



RECONNECT RECHARGE
REIGNITE

PROCEEDINGS

Organised by
NETWORK AND ALLIANCE OF TRANSPLANT COORDINATORS

18TH ANNUAL
CONFERENCE OF NATCO
10-11 OCT'25 | IHMR, JAIPUR





RECONNECT RECHARGE REIGNITE

18th Annual Conference of NATCO

PROCEEDINGS

October 10 & 11, 2025

IIHMR University, Jaipur

**Organised by
NETWORK AND ALLIANCE OF TRANSPLANT COORDINATORS**

**Sponsored by
MFJCF, Sanofi, ALLIANCE FOR PAIRED KIDNEY DONATION**

**Supported by
ZTCC, MOHAN Foundation, ARJO, IIHMR University, Max Healthcare, Manipal
Hospital**

Proceedings

Reconnect Recharge Reignite -18th Annual Conference of NATCO

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Acknowledgement

(from President & Vice President NATCO)

It gives us immense joy and pride to present the Proceedings of the 18th Annual Conference of the Network and Alliance of Transplant Coordinators (NATCO), held on October 10-11, 2025, at IIHMR University, Jaipur.

This year's theme, **“Reconnect. Recharge. Reignite.”**, beautifully captured the spirit of the gathering. After years of change, challenges, and renewed purpose in our field, this conference became a space for each one of us to reconnect with our community, recharge our minds and hearts, and reignite the passion that lies at the core of our work as transplant coordinators.

Our heartfelt gratitude goes to the Scientific Committee for thoughtfully curating such a rich and inspiring agenda, and to all the speakers and chairpersons who so generously shared their wisdom, experiences, and insights.

We are deeply, deeply grateful to IIHMR University for hosting us on their serene, sprawling, and verdant campus. Their gracious support—especially to an organisation like NATCO, which operates with modest resources—was nothing short of extraordinary. Their decision to subsidise the costs and offer full access to the auditorium and its excellent facilities made the conference possible. The warmth, attentiveness, and gracious hospitality of their staff made every participant feel welcomed and cared for.

Our heartfelt thanks also go to MFJCF (MOHAN Foundation Jaipur Citizen Forum) for partnering with NATCO to co-host the conference and for their flawless local coordination. Their warmth, enthusiasm, and the wonderful local touches they added made the event truly memorable.

We gratefully acknowledge the generous support of our partners and supporters: Alliance for Paired Kidney Donation (APKD), Sanofi, Manipal Hospitals, MOHAN Foundation, ZTCC Nagpur, and Max Super Speciality Hospital, Nagpur. Their contributions played a vital role in bringing this conference to life.

Our sincere appreciation goes to the dedicated NATCO Conference Organizing Team. A very special thanks to Dr. Hemal Kanvinde, Dr. Muneet Kaur Sahi, Ms. Poonam Sharma, Ms. Thoidingjam Udayini Khuman, Ms. Mayuri Ghadage, Ms. Priti Jain and Mr. Vishok for their hard work in drafting these proceedings. Your commitment and meticulous efforts are deeply valued.

With warm regards,

Ms. Pallavi Kumar
President
NATCO 2023-2025

Amit Joshi
Vice President



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RECONNECT RECHARGE REIGNITE
18th Annual Conference of NATCO
 October 10-11, 2025, Jaipur

AGENDA

Day 1 October 10, 2025, Friday			
TIME	TOPIC	SPEAKER	CHAIRPERSON
10.30 am - 11 am REGISTRATION & TEA			
11 am - 11.30 am	Swap Transplantation: Global Lessons, Indian Solutions	Atul Agnihotri Dr. Chakrapani Mittal	Dr. Michael Rees Trilly Rachel Mathew Ciju Nair
PARALLEL SESSION FOR TRANSPLANT COORDINATORS (11.30 am - 1.30 pm)			
11.30 pm - 12.30 pm	Importance of Harmony in Data in State, National & Global Registries	Dr. Sonal Asthana Dr. Sanjay Dixit	Dr. Ajeet Singh Arati Gokhale Dr. Sanjay Dixit
12.30 pm - 1.30 pm	At the Crossroads: Navigating Family Conversations & Apnea Testing on Organ Donation Counselling – Panel Discussion	Dr. Paras Jain Sharing by: Pallavi Kumar Dr. Amit Joshi Girish Shetty	Dr. Srishti Jain Dr. Rashmi Gupta Vrinda Pusalkar
PARALLEL SESSION FOR NGO REPRESENTATIVES (11.30 am - 1.30 pm)			
11.30 am - 1.30 pm	Workshop: Capacity Building for NGOs Visioning & Fundraising	Dr. Ratna Devi Lalitha Raghuram	
1.30 pm - 2.30 pm LUNCH			
2.30 pm - 3.10 pm INAUGURATION			
3.10 pm - 4 pm	Swamy Narayan Transplant Coordinator Award Nominations	Lalitha Raghuram Arati Gokhale Dr. Paras Jain	
4 pm - 4.30 pm TEA			
4.30 pm - 4.45 pm	Organ Predict – AI tools for best Transplant Outcomes	Dr. Sunil Shroff	Dr. Ravi Mohanka Dr. Jasmeet Kaur
4.45 pm onwards	AGM and Election	Dr. Amit Joshi Vrinda Pusalkar	



RECONNECT RECHARGE REIGNITE
18th Annual Conference of NATCO
 October 10-11, 2025, Jaipur

AGENDA

Day 2 October 11, 2025, Saturday			
TIME	TOPIC	SPEAKER	CHAIRPERSON
9 am – 10.30 am	Free Paper & Poster		Dr. Sanjay Nagral Dr. Dharmesh Sharma Dr. Vrishali Patil
10.30 am – 11 am	IIHMR University: Learning Opportunities for Transplant Coordinators	Dr. Prahlad Rai Sodani	Bhavna Jagwani Sujatha S
11.30 am – 11.30 pm TEA			
11.30 am – 12.15 pm	DCD: Increasing opportunities for organ donation	Dr. Avnish Seth	Dr. Ram Sevak Yogi Dr. Chitra Raghuvanshi
12.15 pm – 1.15 pm	Swamy Narayan Oration	Dr. Anil Purohit	Dr. Sunil Shroff
1.15 pm – 2 pm LUNCH			
2 pm – 2.30 pm	Dual Organ Transplant – Opportunities & Preparations	Dr. Jamal Rizvi (Kidney-Pancreas) Dr. Sreejith Sreekumar (Kidney-Liver)	Dr. Shyam Sunder Nowal Ram Prasad Meena
2.30 – 3.15 pm	New Frontiers in Transplant Medicine: Understanding Xenotransplantation	Dr. Sandeep Attawar	Dr. Narayan Prasad Dr. Sunil Shroff Dr. Ravi Kumar
3.15 pm VALEDICTORY			

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1. Inauguration

The **18th Annual Conference of the Network and Alliance of Transplant Coordinators (NATCO)**, titled “*Reconnect, Recharge, and Reignite*,” was held on October 10 and 11, 2025, at the Indian Institute of Health Management and Research (IIHMR), Jaipur. The two-day national conference brought together transplant coordinators, medical professionals, researchers, and policymakers from across India to exchange ideas, share best practices, and discuss emerging trends in the field of organ donation and transplantation. Through scientific sessions, paper presentations, and interactive deliberations, the conference provided a valuable platform to strengthen collaboration, enhance knowledge, and reaffirm the collective commitment to advancing organ donation and saving lives.

