)

Method of assessing outcomes:

Abstract and poster only

CHARACTERISTICS OF PARTICIPANTS													
	RM3				LifeP	ort		Comparison					
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р		
DONOR													
Age years	378	-	52[g]	-	396	-	51[d]	-	1	-	[h]		
DCD	378	75	-	-	396	96	-	-	0.851	1.14	0.213[a]		
Hx of Hypertension	378	185	-	-	396	198	-	-	0.979	1.08	0.769[a]		
ETHNIC GROUP - DONOR													
African American	378	91	-	-	396	103	-	-	0.962	1.12	0.744[a]		
Caucasian	378	249	-	-	396	253	-	-	1.07	1.03	0.038[a]		
Hispanic	378	34	-	-	396	32	-	-	1.16	1.26	0.528[a]		
Other	378	4	-	-	396	8	-	-	0.545	1.83	0.309[a]		
RECIPIENT													
Admit creatinine	378	-	1[c]	0.3	396	-	1.1[b]	0.5	-0.1	0.0338	0.003[h]		
Age years	378	-	52.4[f]	-	396	-	50.5[e]	-	1.9	-	[h]		

- chi-square test (calculated by reviewer) [a]
- range 0.2 15.3 [b]
- [c] range 0.2 - 2.3
- range 11 -79 years [d]
- [e] range 11-79
- range 2-80 [f]
- range 2-80 years [g]
- student's t-test (calculated by reviewer)

RESULTS													
	RM3				LifeP	ort		Comparison					
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р		
Cold ischemia (hours)	378	-	23[m]	-	396	-	24.3[1]	-	-1.3	-	[n]		
Creatinine 1 year (mg/dL)	289	-	1.91	0.9	305	-	1.83	1.1	0.08	0.0823	0.331[n]		
DCD	280	-	-	-	305	-	-	-	0.851	1.14	0.213[a]		
DGF	289	90	-	-	396	162	-	-	0.761	1.11	0.009[a]		
Discard rate	378	98	-	-	396	91	-	-	1.13	1.13	0.340[a]		
Flow of solution (CC/min)	280	-	129[k]	-	305	-	145[j]	-	-16	-	[n]		
PNF	378	11	-	-	396	8	-	-	1.44	1.58	0.424[a]		
Renal resistance (map/flow)	280	-	0.32[b]	-	305	-	0.28[d]	-	0.04	0	<0.001[n]		
Total cold ischaemia (hours)	378	-	23	-	398	-	24.3	-	-1.3	0	<0.001[n]		
Transplanted > 60 yrs	378	92	-	-	396	85	-	-	1.13	1.14	0.341[a]		

Guarrera et al. (2007)

	RM3					LifePort				Comparison		
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P	
GRAFT FUNCTION												
1 year	378	347	-	-	396	339	-	-	1.07	1.03	0.007[a]	
Final creatinine	378	-	1.46[c]	0.8	396	-	1.5[e]	0.9	-0.04	0.0611	0.513[n]	
Glomerular filtration rate	378	-	91.2[i]	-	396	-	95[h]	-	-3.8	-	[n]	
GRAFT SURVIVAL												
1 year	378	366[f]	-	-	396	367[g]	-	-	1.04	1.02	0.010[a]	
PATIENT SURVIVAL												
1 year	378	366	-	-	396	367	-	-	1.04	1.02	0.010[a]	

Notes

- chi-square test (calculated by reviewer) [a]
- range 0.05-9.99
- range 0.2 4.6 [c]
- range 0.28-1.06 [d]
- range 0.4 10.8 [e]
- [f] range 0.7-10.6
- [g] range 0.8-11.3
- range 17-198
- [h]
- [i] range 23.8-182
- range 39-199 [j] range 5-218
- [k]
- [1] range 8-58
- [m] range 9-47.5
- student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

Were inclusion criteria appropriate?

2. Was the method of selection reported?

Was the method of allocation reported?

4. were I and C groups treated the same?

UNCLEAR

Were I and C groups similar at baseline?

6. Were assessors blinded to allocation?

NOT REPORTED

7. Was the follow up time adequate?

NOT REPORTED

8. How were missing data accounted for?

NOT REPORTED

9. Were confounders accounted for in analysis?

NOT REPORTED

10. Was inter centre variability reported?

11. Are the results generalisable?

PARTIALLY - As the study was not randomised and use of machines sequential other variables may have influenced the outcomes

12. Are conflict of interests declared?

NO

Kazimi et al. (2007)

DESIGN

Study design:

Retrospective record review

Country (countries):

USA

Number of centres:

1

Recruitment dates:

Feb 2005 - Nov 2006

Length of follow-up: not reported

Source of funding:

not reported

ARM(S)

ARM 1:

Lifeport

Intervention: Machine perfusion

Number enrolled: 52

ARM 2: RM3

Intervention: Machine perfusion

Number enrolled: 37

PARTICIPANTS

Number enrolled:

Attrition / dropout:

-

Inclusion criteria:

Renal allographs brought in or handled by the perfusion laboratory

that were either: kidney kidney/liver kidney/pancreas

Exclusion criteria:

_

ANALYSIS

Primary outcome measure:

Graft survival- GS

Secondary outcome measure(s):

Post-transplant dialysis length of hospital stay rate of improvement in creatinine

Method of assessing outcomes:

Abstract and poster only

Outcome data were from the transplant registry database. Analysis used SPSS. Chi-square and Mann-Whitney tests were used for group comparisons, p<0.05 was considered significant.

The LifePort machine has been used most recently, therefore there are issues about confounding variables and bias

CHARACTERISTICS OF PARTICIPANTS												
	Lifep	ort			RM3				Compa	rison		
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р	
Age years -recipient	52	-	48	-	37	-	46	-	2	-	[b]	
DONOR -age	52	-	30	-	37	-	32	-	-2	-	[b]	
DONOR- terminal creatinine	52	-	1	-	37	-	1.1	-	-0.1	-	[b]	
Pre-op Creatinine - recipient	52	-	5.4	-	37	-	8.2	-	-2.8	-	[b]	
Sex (n male)-recipient	52	42	-	-	37	20	-	-	1.49	1.18	0.007[a]	
DONOR TYPE												
BSD	52	51	-	-	37	36	-	-	1.01	1.03	0.807[a]	
DCD	52	1	-	-	37	1	-	-	0.712	4.05	0.807[a]	
ETHNIC GROUP - RECIPIENT												
black	52	8	-	-	37	11	-	-	0.517	1.51	0.104[a]	
Other	52	6	-	-	37	2	-	-	2.13	2.2	0.319[a]	
White	52	38	-	-	37	24	-	-	1.13	1.16	0.406[a]	
TRANSPLANT TYPE												
kidney or kidney/pancreas (import)	52	4	-	-	37	6	-	-	0.474	1.84	0.210[a]	
kidney or kidney/pancreas (local)	52	29	-	-	37	27	-	-	-	-	-	
kidney/liver (local)	52	19	-	-	37	4	-	-	3.38	1.66	0.006[a]	

Notes

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

RESULTS												
	Lifep	ort			RM3			Comparison				
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р	
% change in creatinine at 48 hrs post Tx	52	-	28	-	37	-	35	-	-7	-	[b]	
% change in creatinine at hospital discharge	52	-	65	-	37	-	71	-	-6	-	[b]	
Hospitalisation (days)	52	-	15	-	37	-	9	-	6	-	[b]	
post transplant dialysis	52	2	-	-	37	2	-	-	0.712	2.66	0.726[a]	
GRAFT SURVIVAL												
30 days	52	49	-	-	37	36	-	-	0.968	1.04	0.491[a]	
90 days	41	37	-	-	36	35	-	-	0.928	1.06	0.215[a]	

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

Kazimi et al. (2007)

ASSESSMENT OF STUDY QUALITY

1. Were inclusion criteria appropriate?

UNCLEAR - This was a poster presentation, therefore information is limited

2. Was the method of selection reported?

YES

3. Was the method of allocation reported?

NO

4. were I and C groups treated the same?

UNCLEAR

5. Were I and C groups similar at baseline?

NO - There were more men in the RM3 group (p<0.01) and more participants in the LifePort group (p<0.02)

6. Were assessors blinded to allocation?

NOT REPORTED

7. Was the follow up time adequate?

NOT REPORTED

8. How were missing data accounted for?

NOT REPORTED

9. Were confounders accounted for in analysis?

NOT REPORTED

10. Was inter centre variability reported?

YES - in baseline characteristics but not in the results

11. Are the results generalisable?

NO - this was a non randomised study with the RM3 being used historically before the LifePort machine, other confounding variables may have biased the resul

12. Are conflict of interests declared?

NΟ

Opelz & Dohler (2007)

DESIGN

Study design:

Retrospective record review

Country (countries):

26 countries in Europe, North America and Australia

Number of centres:

195

Recruitment dates:

1990 - 2005

Length of follow-up:

3,6,12 months and then yearly

Source of funding:

-

ARM(S)

ARM 1:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 53560

ARM 2:

Marshall cold storage solution

Intervention: Cold storage Number enrolled: 5047

PARTICIPANTS

Number enrolled: 58607

Attrition / dropout:

attition / diopout.

Inclusion criteria:

kidneys transplanted from deceased donors

donors

Exclusion criteria:

ANALYSIS

Primary outcome measure:

Graft survival

Secondary outcome measure(s):

Death censored functional survival Method of assessing outcomes:

Analysis was limited to transplants between 1990 -2004. DGF data was not collected due to lack of standardisation. Graft survival rates and death censored functional graft suvuval rates were analysed with Kaplan Meier methods. Logistic regression and Cox regression analysis were used on covariables.

These data are a subset taken from the Collaborative Transplant Study www.ctstransplant.org

CHARACTERISTICS OF PARTICIPANTS

RESULTS												
		rsity of V je solutio	Visconsin on	cold	Marsh	nall cold	storage so	Comparison				
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р	
GRAFT SURVIVAL 3 YEARS FOLLOW U	<u>P</u>											
>36 hours of cold ischaemia	2486	1855	-	-	303	220	-	-	1.03	1.04	0.449[a]	
0-18 hours of cold ischaemia	24258	19746	-	-	2225	1782	-	-	1.02	1.01	0.129[a]	
19-24 hours of cold ischaemia	16147	12756	-	-	1636	1260	-	-	1.03	1.01	0.062[a]	
25-36 hours of cold ischaemia	11158	8636	-	-	944	709	-	-	1.03	1.02	0.107[a]	

Notes

[a] chi-square test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

- Were inclusion criteria appropriate?

 YES
- 2. Was the method of selection reported?

 VES
- 3. Was the method of allocation reported?
 NO
- 4. were I and C groups treated the same? UNCLEAR
- 5. Were I and C groups similar at baseline? UNCLEAR
- 6. Were assessors blinded to allocation? NOT REPORTED
- 7. Was the follow up time adequate?
 YES
- 8. How were missing data accounted for?

 NOT REPORTED
- 9. Were confounders accounted for in analysis? NOT REPORTED
- 10. Was inter centre variability reported?
- 11. Are the results generalisable?
 - YES Due to very large sample size

Opelz & Dohler (2007)

12. Are conflict of interests declared?

NC

Montalti et al. (2005)

DESIGN

Study design:

Prospective multi-centre RCT

Country (countries):

Italy

Number of centres:

2 Bologna and Palma

Recruitment dates:

Nov 1998 - Sept 2000

Length of follow-up:

5 years

Source of funding:

Not reported

ARM(S)

ARM 1:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 25

As 6 kidneys from the 30 randomised to this group were rejected it is assumed that one of the kidneys randomised to Celsior solution was changed to UW.