Inauguration Ceremony

The 18th NATCO Conference, themed “*Reconnect · Recharge · Reignite*,” commenced with an inspiring Inauguration Ceremony graced by the esteemed presence of Mr. Gajendra Singh Khimsar, Hon’ble Health Minister, Government of Rajasthan, who presided as the Chief Guest. The event was further honoured by distinguished dignitaries, including Shri Ambrish Kumar (IAS), Secretary of the Medical Education Department, Government of Rajasthan; Major General Rohit Mehrotra, General Officer Commanding, 61 Sub Area; Dr. Ashok Agarwal, Chairman, Indian Institute of Health Management and Research (IIHMR), Jaipur; Shri Rajiv Arora, Chairman, MOHAN Foundation Jaipur Citizen Forum (MFJCF); Dr. Dhananjay Agarwal, President, Indian Society of Organ Transplantation (ISOT); and Ms Shreya Siddanagowder, India’s first hand transplant recipient.

The ceremony marked the beginning of a two-day gathering of transplant coordinators, medical professionals, and representatives from leading organizations working in the field of organ donation and transplantation across India.

Ms Lalitha Raghuram, Country Director, MOHAN Foundation, extended a warm welcome to all dignitaries, delegates, and participants. In her address, she provided a brief yet insightful introduction to NATCO (Network & Alliance of Transplant Coordinators), highlighting its establishment in the year 2000. Over the past 25 years, NATCO has successfully trained more than 3,500 transplant coordinators across the country, playing a vital role in strengthening India’s organ donation and transplantation ecosystem. She emphasized the importance of continuous training, compassion, and professionalism among transplant coordinators, who form the backbone of this life-saving movement.

Ms Pallavi Kumar, Executive Director, MOHAN Foundation (NCR), then presented an overview of the 18th NATCO Conference, outlining its objectives, key sessions, and focus areas. She introduced this year’s theme — “*Reconnect · Recharge · Reignite*” — explaining that it reflects the spirit of unity, renewal, and motivation among transplant coordinators. The theme underscores the importance of reconnecting with shared goals, recharging collective energy, and reigniting passion to continue advancing the mission of organ donation across the country.

A deeply moving case study of Ms Shreya Siddanagowda, a bilateral hand transplant recipient, was presented by Ms Lalitha Raghuram. The story exemplified the power and impact of organ donation, showcasing how science and humanity come together to transform

lives. She also shared the emotional story of her late son, Mr Swamy Narayan, whose selfless organ donation continues to inspire families across the country to take the pledge to donate organs and give the gift of life.

The lighting of the ceremonial lamp marked the formal inauguration of the conference, symbolizing hope, knowledge, and the spirit of service.

Seeing transplant recipients return to their lives is truly encouraging, especially when they go on to represent their country in international competitions. The Chief Guest congratulated and felicitated the seven organ donors and recipients from Rajasthan who participated in the World Transplant Games.

It was decided to release a handbook for hospitals to assist them in understanding the laws and procedures required to register as transplant centers. With transplant surgeries becoming more accessible, even hospitals in tier-2 cities are now providing these services. The Hon. Health Minister released the *Handbook on Registering Hospitals as Transplant Centers*, which was compiled by senior transplant coordinators who were also invited to the dais to participate in the release of the handbook.

Dr. Ashok Agarwal, Chairperson of IIHMR, spoke of his connection to organ donation through a memorable poem by Robert Test that he had read in *Reader's Digest*. He recalled his involvement in blood and eye donation programs in Jaipur and the persistent efforts required to make an impact in society. He said that the challenging task of promoting organ donation can be effectively undertaken by transplant coordinators through public education and proper counselling. He lauded the efforts of the coordinators.

The Chief Guest, Mr Gajendra Singh Khimsar, in his address, commended the efforts of NATCO and MOHAN Foundation for their tireless work in promoting organ donation awareness and building the capacity of healthcare professionals. He emphasized the government's commitment to supporting initiatives that enhance organ donation systems in Rajasthan and across India, highlighting the need for stronger collaboration between government institutions and NGOs to save more lives.

The ceremony also featured the felicitation of distinguished guests, partner organizations, and contributors who have played a significant role in advancing the cause of organ donation. The event concluded with a vote of thanks to all guests, speakers, and delegates for their continued commitment to the cause. The inaugural ceremony set an inspiring tone for the two-day conference, reinforcing the vision of a connected and compassionate network of transplant coordinators working towards a common goal — saving and enriching lives through organ donation.

Day 1 – Proceedings

2. Swap Transplantation: Global Lessons, Indian Solutions

Chairpersons - Ms. Trilly Mathew, Dr. Micheal Rees & Mr Ciju Nair

Speaker - Mr Atul Agnihotri, Chief Growth Officer, Alliance for Paired Kidney Donation (APKD)

Mr Atul Agnihotri spoke about the organization's work in advancing kidney transplantation through Paired Kidney Exchange programs globally.

Key Points

- Concept of Paired Kidney Exchange: PKE allows incompatible donor-recipient pairs to “swap” donors with others, enabling compatible transplants. This can involve 2-way, 3-way, or long donation chains, even including altruistic and deceased donors.
- Scientific & Ethical Framework: The matching algorithm, developed by Professors Mike Rees and Nobel Laureate Alvin Roth, combines medical, mathematical, and economic principles to ensure fair, compatible, and ethical exchanges. It has already saved over 20,000 lives globally.
- Global Operations: APKD works across 20+ countries, partnering with governments and transplant centres to build ethical and legal frameworks for national kidney exchange programs. Active collaborations exist in the U.S., India, UAE, Saudi Arabia, Brazil, and Israel.
- Notable Achievement: Facilitated a ground-breaking three-way kidney exchange between Israel and the UAE, building trust between two countries and demonstrating the power of medical diplomacy.
- Recognition: APKD received the Bill Foege Global Health Award for its global contributions to organ transplantation and health innovation.
- Impact in India:
 - Working with NOTTO, NITI Aayog, and major hospitals (PGI Chandigarh, Max Delhi, MGM, Pune network, etc.).
 - 90 transplants completed, 150 projected by year-end (2025).
 - Over 50 transplant centres and 230 donor-recipient pairs involved.
 - APKD offers free platform access, financial aid, and logistical support for poor or distant patients.
 - Long-term goal: enable 3,000 transplants in India.
- Innovation: APKD is exploring AI-driven matching, male-to-male kidney pairing for longer graft survival, and chains initiated by deceased donors to increase available organs.

Key Takeaways:

- Collaboration is the key: Effective organ exchange programs require coordination among governments, transplant centres, and ethical bodies.
- Technology saves lives: Algorithms and AI are central to fair, efficient donor-recipient matching.
- Global partnerships matter: APKD's cross-country success stories like the Israel-UAE exchange prove that medicine can transcend politics.



- India is progressing rapidly: With growing participation and government support, India is poised to become a leader in paired kidney exchange.
- Future focus: Expand ethical transplant networks, improve data-driven matching, and ensure equitable access to transplants worldwide.

In conclusion, Mr Atul emphasized that Paired Kidney Exchange (PKE) is transforming kidney transplantation by overcoming compatibility barriers, optimizing donor-recipient matching, and expanding access to life-saving organs. Through technology, international cooperation, and ethical leadership, APKD is bridging global gaps in organ donation and fostering cross-border medical collaboration.

Swap Program at Mahatma Gandhi Hospital: Practitioner's Perspective and Early Lessons.

Speaker - Dr. Chakrapani Mittal, Department of Nephrology, Mahatma Gandhi Medical College & Hospital, Jaipur

Dr. Chakrapani shared Mahatma Gandhi Hospital's journey with the Swap Transplant (Kidney Paired Donation, KPD) program and highlighted lessons to strengthen similar initiatives across India.

Key Points

- KPD helps overcome donor-recipient incompatibility (ABO/HLA), ethically expanding the donor pool. It's safer, cheaper, and more effective than ABO-incompatible transplants. At Mahatma Gandhi Hospital, this approach could add 75–100 transplants annually from existing incompatible pairs.
- Cultural hesitation, logistical and interstate coordination issues, regulatory delays, and financial/gender disparities limit KPD expansion. The partnership with the Alliance for Paired Kidney Donation (APKD) provides low-cost expertise, AI-based matching, and financial/logistical support, improving access and outcomes.
- Successful models in the U.S., South Korea, and Netherlands show the value of central registries and clear legal frameworks. India needs similar national coordination and streamlined approvals.
- Since 2014, Mahatma Gandhi Hospital has completed 163 swaps (including multi-pair chains) with excellent results and high patient trust. In 2025, 20 KPD transplants were done with more in progress.
- KPD is safer, simpler, and cheaper; ABO-incompatible transplants carry higher costs and medical risks. Coordinators are the core of KPD programs—handling counselling, logistics, education, and legal processes while building patient trust and ensuring ethical compliance.
- Challenges & Solutions: Issues like donor withdrawal, scheduling, and travel delays are managed through pre-approvals, back-up donors, and proactive planning.
- Success Metrics: Growth in KPD numbers, reduced dropouts, gender equity, cost-effectiveness, and high graft survival rates indicate strong program performance.

Key Takeaways:

- Centralised National Registry: Needed under NOTTO/SOTTO to enable multi-centre matching and transparency.

- Legal Streamlining: Faster, standardised approval process for interstate and multi-centre swaps.
- Government Support: Financial subsidies and insurance coverage for donor-recipient logistics and testing.
- Education & Awareness: Coordinators and clinicians must sensitize families to trust the KPD system.
- AI Integration: Use algorithm-based matching to optimise donor-recipient compatibility.
- Recognise Coordinators: Their counselling, organization, and communication are pivotal to program success.
- Goal: Expand ethical kidney exchanges nationally — *“to widen the circle of life through collaboration, trust, and innovation.”*

In conclusion, Dr. Chakrapani emphasized that Kidney Paired Donation (Swap Transplant) is an ethical, cost-effective, and scalable solution to India’s organ shortage crisis.

Collaboration with APKD, technology-driven matching, and strong transplant coordination have proven to improve outcomes significantly. However, national success depends on policy reform, legal streamlining, centralised registries, and financial support to make KPD accessible across all regions.

Source: Ms. Priti Jain

Parallel Sessions for Transplant Coordinators

3. Importance of Harmony in data in State, National & Global registries

Chairpersons: Dr. Ajeet Singh, Ms Arati Gokhale, & Dr. Sanjay Dixit

Session 1 - Strengthening Organ Donation and Allocation Systems in India

Speaker: Dr. Sonal Asthana, Lead Consultant, HPB & Multiorgan Transplantation, Aster CMI Hospital, Bengaluru

The session commenced with Dr. Sonal Asthana as the first speaker, who spoke about a key factor in organ transplantation in India — the harmonisation of data between national, state, and global registries. Dr. Asthana, through the extensive work he has done with the *Liver Transplant Society of India (LTSI)* and the *India Liver Transplant Registry (ILDR)*, pointed out that the matter of unified data frameworks is vital for achieving efficiency, transparency, and equity in the country's transplant ecosystem.

Currently, India ranks third in the world in terms of the total number of transplants; however, when the ratio to population is considered, it still lags far behind Spain and the United States. This situation calls for the immediate development of strong and harmonised data systems that will facilitate effective planning, organ allocation, and policy development.

Dr. Asthana observed that the current data fragmentation—existing among hospital databases, state registries (SOTTO, ROTTO), the national registry (NOTTO), and professional or academic databases like LTSI and ISOT—leads to duplication, missing data, and inconsistencies. These issues lower data quality, reduce transparency, and ultimately make the organ allocation process less effective.

He underscored that data harmonisation must be treated as a governance and system-level priority, not just a technical exercise. A single framework can facilitate organ sharing, enhance transparency, improve benchmarking, and further strengthen ethical oversight. Although NOTTO has already taken steps toward developing a national data portal, challenges surrounding the integration of legacy systems, institutional involvement, and data privacy still remain.

Considering the India Liver Transplant Registry (ILDR) as a benchmark, Dr. Asthana illustrated how ILDR has been able to capture almost 60–65% of India's liver transplant data each year. Developed as a secure, anonymous, and user-friendly platform, ILDR enables real-time data entry, analysis, and correction. It also allows transplant centres to assess their performance, maintain responsible data trails, and gain valuable insights for improving clinical outcomes.

Dr. Asthana concluded the session by emphasizing the need for interoperable data frameworks, capacity-building initiatives, and centralised dashboards to consolidate India's transplant data ecosystem.

Key Takeaways

- Unified data is essential for quality, transparency, and trust.
- Data harmonisation strengthens ethical and regulatory governance.
- ILDR serves as a successful model for national integration.
- Building capacity for data management is key to long-term sustainability.

In a nutshell, the session highlighted that the future of organ transplantation in India depends on a unified, transparent, and data-driven ecosystem—one that supports decision-making through harmonised registries, enhances patient outcomes, and encourages global collaboration.

Session 2: Strengthening transparency and efficiency in India's organ allocation ecosystem

Speaker: Dr. Sanjay Dixit, Director Medical Education, SAIMS Indore; Ex I/C Director, SOTTO MP

Dr. Sanjay Dixit, spoke about the National Registry for Organ Donation and Transplant, emphasizing its importance as the backbone of India's organ transplant framework. He explained that the registry will play a pivotal role in making the country's organ transplant system not only accountable and transparent but also standardized in terms of data.

The registry, being established under the aegis of NOTTO, will enable the digital entry of data from hospitals, state authorities, and national networks, including information related to patients and their families.

Organisational Framework

The National Organ Transplant Registry will serve as a comprehensive database for all stakeholders, including donors (living, deceased, related, and swap), recipients, hospitals, and transplant coordinators, along with demographic and clinical data. Each donor and recipient will be assigned a unique NOTTO ID, linked through Aadhaar, driving license, or passport, ensuring both authenticity and traceability.

Hospitals will be required to update their websites and submit data regularly on the number and types of transplants performed. These updates will feed into a centralised database, accessible to authorised officials of the State and Central Governments for monitoring and analysis.

Key Points

- The National Organ Transplant Registry acts as an all-inclusive database that maintains records of the demographic and clinical characteristics of transplant recipients, living donors, and deceased donors. It also includes organ-wise waiting lists, hospital activities, and detailed tracking of transplant outcomes.
- The generation of NOTTO IDs through Aadhaar, driving licence, or passport has now become a mandatory process, ensuring traceability and legal integrity throughout the donor–recipient journey.
- Hospitals must update transplant statistics frequently, allowing State and Central authorities to maintain oversight. Recipient eligibility becomes active 48 hours after

registration, and a one-month cooling-off period is mandatory for transfers between hospitals.

- Separate registries for organ and tissue donations maintain detailed records of each donor, including cause of death, lab results, maintenance procedures, retrieval information, and recipient outcomes—capturing the entire donation process.
- A Digital Pledge Registry has been established to support legally authenticated donor pledges through Form 7 under THOTA, encouraging citizens to pledge their organs while alive, with the right to withdraw their consent at any time.

To sum up the session, Dr. Dixit emphasized that the National Registry for Organ Donation and Transplant will play a central role in transforming India's organ donation program by ensuring data integrity, enhancing the efficiency of organ allocation, and strengthening public trust through a transparent and accountable digital infrastructure.