ARM 2:

Celsior cold storage solution

Intervention: Cold storage Number enrolled: 25

PARTICIPANTS

Number enrolled:

60

Attrition / dropout:

10 kidneys were rejected following histologic examination (UW =6, Celsior =4)

Inclusion criteria:

Deceased multiple organ donors > 60

youro

Exclusion criteria:

ANALYSIS

Primary outcome measure:

Delayed graft function DGF

Secondary outcome measure(s):

urinary output serum creatinine

Method of assessing outcomes:

Graft survival was calculated using Kaplan Meier analysis

DGF - the absence of life-sustaining renal function requriing one or more dialysis session withing the first days after transplantation

CHARACTERISTICS OF PARTIC	IPANTS										
		ersity o	f Wisconsin ıtion	cold	Cels	ior cold	storage solu	Comparison			
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
DONOR											
Age years	25	-	66.2	4.1	25	-	66.4	4.2	-0.2	1.17	0.865[a]
Terminal creatinine	25	-	1.2	0.9	25	-	1	0.3	0.2	0.19	0.297[a]
Urinary output per hour (mL)	25	-	248	130	25	-	236	60	12	28.6	0.677[a]
RECIPIENT											
Age years	25	-	54.5	7.4	25	-	55.2	8.3	-0.7	2.22	0.754[a]

Notes

[a] student's t-test (calculated by reviewer)

RESULTS											
		ersity of	Wisconsin tion	cold	Cels	ior cold	storage solu	ution	Comparison		
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
A mismatches	25	-	0.9	-	25	-	0.9	-	0	-	[b]
Acute rejection	25	2	-	-	25	2	-	-	1	2.61	1.000[a]
B mismatches	25	-	1.1	-	25	-	0.9	-	0.2	-	[b]
Cold ischaemic time (hours)	25	-	19	6.5	25	-	18	4.5	1	1.58	0.530[b]
DGF	25	13	-	-	25	12	-	-	1.08	1.33	0.777[a]
DR mismatches	25	-	1.2	-	25	-	8.0	-	0.4	-	[b]
Panel reactive anitbodies	25	-	18.2	22.3	25	-	13.3	18.3	4.9	5.77	0.400[b]
Post -operative dialysis	25	-	3.1	4.9	25	-	2.2	3.8	-	-	-
Warm ischaemic time (mins)	25	-	46.9	17.9	25	-	42.4	11	4.5	4.2	0.290[b]
GRAFT SURVIVAL											
1 year	25	24	-	-	25	23	-	-	1.04	1.07	0.552[a]
5 years	25	22	-	-	25	20	-	-	1.1	1.13	0.440[a]

Notes

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

1. Are the study aims clearly described and focused?

YES

2. Is study design appropriate to answer these aims?

YES

3. Are there explicit inclusion and exclusion criteria for the study?

PARTIAL

4. Are methods of randomisation adequate?

NOT REPORTED

Montalti et al. (2005)

5. Was there concealed randomised allocation?

LINCLEAR

6. Are sample characteristics adequately described?

YES - Extended criteria donors

7. Are there significant differences between the cohorts?

NC

8. Was the follow up time adequate for outcomes to change?

YES

9. Do analyses attempt to control for confounders?

CAN'T TELL

10. Is there a power calculation?

CAN'T TELL

11. Is the sample size sufficient?

NOT ANALYSED

12. Is primary outcome measure objective?

OBJECTIVE

13. Are secondary outcome measures objective?

OBJECTIVE

14. Were outcome assessors blind to exposure status?

CAN'T TELL

15. Are drop-out rates similar between intervention and controls?

CAN'T TELL

16. was analysis by ITT

NOT REPORTED

17. Inter centre variability reported?

NO

18. Are the results generalisable?

PARTIALLY - The donors were over 60 years old, this may affect the quality of their kidneys

19. Was ethical approval given?

NOT REPORTED

20. Were all groups treated similarly?

CAN'T TELL

21. Were all participants accounted for?

Marcen et al. (2005)

DESIGN

Study design:

Retrospective record review

Country (countries):

Spain

Number of centres:

Recruitment dates: Jan 1997 - Oct 2001

Length of follow-up:

12 months

Source of funding:

ARM(S)

ARM 1:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 138

ARM 2:

Celsior cold storage solution Intervention: Cold storage

Number enrolled: 39

PARTICIPANTS

Number enrolled:

Attrition / dropout:

Inclusion criteria: Deceased donors Brain death diagnosed BSD

Exclusion criteria:

ANALYSIS

Primary outcome measure:

Delayed graft function DGF

Secondary outcome measure(s):

Primary non-fucntion PNF Serum creatinine Graft survival GS

Method of assessing outcomes:

Chi-squared test to compare categorical data, with t test and Mann-Whitney tests as indicated. Graft survival was clculated using the Kaplan -Meiter method.