Key Takeaways

- The registry system is designed to be the backbone of a transparent, fair, and accountable national organ allocation framework.
- The digital infrastructure, combined with Aadhaar authentication, strengthens regulatory norms, data quality, and public confidence.
- The next steps include increasing hospital participation and enhancing public awareness of the pledge system.

Source: Ms. Poonam Sharma

4. **At the Crossroads: Navigating Family Conversations & Apnea Testing in Organ Donation Counselling – Panel discussion**

Chairperson – Dr. Srishti Jain, Dr. Rashmi Gupta & Ms Vrinda Pusalkar

Speaker: Dr. Paras Jain, Additional Director- Critical Care, Sir HN Reliance Hospital, Mumbai

Sharing by: Ms Pallavi Kumar, Dr. Amit Joshi, and Mr Girish Shetty

Session Overview:

This insightful session delved into one of the most complex and sensitive aspects of deceased organ donation – the intersection between the medical determination of brain death and communication with families during emotionally charged situations. Through an interactive panel discussion led by Dr. Paras Jain and moderated by eminent experts, participants explored the clinical, ethical, and emotional dimensions involved in guiding families through end-of-life decisions and organ donation counselling.

The discussion emphasized that apnoea testing is not merely a medical procedure but a pivotal component in establishing the irreversibility of brain function, which forms the scientific, medical, and legal foundation of brain death declaration in India. In parallel, the session highlighted the critical role of empathetic communication and trust-building in family counselling – where compassion must accompany clarity.

Key Points Highlighted in the Session

- Interlinking Family Dialogue and Apnea Testing: Both are fundamental – apnoea testing ensures medical confirmation of brain death, while family discussions ensure emotional acceptance and ethical transparency.
- Apnea Testing Overview: Covered the procedure, prerequisites, physiological basis, and interpretation, emphasizing its role in confirming brain death.
- Communication and Compassion: Stressed the importance of clear and empathetic communication when explaining test results and discussing organ donation with families.
- Decoupling and Timing: Recommended introducing organ donation discussions only after brain death certification, allowing families time to process the information sensitively.
- Transplant Coordinators' Role: Focused on balancing medical understanding, ethical principles, and counselling skills to build trust and support grieving families effectively.

Experience Sharing

Ms Pallavi Kumar, Dr. Amit Joshi, and Mr Girish Shetty shared their real-world experiences drawn from years of work in deceased organ donation. They illustrated how coordinated teamwork among intensivists, transplant coordinators, and grief counsellors can make a meaningful difference in the donation process.

They emphasized that while protocols and training provide the necessary framework, it is empathy and human connection that truly help families navigate loss and make altruistic decisions.

Key Takeaways

- The urgent need to initiate joint training programs for ICU doctors and transplant coordinators to enhance collaboration and consistency in end-of-life care and organ donation practices.
- Strengthening rapport-building and communication skills across the multidisciplinary teams involved in donation and transplantation.
- Establishing and implementing End-of-Life Care (EOLC) programs with clear Standard.
- Operating Procedures (SOPs) and protocols as a mandatory practice in all hospitals.
- Recognition that communication is both a science and an art – a bridge that connects medical certainty with emotional understanding.

Source: Dr. Thoidingjam Udayini Khuman

Parallel Sessions For NGO Representatives

5. Workshop: Capacity Building for NGO's Visioning & Fundraising

Resource Persons – Dr Ratna Devi & Ms Lalitha Raghuram

At the beginning of the session, Ms Lalitha Raghuram acknowledged the presence of several organizations actively contributing to the field. Representatives from Muskan Group Parmarthik Trust (Indore); Shine India Foundation (Kota); MFJCF Rajasthan; ORGAN India (Delhi); Sumit Charitable Foundation, Raipur; and MK International Eye Bank, Indore attended the workshop.

Key Points Discussed:

- Running a non-profit is like a daily marathon, with funding needs that continuously grow.
- There is sufficient funding available in India for non-profits; success depends on knowing where and how to ask.
- Building a strong brand and collaborating with established organizations early on is crucial.
- Donor hesitation often stems from trust issues, not lack of intent—bridging this trust gap is essential.
- Multiple funding sources exist—CSR initiatives, individual donations, crowdfunding, and foreign funding—each with its own compliance requirements.
- NGOs must properly account for all costs, including staff time and overheads, to build sustainable income models. Charging fairly for services ensures long-term viability.
- CSR grants demand patience and strict compliance; though approvals may take years, they can yield substantial support.
- Different NGO structures—trusts, societies, and Section 8 companies—come with varied compliance rules and operational flexibility.
- Government grants extend beyond traditional ministries; NGOs should proactively explore these opportunities and participate in relevant funding forums.
- Fundraising avenues include events, in-kind donations, youth partnerships, and crowdsourcing, all of which require structured management.
- Collaborations with larger NGOs and umbrella organizations enhance compliance, funding access, and scalability.
- Digital tools and social media play a key role in fundraising, outreach, and impact measurement.
- Measuring and communicating tangible impact with clear outcomes helps attract and retain donor support.
- Smaller NGOs benefit from engaging skilled proposal writers, maintaining proposal repositories, and active networking.
- Knowledge sharing and mentorship among NGOs strengthen the overall non-profit ecosystem.

Key Takeaways:

- Funding exists; the real challenge lies in effective access and management.
- Building trust through transparency and ethical storytelling is more valuable than flashy marketing.

- Proper accounting and professional billing are essential for financial sustainability.
- Compliance with FCRA, CSR, and other regulatory frameworks is mandatory but manageable through sound processes.
- Collaborations with larger NGOs and umbrella bodies facilitate growth and compliance for smaller organizations.
- Digital platforms offer cost-effective tools for fundraising and awareness generation.
- Clearly defined and measurable outcomes strengthen donor confidence and attract funding.
- Continuous networking, capacity building, and proposal preparedness are vital for long-term success.
- Empowering grassroots staff in proposal writing enhances funding opportunities.
- Collective learning, sharing, and mentoring help strengthen the non-profit ecosystem as a whole.

Successful non-profit fundraising and management in India demand strategic networking, persistent effort, transparent communication, and strict compliance with regulations. NGOs must professionalize their operations, accurately value their resources, and diversify funding streams to ensure long-term sustainability. Leveraging collaborations, digital innovation, and measurable impact will enable organizations to scale effectively. Persistence and well-planned strategies are key to overcoming challenges and achieving success.

Source: Ms Priti Jain

6. Swamy Naryan Transplant Coordinator Nominations

Judges : Ms Lalitha Raghuram, Ms Arati Gokhale, and Dr. Paras Jain

Transplant coordinators form the backbone of the organ donation process. Every deceased donor transplant stands as a testament to their compassion, persistence, and coordination. To recognize and motivate these professionals, NATCO presents the Swamy Narayan Best Transplant Coordinator Award annually during the conference.

Instituted in 2010 by the MOHAN Foundation, the award commemorates Swamy Narayan, the late 20-year-old son of Ms Lalitha Raghuram, Country Director, MOHAN Foundation. His family's decision to donate his organs gave new life to several recipients, symbolizing courage and selflessness — values that continue to inspire the transplant community.

Nominations

Five nominations were received for the 2025 award, of which four candidates presented their work before the judging panel. Each participant shared their professional journey, key achievements, and challenges faced in advancing organ donation and transplantation. The judges appreciated their dedication, engagement, and valuable field insights that reflected the spirit of service central to their role.