CHARA	CTERIS	TICS OF	PARTIC	PANTS

		ersity of ge solu	Wisconsin	cold	Cels	ior cold	storage solu	Comparison			
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P
Age- donor (years)	138	-	42.3	16.9	39	_	38.1	12.5	4.2	2.46	0.090[b]
Age years -recipient	138	-	49.5	14.4	39	-	43.3	13	6.2	2.42	0.011[b]
DONOR- terminal creatinine	138	-	1.1	0.6	39	-	0.9	0.8	0.2	0.138	0.149[b]
RECIPIENT body mass index (kg/m2)	138	-	24.4	5.5	39	-	24	5.8	0.4	1.04	0.701[b]
RECIPIENT Sex (n male)	138	85	-	-	39	23	-	-	1.04	1.16	0.767[a]
RECIPIENT time on dialysis prior to Tx (years)	138	-	2.5	2.7	39	-	2	1.6	0.5	0.344	0.148[b]

- chi-square test (calculated by reviewer) [a]
- [b] student's t-test (calculated by reviewer)

Characteristic	N	k	Mean	SD
Age years -recipient	177	-	48.1	13.5
RECIPIENT Sex (n male)	177	107	-	-
RECIPIENT time on dialysis prior to Tx (years)	17	_	2.4	2.5

RESULTS University of Wisconsin cold Celsior cold storage solution Comparison storage solution Outcome Ν Mean SD k Mean SD Est SEM Р Acute rejection 138 23 39 2 138 39 Acute rejection RR 3.25 2.04 0.068[a] 39 Cold ischemia (hours) 138 43 16.9 17.5 3 7 Cold ischemia (hours) RR 138 39 0.6 0.696 0.390[b] 39 Creatinine (umol/L at 1 month) 138 1.9 0.9 1.5 0.5 Creatinine (umol/L at 1 month) RR 138 39 0.4 0.111 <0.001[b] Creatinine (umol/L at 12 months 39 1.35 0.4 1 63 Creatinine (umol/L at 12 months) 138 0.5 0.0769 Creatinine (umol/L at 12 months) RR 138 39 0.28 <0.001[b] DGF RR 39 9 0.064[a] DGF RR 138 54 39 1.7 1.36 Graft survival (12 months) 138 121 39 38 Graft survival (12 months) RR 138 39 0.9 1.04 0.075[a] PNF 138 8 39 1 PNF RR 39 2 26 2 84 138 0.417[a] 2 39 Rejection of graft 138 23 Rejection of graft RR 138 39 3.25 2.04 0.068[a]

[a]

- chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

Marcen et al. (2005)

ASSESSMENT OF STUDY QUALITY

1. Were inclusion criteria appropriate?

YES

2. Was the method of selection reported?

YES

3. Was the method of allocation reported?

NO

4. were I and C groups treated the same?

UNCLEAR

5. Were I and C groups similar at baseline?

NO - recipients in the UW group were older, there were many more people in the UW group

6. Were assessors blinded to allocation?

NOT REPORTED

7. Was the follow up time adequate?

YES

8. How were missing data accounted for?

NOT REPORTED

9. Were confounders accounted for in analysis?

NOT REPORTED

10. Was inter centre variability reported?

NA

11. Are the results generalisable?

PARTIALLY - This was not a RCT and so biases may have been present and the numbers in the two groups are very unbalanced

12. Are conflict of interests declared?

NC

Pedotti et al. (2004)

DESIGN

Study design:

Prospective multi-centre RCT

Country (countries):

Italy

Number of centres:

16

Recruitment dates:

March 2000- Dec 2001

Length of follow-up: 12 months

Source of funding:

-

ARM(S)

ARM 1:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 269

ARM 2

Celsior cold storage solution

Intervention: Cold storage Number enrolled: 172

PARTICIPANTS

Number enrolled:

Attrition / dropout:

-

441

Inclusion criteria:

Deceased multi-organ donors

Exclusion criteria:

non-multi organ donors from non NITp progamme centres from centres where included perfusion solutions not available

paediatric patients regrafts

transplants with missing or incomplete data on follow-up were excluded from analysis

ANALYSIS

Primary outcome measure:

not specified

Secondary outcome measure(s):

DGF PNF

Patient survival PS Graft survival GS Creatinine levels Urine output

Method of assessing outcomes:

Analysis was conducted by the NITp Reference Centre using SAS v 8. Statistical techniques used were t tests for continuous variables, chisquare forparametric variables. Log transformation was used when necessary. Survival was calculated using the actuarial method. Logistic multivariate analyses were performed to find the role of determinant factors on graft and patient surival.

	Unive stora	Celsi	or cold s	storage solu	Comparison						
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Age- donor (years)	269	-	45.4	17.2	172	-	46.1	17.2	-0.7	1.68	0.677[b]
Age years -recipient	269	-	46	13.6	172	-	45.3	14	0.7	1.35	0.605[b]
Cold ischaemic time (hours)	269	-	15.3	4.8	172	-	15.1	4.3	0.2	0.439	0.649[b]
HLA MISMATCHES (A, B, DR)											
0-1	269	47	-	-	172	24	-	-	1.25	1.26	0.327[a]
2-4	269	214	-	-	172	138	-	-	0.992	1.05	0.862[a]
5-6	269	8	-	-	172	10	-	-	0.512	1.59	0.142[a]
PANEL REACTIVE ANTIBODIES											
> 30%	269	9	-	-	172	7	-	-	0.822	1.64	0.692[a]
≤ 30%	269	260	-	_	172	165	-	-	1.01	1.02	0.692[a]

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

RESULTS												
		ersity of ge solut	Wisconsin ion	cold	Celsi	or cold s	storage solu	tion	Comparison			
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P	
Acute tubular necrosis	269	28	-	-	172	19	-	-	0.942	1.32	0.832[a]	
DGF	269	61	-	-	172	40	-	-	0.975	1.2	0.888[a]	
PNF	269	4	-	-	172	4	-	-	0.639	2.01	0.520[a]	
COMPLICATIONS												
Infection	269	12	-	-	172	7	-	-	1.1	1.59	0.844[a]	
Medical	269	38	-	-	172	31	-	-	0.784	1.25	0.272[a]	
none	269	155	-	-	172	85	-	-	-	-	-	
Rejection	269	59	-	-	172	31	-	-	1.22	1.22	0.320[a]	
Surgical	269	17	-	-	172	20	-	-	0.543	1.37	0.050[a]	
CREATININE												
day 1 (µmol/L)[b]	269	-	671.8	102.9	172	-	663	110.4	8.8	10.5	0.402[c]	
day 10 (µmol/L)[b]	269	-	246.6	-881.2	172	-	236.7	-549.4	9.9	68.1	0.885[c]	
day 15 (µmol/L)[b]	269	-	220.4	-847.7	172	-	200.8	-652.4	19.6	71.7	0.785[c]	
day 5 (µmol/L)[b]	269	-	371.3	-463.6	172	-	353.6	-451	17.7	44.5	0.691[c]	
GRAFT SURVIVAL												
1 month	269	258	-	-	172	165	-	-	1	1.02	0.992[a]	
1 year	269	245	-	-	172	162	-	-	0.967	1.03	0.233[a]	

Pedotti et al. (2004)

		University of Wisconsin cold storage solution					torage solu	Comparison			
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P
PATIENT SURVIVAL											
1 month	269	269	-	-	172	172	-	-	1	1	0.822[a]
1 year	269	263	-	-	172	171	-	-	0.983	1.01	0.177[a]
URINE OUTPUT											
day 1 (mL/24hrs)[b]	269	-	2520	259.4	172	-	2180	-93.68	340	17.4	<0.001[c]
day 10 (mL/24hrs)[b]	269	-	2500	159	172	-	2500	1024	0	78.7	1.000[c]
day 15 (mL/24hrs)[b]	269	-	2500	1305	172	-	2600	381.4	-100	84.7	0.239[c]
day 5 (mL/24hrs)[b]	269	-	2500	150.6	172	-	2600	1512	-100	116	0.388[c]

Notes

- chi-square test (calculated by reviewer) [a]
- [b] MEDIAN
- [c] student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

1. Are the study aims clearly described and focused?

2. Is study design appropriate to answer these aims?

3. Are there explicit inclusion and exclusion criteria for the study?

4. Are methods of randomisation adequate?

NO - from a list

5. Was there concealed randomised allocation?

6. Are sample characteristics adequately described?

7. Are there significant differences between the cohorts?

Was the follow up time adequate for outcomes to change?

9. Do analyses attempt to control for confounders?

CAN'T TELL 10. Is there a power calculation?

CAN'T TELL

11. Is the sample size sufficient?

NOT ANALYSED

12. Is primary outcome measure objective?

OBJECTIVE

13. Are secondary outcome measures objective?

14. Were outcome assessors blind to exposure status?

15. Are drop-out rates similar between intervention and controls?

CAN'T TELL

16. was analysis by ITT

NOT REPORTED

17. Inter centre variability reported?

18. Are the results generalisable?

YES

19. Was ethical approval given?

NOT REPORTED

20. Were all groups treated similarly?

21. Were all participants accounted for?

CAN'T TELL

Faenza et al. (2001)

DESIGN

Study design:

Prospective multi-centre RCT

Country (countries):

Italy

Number of centres:

Recruitment dates: Sept 1998 - Sept 2000

Length of follow-up:

2 years

Source of funding:

ARM(S)

ARM 1:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 88

Celsior cold storage solution Intervention: Cold storage

Number enrolled: 99

PARTICIPANTS

Number enrolled:

Attrition / dropout:

13 kidneys were not transplanted (UW = 6, C = 7); these were from marginal donors and rejected on histological grounds by the same pathologist

Inclusion criteria:

Donors and recipients > 15 years old multiple organ donors

Exclusion criteria:

recipient had already had a transplant

ANALYSIS

Primary outcome measure:

not specified

Secondary outcome measure(s):

Delayed graft function DGF Serum creatinine

Urinary output Post transplantation dialysis

Method of assessing outcomes:

univariate analyses with Mann-Whitney test and chi-square test to assess differences between groups were used. Graft survival was calculated using Kaplan Meier analysis.

CHARACTERISTICS OF PARTICIPANTS

	University of Wisconsin cold storage solution					ior cold	storage solu	Comparison			
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	P
Age- donor (years)	88	-	52.9	17.6	99	-	48.6	18.8	4.3	2.66	0.108[a]
Age years -recipient	88	-	46.6	11.4	99	-	46.9	11.7	-0.3	1.69	0.859[a]
DONOR terminal creatinine	88	-	1	0.5	99	-	1.1	8.0	-0.1	0.0965	0.301[a]
DONOR urinary output per hour (mL)	88	-	193.3	139.6	99	-	221.3	165.3	-28	22.3	0.211[a]
RECIPIENT Panel reactive antibodies	88	-	8	12	99	-	12.6	19.3	-4.6	2.32	0.049[a]

Notes

student's t-test (calculated by reviewer)