Presentations

Ms Iva Pandey - Medanta – The Medicity Hospital, Gurugram

Outlined her professional journey, highlighting her commitment to donor coordination and family counselling in deceased organ donation cases.

Mr Nikhil Vyas – KD Hospital, Ahmedabad

Shared his extensive efforts in awareness campaigns and community outreach, presenting data on the organ donations he has facilitated and their positive impact.

Ms Devi S. – Kovai Medical College & Hospital (KMCH), Coimbatore

Recounted her transition from a non-paramedical background to a skilled transplant coordinator, presenting data on successful donations conducted under her supervision.

Mr Sandip Singh – DMCH, Ludhiana

Highlighted the success of the organ donation program at DMCH, achieving ten donations from ten referred cases — an exceptional record demonstrating efficient teamwork.

The Swamy Narayan Best Transplant Coordinator Award remains a distinguished recognition for transplant coordinators who display exemplary dedication and professionalism. The session celebrated their inspiring journeys and reaffirmed the critical role they play in strengthening India's organ donation program through compassion, coordination, and continuous commitment to saving lives.

Source: Ms Mayuri Ghadage

7. Organ Predict – AI tools for Best Transplant Outcomes

Chairpersons – Dr. Ravi Mohanka and Dr. Jasmeet Kaur

Speaker – Dr. Sunil Shroff, Managing Trustee, MOHAN Foundation

Dr. Sunil Shroff delivered an insightful presentation on the transformative role of technology and artificial intelligence (AI) in advancing organ donation and transplantation. His session emphasized how digital tools and AI-driven platforms are reshaping clinical precision, improving donor–recipient matching, and strengthening patient care systems in transplant medicine.

Key Focus: Organ Predict (AI-Powered Platform)

Organ Predict is an innovative, AI-based free web tool developed specifically for transplant hospitals. The platform embodies the vision — “Where Innovation Meets Precision in Transplant Medicine.” It leverages artificial intelligence to predict transplant outcomes, support decision-making in donor–recipient allocation, and improve long-term graft survival. A QR code was also shared during the session for direct access to the tool.

Collaborating Partners

The Organ Predict initiative is a collaborative effort involving several leading global institutions, including Coventry University, Med India, Xtend.AI, North Mississippi Health Services, NHS Blood and Transplant (UK), University Hospitals Coventry & Warwickshire, and the MOHAN Foundation. Together, these organizations are driving advancements in predictive analytics, data integration, and AI-based innovations in transplant medicine.

Research and Presentations (2022–2024)

The platform is backed by extensive research focusing on predictive analytics and clinical outcomes. The following key studies and models were highlighted during the session:

- Prediction models for live kidney donor transplant outcomes (using UK and USA datasets).
- Prediction models for deceased kidney donor transplants.
- AI approaches for acute rejection prediction post-transplant.
- AI-based prediction of graft survival in living and deceased kidney transplants.
- AI-driven HLA-A, B, DR, and DQ mismatch analysis for kidney allocation (UK registry data).
- Machine learning applications in tacrolimus/MMF therapy to improve survival prediction and long-term outcomes.

Key Takeaways

- Technology as an Enabler: Digital platforms such as organ sharing registries, national donation helplines, pledge registries, and e-learning programs have revolutionized coordination and professional training in transplantation.

- AI and Predictive Modelling: Integration of AI tools like Organ Predict promotes precision medicine, efficient organ allocation, and data-driven clinical decision-making.
- Burden of Kidney Disease: With over 850 million people affected globally, kidney transplantation remains the most effective long-term therapy for improving survival, quality of life, and economic independence.

Dr. Shroff concluded that the future of transplantation lies in the synergy between innovation, data science, and compassionate care. AI-powered platforms like Organ Predict, supported by international collaboration, are paving the way for a new era of precision transplant medicine - enhancing clinical outcomes and optimizing organ utilization through technology-driven excellence.

Source: Ms Mayuri Ghadage

Day 2 – Proceedings

8. Free Paper and Poster session

Judges - Dr. Vrishali Patil, Dr. Sanjay Nagral, & Dr. Dharmesh Sharma

The free paper presentations highlighted the scientific work and field experiences of transplant coordinators from across the country. In total, nine podium and seven poster presenters showcased their studies and research, reflecting the growing emphasis on scientific development in the field of organ donation and transplantation.

The Scientific Committee invited participants to choose their preferred mode of presentation—either podium or poster—and required them to submit abstracts in advance for evaluation and scheduling. To ensure clarity, fairness, and uniformity, each abstract was assessed for its scientific content and presentation quality. A total of nine presentations were selected for the final podium session.

For the podium presentations, nine participants representing various states and institutions presented their research before an expert panel of judges. Each presenter was allotted nine minutes—seven minutes for presentation and two minutes for interaction and discussion. The judges evaluated each presentation thoroughly and awarded the Best Paper Award (Podium Category) to the participant achieving the highest score.

In the poster presentation category, seven participants were selected, though six were present to display their work in the main exhibition area. The judges visited each poster, allowing authors four minutes to summarize and discuss their findings.

Throughout the session, the judging panel maintained active observation and demonstrated genuine interest in all participant contributions. Their detailed assessments and valuable feedback reflected both their deep expertise and commitment to supporting researchers in their future work.

The session provided an excellent platform for researchers to present their original methods and findings, illustrating how transplant coordinators contribute significantly to advancing organ donation and transplantation in India.

The session concluded with Ms Lalitha Raghuram, former NATCO President and current Country Director, MOHAN Foundation, felicitating the panel of judges.

Participant Details - Free Paper Presentations at the 18th Annual International Conference of NATCO: 'Reconnect Recharge Reignite' October 10-11, 2025

Name	Mode of Presentation	Title
Dr. Thoidingjam Udayini Khuman	Podium	Raising the Bar for Transplant Coordinators: Training vs Accreditation Models
Deepak Narayan	Podium	Paediatric Organ Donation: A Journey of Compassion, Courage, and Continued Legacy - A Case Presentation
Poonam Sharma	Podium	Living well after unrelated kidney Transplants-Case Discussions
Dr. Sanjay Rakibe	Podium	Equity and Legal Challenges in Organ Donation and Transplantation in India: Focusing on Non-Transplant Organ Retrieval Center Challenges & Difficulties
Dr. S. Bhanu Prakash	Podium	Successful journey of Corneas, Skin, and Body donation to Government Hospitals made possible by the Power of Perfect Coordination
Pritam Kumar Trivedi	Podium	Process Timelines in Deceased Organ Donation: Experience from 22 Cases
Dr. M. Gururajan	Podium	Revitalizing the Deceased Donor Transplant Program: Overcoming Challenges, Celebrating Milestones, and Shaping Future Pathways - Insights from a Publicly Funded Tertiary Care Hospital
Reshma	Podium	Education/ Training in Transplant Coordination
Dr. Bhanuchandra Dharanipal Srivari	Podium	Ethical and legal issues in organ donation: case studies from an Indian government hospital
KKD Surekha	Poster	Knowledge, Attitude & Practices among Public on Organ Donation in India: A Comprehensive Review
Sendhamarai Selvi	Poster	A 10 year follow up study of medical psychosocial aspects of non near related kidney donors
Sakshi Kshirsagar	Poster	Awareness Initiative on Green Corridor and Organ Donation for Traffic Police Personnel
Dr. M. Gururajan	Poster	From Alerts to Transplants: Outcomes of Deceased Donor Alerts in a Tertiary Care Hospital - A Transplant Coordinator's Perspective"
Senthilkumar A	Poster	Depression and health related quality of life among post renal transplant patients in a tertiary care hospital Puducherry
Poonam Sharma	Poster	Impact of Online Post-Graduate Diploma in Transplant Coordination & Grief Counselling (PGDTC) for Armed Forces Candidates

Source: Ms Poonam Sharma

9. IIHMR University: Learning Opportunities for Transplant Coordinators

Chairpersons – Bhavna Jagwani & Sujatha S

Speaker: Dr. Prahlad Rai Sodani, President, IIHMR University, Jaipur

The session conducted by Dr. Sodani focused on educational and training initiatives designed for transplant coordinators. It emphasized the university's contributions toward capacity building and strengthening professional competencies within the organ transplant ecosystem.