-	Ξ	0	ш	П	TS
м					

		ersity of age solu	Wisconsin tion	cold	Cels	ior cold	storage solu	ition	Comparison		
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
A mismatches	88	-	1.4	-	99	-	1.1	-	0.3	-	[b]
Acute rejection	88	13	-	-	99	12	-	-	-	-	-
B mismatches	88	-	1.1	-	99	-	1.3	-	-0.2	-	[b]
Cold ischemia (hours)	88	-	16.7	5	99	-	16.5	6.6	0.2	0.851	0.814[b]
DGF	88	30	-	-	99	31	-	-	1.09	1.23	0.686[a]
DR mismatches	88	-	8.0	-	99	-	8.0	-	0	-	[b]
Graft survival (2 year)	88	66	-	-	99	83	-	-	0.895	1.08	0.134[a]
Number of rejection episodes before discharge	88	-	-	-	99	-	-	-	1.22	1.45	0.595[a]
Post -operative dialysis	88	-	1.9	3.5	99	-	1	3.3	0.9	0.499	0.073[b]
Warm ischaemic time (mins)	88	-	35.1	14.2	99	-	38.3	14.1	-3.2	2.07	0.124[b]
COLD ISCHAEMIA > 17 HOURS											
Creatinine (mg/dL at discharge)	41	_	2.2	1.5	45	-	1.9	1.08	0.3	0.284	0.294[b]
Creatinine day 1 (mg/dL)	41	-	7.08	2.4	45	-	6.2	2.1	0.88	0.488	0.075[b]
Creatinine day 15 (mg/dL)	41	-	3.2	2.2	45	-	2.7	2.02	0.5	0.457	0.277[b]
Creatinine day 3 (mg/dL)	41	-	6.2	3.3	45	-	5.1	3.4	1.1	0.723	0.132[b]
Creatinine day 5 (mg/dL)	41	_	5.3	3.4	45	-	4.6	3.3	0.7	0.724	0.336[b]
Creatinine day 7 (mg/dL)	41	_	4.7	3.4	45	-	4.2	3.3	0.5	0.724	0.492[b]
DGF	41	18	-	-	45	18	-	_	1.1	1.29	0.714[a]
Post-transplantation dialysis rate	41	-	3.9	-	45	-	2.9	-	1	-	[b]
Urinary output discharge (mL/24hrs)	41	-	1754	1153	45	-	1971	1210	-217	255	0.397[b]
Urine output day 1 (mL/24hrs)	41	-	1568	1549	45	-	2265	2575	-697	454	0.128[b]
Urine output day 15 (mL/24hrs)	41	-	1731	1121	45	-	1924	1236	-193	254	0.449[b]
Urine output day 3 (mL/24hrs)	41	-	1622	1477	45	-	1633	1472	-11.2	318	0.972[b]
Urine output day 5 (mL/24hrs)	41	-	1627	1671	45	-	1730	1138	-104	311	0.740[b]
Urine output day 7 (mL/24hrs)	41		1651	1228	45	_	1824	1174	-172	260	0.509[b]

- chi-square test (calculated by reviewer)
- student's t-test (calculated by reviewer) [b]

Faenza et al. (2001)

ASSESSMENT OF STUDY QUALITY

1. Are the study aims clearly described and focused?

VES

2. Is study design appropriate to answer these aims?

YES

3. Are there explicit inclusion and exclusion criteria for the study?

YES

4. Are methods of randomisation adequate?

NOT REPORTED

5. Was there concealed randomised allocation?

UNCLEAR

6. Are sample characteristics adequately described?

YES

7. Are there significant differences between the cohorts?

NO

8. Was the follow up time adequate for outcomes to change?

YES

9. Do analyses attempt to control for confounders?

CAN'T TELL

10. Is there a power calculation?

CAN'T TELL

11. Is the sample size sufficient?

NOT ANALYSED

12. Is primary outcome measure objective?

OBJECTIVE

13. Are secondary outcome measures objective?

OBJECTIVE

14. Were outcome assessors blind to exposure status?

CAN'T TELL

15. Are drop-out rates similar between intervention and controls?

YES

16. was analysis by ITT

NOT REPORTED

17. Inter centre variability reported?

NO

18. Are the results generalisable?

YES

19. Was ethical approval given?

NOT REPORTED

20. Were all groups treated similarly?

YES

21. Were all participants accounted for?

Moers et al. (2009)

DESIGN

Study design:

Prospective multi-centre RCT

Country (countries):

Netherlands, Belgium, Germany

Number of centres:

-

Recruitment dates: Nov 2005- Nov 2006

Length of follow-up:

1 year

Source of funding:

Organ Recovery Systems

ARM(S)

ARM 1: LifePort

Intervention: Machine perfusion

Number enrolled: 336

ARM 2

University of Wisconsin and some HTK

Intervention: Cold storage

Number enrolled: 336

UW was the preferred cold storage solution but HTK was allowed, data were not disaggregated

PARTICIPANTS Number enrolled:

1086

Attrition / dropout:

Excluded post randomisation & prior to storage: donor procdure cancelled = 28, one or both kidneys not transplantable = 140, combined organ offer =2, other reasons =40

MP exclutions: kidney rejected at transplant centre =4, technical failure of MP = 7, due to exclusion of contralateral organ = 10, death of contralateral organ recipient = 1, contralateral organ lost to follow up = 1.

Cold storage exclusions: kidney rejected at transplant centre = 10, due to exclusion of contralateral organ = 11, recipient died one day after transplantation (not related to transplant) = 1, lost to follow up = 1.

Inclusion criteria:

Deceased donors ≥16 years providing kidney pairs
BSD and DCD, Maastricht categories
III & IV

kidney pairs must go to different recipients

Exclusion criteria:

Donors > 60 years Multiple organ transplant of recipient Only one kidney from a donor transplanted

Recipients non-transplant related death in first week after transplant

ANALYSIS

Primary outcome measure:

Delayed graft function DGF

Secondary outcome measure(s):

Primary non-function Duration of DGF Serum creatinine Hyperkaliemia Calcineruin inhibitor toxicicty Duration of hospital stay Acute rejection Graft survival - 1 year Patient survival - 1 year

Method of assessing outcomes:

The study is powered to detect a 10% change in DGF at 80% with p<0.05, giving an expected sample size of N = 300.

The data will be analysed using posterior stratification of preservation time, HLA matches, recent PRA level, recipient age, 1st/retransplant, lenth of time on dialysis,donor type and donor age.

Correlation of perfusate function to post-transplant graft funtion and survival analysis.

There will also be a cost-benefit analysis with reference to graft outcome and survival. Fischers exact test used for discrete

variables
Mann-Whitney test used for
continuous variables

DATA WERE NOT ANALYSED AS

DGF: any dialysis requirment within 7 days post transplant Paired desgin; one kidney in the donor randomised to machine perfusion and the other automatically to cold

storage. Randomisation was carried out by Eruo Transplant at donor using block randomisation.

CHARACTERISTICS OF PARTICIPANTS

	LifePort				Unive HTK	ersity of	Wisconsin a	Comparison			
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Age years -recipient	336	-	53[e]	-	336	_	52[c]	-	1	-	[h]
Cold ischaemic time (hours)	336	-	15[g]	-	336	-	15[f]	-	0	-	[h]
Discard rate @ recipient centre	336	-	-	-	336	-	-	-	0.4	1.8	0.105[a]
Discard rate due to kidney quality @ recipient centre	336	4	-	-	336	10	-	-	-	-	-
HLA mismatches	336	54	-	-	336	50	-	-	1.08	1.2	0.670[a]
Pre-Tx dialysis duratation (years)	336	-	4.5[d]	-	336	-	4.4[b]	-	0.1	-	[h]
Previous transplants	336	77	-	-	336	71	-	-	1.08	1.16	0.576[a]
PANEL REACTIVE ANTIBODIES											
>84%	336	4	-	-	336	3	-	-	1.3	1.51	0.524[a]
0-5 %	336	297	-	-	336	304	-	-	0.977	1.03	0.380[a]
6-84%	336	35	_	-	336	29	_	-	1.22	1.12	0.082[a]

- [a] chi-square test (calculated by reviewer)
- [b] MEDIAN range (0.19-24)
- [c] MEDIAN range (2 -70)
- [d] MEDIAN range (0.15-18)
- [e] MEDIAN range (11-79)
- [f] MEDIAN range (2.5-29.7)
- [g] MEDIAN range (3.5-26.3)
 [h] student's t-test (calculated by reviewer)

Moers et al. (2009)

Characteristic	N	k	Mean	SD
Age- donor (years)	336	-	51[i]	-
DONOR BSD	336	294	-	-
DONOR DCD	336	42	-	-

Notes

[i] range (16 -81)

RESULTS											
	LifePort				University of Wisconsin and some HTK				Comparison		
Outcome	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
Acute rejection within 14 days	336	44	-	-	336	46	-	-	0.957	1.22	0.821[a]
CNI toxicity within 14 days	336	21	-	-	336	19	-	-	1.11	1.36	0.744[a]
Creatinine clearance @ day 14 (ml/mol)[b]	336	-	42	-	336	-	40	-	-	-	-
DGF	336	70	-	-	336	89	-	-	0.787	1.15	0.085[a]
DGF duration (days)[b]	336	-	10	-	336	-	13	-	-3	-	[c]
Functional DGF	336	77	-	-	336	101	-	-	0.762	1.14	0.036[a]
Graft survival (12 months)	336	329	-	-	336	316	-	-	1.04	1.02	0.011[a]
Graft survival (6 months)	336	329	-	-	336	319	-	-	1.03	1.02	0.038[a]
Hospitalisation (days)[b]	336	-	19	-	336	-	18	-	1	-	[c]
Patient survival (12 months)	336	326	-	-	336	326	-	-	1	1.01	1.000[a]
Patient survival (6 months)	336	329	-	-	336	329	-	-	1	1.01	1.000[a]
PNF	336	7	-	-	336	16	-	-	0.438	1.56	0.056[a]
<u>DGF</u>											
Cold ischemia (hours)	336	-	-	-	336	-	-	-	1.07	0	.002
DCD donor vs. BSD donor	336	-	-	-	336	-	-	-	10.1	0	< 0.001
Donor age (yrs)	336	-	-	-	336	-	-	-	1.03	0	.003
Duration of pre-transplant dialysis (yrs)	336	-	-	-	336	-	-	-	1.07	0	.06
HLA mismatches	336	-	-	-	336	-	-	-	1.11	0	.17
MP vs. CS	336	-	-	-	336	-	-	-	0.63	0	.02
PRA levels (0-5%, 6-84%, >84%)	336	-	-	-	336	-	-	-	1.01	0	.38
Recipient age (yrs)	336	-	-	-	336	-	-	-	1.01	0	.21
Re-transplant vs. first transplant	336	-	-	-	336	-	-	-	2.75	0	<0.001
GRAFT FAILURE											
Cold ischemia (hours)	336	-	_	_	336	-	-	-	1.04	0	0.28
DCD donor vs. BSD donor	336	-	_	-	336	-	-	-	1.32	0	0.67
Donor age (yrs)	336	-	-	-	336	-	-	-	1.06	0	0.002
Duration of pre-transplant dialysis (yrs)	336	-	_	-	336	-	-	-	0.97	0	0.63
HLA mismatches	336	_	_	_	336	_	_	_	1.22	0	0.15
MP vs. CS	336	-	_	_	336	-	-	_	0.46	0	0.05
Recipient age (yrs)	336	_	_	_	336	-	-	_	0.97	0	0.07
Re-transplant vs. first transplant	336	_	-	_	336	-	-	-	1.85	0	0.13
•											

Notes

- [a] chi-square test (calculated by reviewer)
- [b] MEDIAN
- [c] student's t-test (calculated by reviewer)

ASSESSMENT OF STUDY QUALITY

1. Are the study aims clearly described and focused?

YES

2. Is study design appropriate to answer these aims?

YES

3. Are there explicit inclusion and exclusion criteria for the study?

YES

4. Are methods of randomisation adequate?

YES - Block randomisation, separate lists for each region. Kidneys were allocated from a central office. Switiching allowed between arms if MP not possible for technical reasons

5. Was there concealed randomised allocation?

YES

6. Are sample characteristics adequately described?

Moers et al. (2009)

7. Are there significant differences between the cohorts?

NC

8. Was the follow up time adequate for outcomes to change?

YES

9. Do analyses attempt to control for confounders?

YES - MATCHED COHORTS

10. Is there a power calculation?

YES

11. Is the sample size sufficient?

YES

12. Is primary outcome measure objective?

OBJECTIVE

13. Are secondary outcome measures objective?

OBJECTIVE

14. Were outcome assessors blind to exposure status?

YES

15. Are drop-out rates similar between intervention and controls?

V-C

16. was analysis by ITT

NO

17. Inter centre variability reported?

NO

18. Are the results generalisable?

YES

19. Was ethical approval given?

YES

20. Were all groups treated similarly?

CAN'T TELL

21. Were all participants accounted for?

CAN'T TELL

Watson (2006)