About IIHMR University

The origins of IIHMR University trace back to October 5, 1984, with the establishment of its sponsoring body, the *Indian Institute of Health Management Research*. In 2014, IIHMR was incorporated as a postgraduate research university by the Government of Rajasthan.

Key Points Discussed

Role of IIHMR University in Health Systems

IIHMR University is a pioneer in health management education and research in India. The institution addresses systemic needs in healthcare by conducting evidence-based research and offering specialized training to enhance the effectiveness of health systems.

Educational Opportunities for Transplant Coordinators

Recognizing the growing demand for qualified professionals in organ donation and transplantation, IIHMR has designed structured learning pathways that enhance technical, managerial, and communication skills essential for transplant coordination.

Academic and Training Programs Offered

- Regular Programs: Postgraduate degrees in Hospital and Health Management, Pharmaceutical Management, Public Health, Development Management, and Healthcare Analytics
- Doctoral Programs (Ph.D.)
- Executive Programs: Flexible, modular programs for working professionals seeking to upgrade their knowledge while continuing their careers
- Online Certificate Courses
- Short-Term Training Programs and Workshops: Practical, skill-based modules aimed at building capacity in organ donation awareness and coordination

Commitment to Capacity Building

IIHMR University continues to collaborate with national and international health organizations to strengthen healthcare outcomes through education, research, and training. Its programs aim to create a strong network of competent healthcare professionals capable of meeting the evolving needs of the Indian healthcare system.

Key Takeaways

Operations Mindset is Critical - Coordinating a transplant requires managing multiple moving parts within a time-bound framework. IIHMR's programs equip professionals with

skills in process flow management, resource allocation, and identifying operational bottlenecks.

Supply Chain and Logistics Competence - Organ transplantation involves time-sensitive and high-stakes logistics. Skills in inventory control, capacity planning, and logistics management are essential.

Quality Assurance and Regulatory Understanding - Transplant coordination operates under strict ethical and legal frameworks involving donor consent, brain death certification, and transport regulations. Quality and compliance are non-negotiable aspects of training.

Use of Data and Predictive Tools - Anticipating rather than reacting improves coordination efficiency. IIHMR's modules on predictive analytics help coordinators forecast donor availability, match recipients, and plan logistics proactively.

Cross-Functional Coordination and Project Management Approach - Effective transplant coordination requires collaboration with ICU teams, neurosurgery departments, transplant surgeons, operating room staff, legal and transport agencies. IIHMR's project-based learning fosters teamwork and leadership in these multidisciplinary settings.

Culture of Continuous Improvement - Given the emotional and clinical significance of every transplant case, adopting a continuous improvement approach—reducing variation, eliminating waste, and refining protocols—enhances outcomes and efficiency.

The session underscored the vital role of structured academic training and capacity building for transplant coordinators. IIHMR University continues to play a pivotal role in advancing this field through its research, blended learning platforms, and professional development programs, thereby contributing significantly to the growth of the organ transplant ecosystem in India.

Source: Vishok N

10. Donation after Circulatory Death (DCD): Increasing Opportunities for Organ Donation

Chairpersons: Dr Ram Sevak Yogi & Dr Chitra Raghuvanshi

Speaker: Col (Dr.) Avnish Seth, Head, Department of GI & Hepatology, Manipal Hospital, Dwarka and Head, MOST (Manipal Organ Sharing & Transplant).

Dr. Avnish Seth spoke about Donation after Circulatory Death (DCD), describing it as a real challenge to one's thoughts and beliefs. He emphasized that DCD has the potential to double India's organ donor pool in a very short span of time. The discussion was comprehensive, as he addressed the scientific, ethical, and procedural aspects of DCD while stressing that with proper regulations in place, DCD practices, along with Donation after Brain Death (DBD), could be successfully adopted and integrated into India's organ donation system.

Context and Global Perspective

Dr. Seth began by presenting a global overview of DCD evolution, stating that in 2024, out of 46,281 deceased organ donors worldwide, about 28% were DCD donors. He noted that DCD is not a new concept—it dates back to the world's first heart transplant in 1967. However, the formal adoption of DCD requires clear definitions, robust medical protocols, and strong legal support.

He explained the Modified Maastricht Classification, which categorizes DCD into controlled and uncontrolled settings, including cases of severe brain injury followed by circulatory arrest. These frameworks, he said, provide ethical clarity and uniformity in determining death and initiating organ retrieval.

DCD in the Indian Context

In India, the legal and medical frameworks have traditionally favoured the brain-death-based approach. However, Dr. Seth highlighted a significant shift following the January 2023 Supreme Court verdict, which established a clear judicial foundation for Withdrawal of Life Support Treatment (WLST) under strict hospital supervision. This decision has paved the way for DCD categories III and IV, which were previously hindered by legal ambiguities.

He elaborated on a series of Indian case studies—including Fortis Gurugram (2014), Ruby Hall Pune (2019), and Manipal Hospital Bengaluru (2023)—to illustrate the role of DCD in strengthening the healthcare system through collaboration among transplant units, legal teams, and critical care departments.

Dr. Seth also discussed breakthrough organ preservation technologies such as Normothermic Regional Perfusion (NRP) and Organ Care Systems (OCS), which not only make DCD-based organ retrieval more viable but also enhance the functionality and success of transplanted organs.

Key Takeaways

- DCD complements DBD and has the potential to significantly expand organ availability.

- The Supreme Court judgment has placed WLST-linked DCD on a strong ethical and legal foundation.
- Initiating DCD programs at reputed hospitals can set national benchmarks for best practices.
- Training and effective communication between transplant and ICU teams are essential.
- LAMA/DAMA cases, when handled with compassion and ethical intent, ensure a dignified death while creating potential donor opportunities.

In conclusion, Dr. Seth emphasized that Donation after Circulatory Death represents the next milestone in India's organ donation journey. With the right protocols, capacity-building efforts, and inter-institutional collaboration, India can move toward a more compassionate and progressive transplant ecosystem.

Source: Ms Poonam Sharma

11. Swami Narayan Oration

Chairperson – Dr. Sunil Shroff

Speaker: Dr. Anil Purohit, Founder & Chairperson, Jodhpur School of Public Health

Dr. Anil Purohit, Founder and Chairperson of the Jodhpur School of Public Health (JSPH), delivered a deeply moving and inspiring oration that beautifully intertwined professional excellence with personal resilience. A distinguished public health professional, Dr. Purohit has held prominent positions across the globe, serving as a U.S. Government Public Health Officer, Global AIDS Director at the Harvard Institutes of Medicine, Country Director – India for the University of Washington, and CEO of FXB International. He is also a Founding Board Member of the Bedford Research Foundation, Massachusetts, where he has contributed to groundbreaking advancements in biomedical ethics and stem cell research.

Dr. Purohit's academic credentials are equally remarkable. His pursuit of knowledge extended to the study of ethics at Northeastern University, reflecting his belief that healthcare is as much a moral responsibility as it is a scientific pursuit. Through his diverse roles in academia and leadership, he has consistently demonstrated a rare blend of intellect, compassion, and advocacy.

The oration took a deeply personal and emotional turn when Dr. Purohit shared his own life journey – one that began with his advocacy and work in HIV/AIDS projects, starting from Jodhpur and extending to several parts of India and the United States. While contributing to some of the most impactful health initiatives, he simultaneously discovered that he had polycystic kidney disease (PKD) – a hereditary condition that had already affected his mother and now also impacts his own children.

He spoke with deep emotion about his mother, a symbol of courage and endurance, who managed her professional responsibilities, household duties, and dialysis sessions – all while supporting him through medical school. He described how she became one of the first individuals in the United States to receive home-based dialysis, a breakthrough made possible only after his relentless advocacy with the government to make such care accessible. Dr. Purohit's voice softened as he reflected on her struggles and resilience, calling her the driving force behind his own strength and perseverance.

He went on to recount the emotional rollercoaster of his own diagnosis – the disbelief, the acceptance, and the eventual reality of living with kidney failure. He narrated his journey toward transplantation, describing the moment he received a deceased donor kidney as “a second chance at life, gifted by an unknown soul.” The oration grew even more poignant as he recalled the challenges faced during the COVID-19 pandemic – a period when his health deteriorated severely and he believed he might not survive.

Dr. Purohit also spoke about his continuing wish to one day learn about his deceased donor, whose act of generosity granted him more years to live, serve, and advocate. Despite the limitations of his health condition, he continues to travel extensively, teach, and lead initiatives that advance public health, organ donation awareness, and healthcare ethics.

His oration was more than a professional discourse – it was a testament to the resilience of the human spirit. He emphasized that organ donation is not merely a medical process but a celebration of humanity, a bridge that connects one life to another through compassion.

In his closing words, Dr. Purohit left the audience deeply moved and inspired:
“We have to live – with or without disease. Life must go on. Every breath we take is a reminder of someone’s love, sacrifice, and faith in humanity.”

The hall resonated with emotion and admiration as his story served as a living example of courage, purpose, and the power of service. His message reminded everyone that beyond the science of medicine lies the art of compassion – and that true healing begins with empathy and hope.

Source: Dr. Thoidingjam Udayini Khuman

12. Dual Organ Transplant- Opportunities & Preparations

Chairperson – Dr. Shyam Sunder Nowal & Mr Ram Prasad Meena

Session 1: Kidney-Pancreas Transplant

Speaker: Dr. Jamal Rizvi, Prof. of Urology, IKDRC, Ahmedabad

The session provided an insightful overview of pancreas transplantation, encompassing its types, surgical considerations, allocation policies, and evolving practices in India – particularly highlighting the successful Gujarat state model. The speaker elaborated on the current trends, clinical outcomes, and the crucial role of transplant coordinators in ensuring optimal graft and patient survival.

Key Points Highlighted

Types of Pancreas Transplantation: The speaker delineated three main types - Simultaneous Pancreas-Kidney (SPK) Transplantation, Pancreas After Kidney (PAK) Transplantation, and Pancreas Transplant Alone (PTA).

- SPK Transplantation constitutes approximately 80–85% of total cases and is preferred due to its superior graft and patient survival rates.
- PAK Transplantation accounts for 10–15% of cases and is performed when a kidney transplant is followed by a pancreas transplant, typically after about a year. This option suits patients who have a living kidney donor but still wish to be free from insulin injections.
- PTA is performed in less than 5% of cases, usually for patients with brittle diabetes without renal impairment.

Allocation Protocols – The Gujarat Model: The Gujarat Government's protocol was discussed as a notable example, prioritizing recipients requiring both kidney and pancreas transplants. This approach maximizes the overall benefit from a single donor and enhances long-term metabolic outcomes.

Pancreas Transplant vs. Insulin Pump: The session compared the long-term advantages of pancreas transplantation with insulin pump therapy. While insulin pumps are technologically advanced, they remain costly and require continuous maintenance. In contrast, pancreas transplantation restores endogenous insulin production, leading to improved glycaemic control and overall quality of life.

Key Takeaways

- **Donor Selection:** The importance of meticulous donor selection in the initial and early phases of pancreas transplant programs was emphasized as crucial to ensuring successful outcomes and minimizing complications.
- **Cold Ischemia Time (CIT):** The CIT should ideally be maintained below 12 hours and optimally under 6 hours to preserve graft function. This requires efficient coordination, underscoring the pivotal role of transplant coordinators in managing time and logistics.

- **Team Preparedness and Training:** The need for training multiple members within the transplant team was underscored to ensure redundancy and operational continuity, particularly during emergencies or staff shortages.
- **Retrieval and Bench Surgery:** The success of pancreas transplantation heavily depends on meticulous donor organ retrieval and precise bench surgery techniques, ensuring vascular integrity and minimizing post-transplant complications.

Session 2: Kidney-Liver Transplant

Speaker: Dr. Sreejith Sreekumar, Senior Consultant, Centre for Liver & Biliary Sciences, Max Hospital, Saket

The session delved into the intricacies of simultaneous kidney-liver transplantation (SKLT), exploring its clinical rationale, patient selection criteria, and preoperative evaluation parameters. The speaker emphasized that combined transplantation requires a carefully coordinated, multidisciplinary approach involving hepatologists, nephrologists, transplant surgeons, and anaesthesiologists to optimize patient outcomes.

Key Points Highlighted

Types of Kidney-Liver Transplantation:

- **Failed Liver but Good Kidney:** Patients presenting with end-stage liver disease (ESLD) but with preserved renal function. In such cases, isolated liver transplantation may suffice, though renal parameters must be closely monitored during the postoperative period.
- **Failed Liver with Vulnerable Kidney:** Individuals showing significant liver failure with kidneys that are functionally borderline or vulnerable to further damage, often due to hepatorenal physiology or prolonged systemic illness. These patients may progress to renal failure after liver transplantation, making combined transplantation a preventive and pre-emptive approach.
- **Failed Liver and Bad Kidney:** Patients suffering from advanced, irreversible failure of both organs, usually due to chronic liver disease (CLD) with concurrent chronic kidney disease (CKD). In such cases, simultaneous kidney-liver transplantation (SKLT) is the preferred and often the only definitive curative option.

Criteria for Combined Transplantation:

The speaker highlighted three core clinical criteria that determine eligibility for combined kidney-liver transplantation:

- **Degree and Chronicity of Renal Dysfunction:** Distinguishing between reversible renal injury and permanent renal failure.
- **Duration of Dialysis:** Patients undergoing maintenance dialysis for more than 90 consecutive days are typically considered for SKLT.
- **Assessment of Renal Recovery Potential:** Evaluating whether kidney function might improve following liver transplantation alone.

These criteria ensure that only patients who truly require dual-organ transplantation are selected, thereby improving organ utilization efficiency and patient survival outcomes. The speaker also stressed the importance of a comprehensive preoperative evaluation to assess surgical risk and optimize outcomes.

Key Takeaways

- Long-term data suggest enhanced metabolic stability, fewer immunologic complications, and better overall survival when both organs are transplanted together in eligible patients.
- The major challenges identified include limited organ availability, complex surgical logistics, perioperative management demands, and ethical prioritization of dual-organ recipients within the allocation system.
- The session emphasized the need for strengthening interdepartmental coordination between liver and kidney transplant units, and the adoption of a structured multidisciplinary team-based approach for candidate evaluation and postoperative follow-up.