DESIGN

Study design:

Prospective multi-centre RCT

Country (countries):

UK

Number of centres:

Recruitment dates:

Length of follow-up:

5 vears

Source of funding:

Novartis Pharma and Organ Recovery

RECIPIENT HLA MISMATCH LEVEL

Systems

ARM(S)

ARM 1: LifePort

Intervention: Machine perfusion

Number enrolled: 45

43 kidneys were actually treated with

ARM 2:

University of Wisconsin cold storage solution

Intervention: Cold storage Number enrolled: 45

47 kidneys were actually treated with CS

PARTICIPANTS

Number enrolled:

93

Attrition / dropout:

3 discarded: 1= anatomical reasons, 2=failed to receive allocated treatment

Inclusion criteria:

DCD donors

> 17 years olf

Exclusion criteria:

Recipients are excluded if they show: Positive crossmatch Previous non-renal transplant

No consent

ANALYSIS

Primary outcome measure:

Delayed graft function DGF

Secondary outcome measure(s): Measured at 3 and 12 months and 5

years:

Creatinine reduction ratio day 0 -5

(CRR05) <30%

Creatinine reduction ratio day 1 -2 (CRR2) <30%

Mean creatinine reduction ratios

Patient survival Graft survival

Renal function measured using

calculated GFR

Non function rate

Time to last dialysis post transplant Acute rejection incidence

Cost comparison at one year

Method of assessing outcomes:

The kidneys from each donor are randomised to each treatment group, by the left or right kidney and by order of transplant.

A power calcuation showed that 205 participants would give 90% power to detect a difference between the groups in a fixed sample size analysis. However, for ethical reasons a sequential design was adopted where patients are recruited until there is sufficient evidence, based on the primary endpoint, to reject the null hypothesis ie that there is no difference between the two methods of preservation.

Randomisation is through the duty office of Organ Donation and Transplantation Directorate of NHS Blood and Transplant who also monitor data collection and determine the end of the study.

Analysis was by ITT. As the data are paired McNemar's extact test is used to determine if graft function is associated with the method of kidney storage.

DGF - the need for dialysis in the first 7 days following kdiney transplantation

CHARACTERISTICS OF PARTICIPANTS LifePort University of Wisconsin cold Comparison storage solution Characteristic Ν k Mean SD Ν k Mean SD Fst SEM Р RECIPIENT Age years 45 50.3 13.2 45 48.6 13.9 1.7 2.86 0.553[b] First transplant 39 40 -[a] 31 33 Gender (n male) -[a] Height (cm) 45 168.9 10.5 44 172.6 9.6 -3.7 2.13 0.086[b] Months of pre-transplant dialysis 44 52.8 53.8 45 44 4 39.1 8.4 9.99 0.403[b] 6 5 Re-graft 4 5 Sensitised -[a] Serum albumin at transplant (gm/l) 45 39 5.4 45 39.1 6.4 -0.1 1.25 0.936[b] Serum calcium (corrected for albumin) pre-tx 44 2.3 0.1 44 2.3 0.2 0 0.0337 1.000[b] 701.7 292 677.8 227.2 23.9 55.8 0.669[b] Serum creatinine pre-transplant (umol/I) 44 44 Serum urea at transplant (mmol/l) 44 17.1 8.1 44 15.3 1.8 1.61 0.268[b] weight (kg) 45 73.2 13.5 45 77 14.6 -3.8 2.96 0.203[b] RECIPIENT ETHNICITY Non-white 7 -[a] White 41 38 -[a]

Watson (2006)

	LifePort				University of Wisconsin cold storage solution				Comparison		
Characteristic	N	k	Mean	SD	N	k	Mean	SD	Est	SEM	Р
3	27	-	-	-	23	-	-	-	-	-	-[a]
4	6	-	-	-	7	-	-	-	-	-	-[a]
RECIPIENT TYPE OF DIALYSIS AT ADMISSION	_										
Haemodialysis	28	-	-	-	28	-	-	-	-	-	-[a]
No dialysis	3	-	-	-	3	-	-	-	-	-	-[a]
Peritoneal dialysis	14	-	-	-	14	-	-	-	-	-	-[a]

Notes

- [a] chi-square test (calculated by reviewer)
- [b] student's t-test (calculated by reviewer)

RESULTS

(Academic-in-confidence information removed)

ASSESSMENT OF STUDY QUALITY

1. Are the study aims clearly described and focused?

YES

2. Is study design appropriate to answer these aims?

YES

3. Are there explicit inclusion and exclusion criteria for the study?

YES

4. Are methods of randomisation adequate?

YES - kidneys are randomised to treatment group and order of transplantation

5. Was there concealed randomised allocation?

YES

6. Are sample characteristics adequately described?

YES

7. Are there significant differences between the cohorts?

NO

- 8. Was the follow up time adequate for outcomes to change?
 - YES this is an ongoing 5 year trial for which we have 3 month data
- Do analyses attempt to control for confounders?

N/A

Watson (2006)

9. Do analyses attempt to control for confounders?

NI/A

10. Is there a power calculation?

YES

11. Is the sample size sufficient?

VEC

12. Is primary outcome measure objective?

OBJECTIVE

13. Are secondary outcome measures objective?

OBJECTIVE

14. Were outcome assessors blind to exposure status?

CAN'T TELL

15. Are drop-out rates similar between intervention and controls?

YES - no drop out at 3 months

16. was analysis by ITT

YES

17. Inter centre variability reported?

YES - this is planned but not yet available

18. Are the results generalisable?

VES

19. Was ethical approval given?

YES

20. Were all groups treated similarly?

YES

21. Were all participants accounted for?