Source: Dr. Thoidingjam Udayini Khuman

13. Valedictory

The valedictory function marked the conclusion of the two-day 18th Annual NATCO Conference held at IIHMR, Jaipur, and was presided over by Ms Pallavi Kumar. The conference highlights were briefly presented by Ms Pallavi, who praised the contributors for their active participation and encouraged them to continue their dedication to the cause of organ donation and transplantation in India. She also acknowledged the remarkable research and fieldwork showcased during the conference and reiterated the importance of collaboration and knowledge sharing among transplant professionals across the country.

The following recognitions were presented during the closing ceremony by Ms Lalitha Raghuram and Dr. Sanjay Dixit, who commended the awardees for their outstanding work and contributions to the field. Earlier in the day, Ms Raghuram announced the institution of two new “*Lotus Reminiscence Awards*” by Ms Shilpi, in memory of her late husband, Mr Pankaj. These awards were introduced for the Best Free Paper and Best Poster categories. Thus, this year, there were two awards in each of the respective categories.

Best Free Paper Awards (Podium):

- Living Well After Unrelated Kidney Transplants: Case Discussions – Ms Poonam Sharma
- Process Timelines in Deceased Organ Donation: Experience from 22 Cases – Mr Pritam Kumar Trivedi

Best Poster Awards:

- Knowledge, Attitude & Practices among Public on Organ Donation in India: A Comprehensive Review – Ms K. K. D. Surekha
- A 10-Year Follow-Up Study of Medical and Psychosocial Aspects of Non Near-Related Kidney Donors – Ms Sendhamarai Selvi

Best Scientific Paper Award:

Handbook for Transplant Coordinators – Dr. Navdeep Bansal, PGI Chandigarh

Swami Narayan Best Transplant Coordinator Award:

- Mr Nikhil Y. Vyas, KD Hospital, Ahmedabad
- Mr Sandeep Singh, Dayanand Medical College and Hospital, Ludhiana

Ms Pallavi, along with Vice President Mr Amit Joshi, expressed heartfelt gratitude to the Organizing Committee, the NATCO Executive Committee, all speakers, attendees, and the IIHMR management. She also extended special thanks to Ms Bhawna and the team from MFJCF–MOHAN Foundation Jaipur Citizen Forum for their invaluable support and participation, as well as to the sponsors of the conference for their continued encouragement.

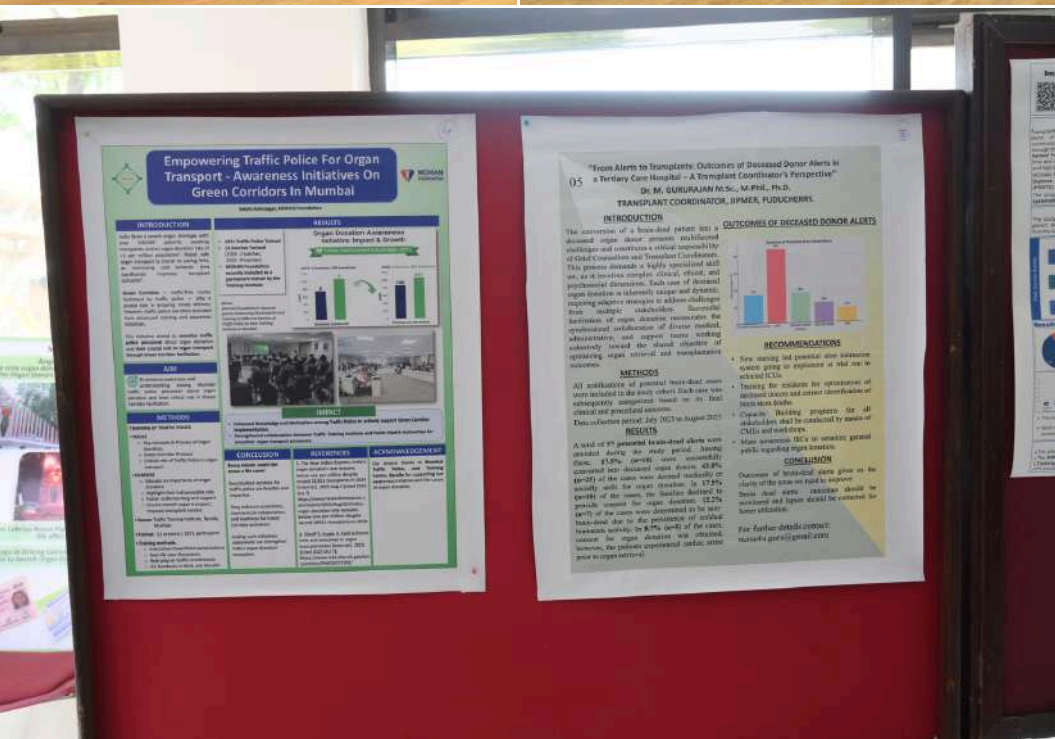
Mr Sandeepan from Indore and Dr. Amla Batra from Jaipur shared their feedback about the conference. Mr Sandeepan also proposed Indore as a possible venue for the 19th NATCO Conference.

The event concluded with a group photograph, marking the end of a successful and inspiring conference.

FACULTY LIST

NAME	AFFILIATION
Ajeet Singh	Additional Superintendent SMS Hospital, Jaipur
Amit Joshi	Vice President, NATCO & Deputy Medical Superintendent & Chief Transplant Coordinator, Bombay Hospital, Indore
Anil Purohit	Founder & Chairperson, Jodhpur School of Public Health
Arati Gokhale	Chief Transplant Coordinator, ZTCC, Pune
Atul Agnihotri	Chief Growth Officer, Alliance for Paired Kidney Donation (APKD)
Avnish Seth	Head, Department of GI & Hepatology, Manipal Hospital, Dwarka and Head, MOST (Manipal Organ Sharing & Transplant).
Bhavna Jagwani	Convener MFJCF, Trustee MOHAN Foundation
Chakrapani Mittal	Department of Nephrology, Mahatma Gandhi Hospital Medical College & Hospital, Jaipur
Chitra Raghuvanshi	Programme Optimization Head for Organ Transplant & member of brain death committee, SMS Medical College, Jaipur
Ciju Nair	Manager, Transplant Unit, Nanavati Max Super Speciality Hospital, Mumbai
Dharmesh Sharma	Professor, Department of Preventive and Social Medicine, SMS Medical College, Jaipur, Rajasthan
Girish Shetty	Chief Transplant Manager, Apollo Group of Hospitals – Telangana & Andhra Pradesh
Jamal Rizvi	Prof. of Urology, IKDRC, Ahmedabad
Jasmeet Kaur	Director Dept of Histocompatibility, Immunogenetics & Transplantation Immunology, National Reference Laboratory, Dr Lal Path Labs Ltd, New Delhi
Lalitha Raghuram	Country Head, MOHAN Foundation
Michael Rees	Chief Executive Officer (CEO), Alliance for Paired Kidney Donation (APKD)
Pallavi Kumar	President NATCO & Executive Director, MOHAN Foundation, NCR
Paras Jain	Additional Director- Critical Care, Sir HN Reliance Hospital, Mumbai
Prahlad Rai Sodani	President, IIHMR University, Jaipur
Ram Prasad Meena	Nursing Superintendent, SMS Hospital, Jaipur
Ram Sevak Yogi	Head of Department of Neurosurgery, Jhalawar Medical College (JMC) & Nodal

	Officer for the organ donation team, JMC, Rajasthan.
Rashmi Gupta	Additional Director and State Appropriate Authority Organ Transplant, Rajasthan
Ravi Kumar	Consultant Nephrologist, Dialysis & Renal Transplant Physician, Narayana Hospital, Jaipur
Ravi Mohanka	Director of Liver Transplant and HPB Surgery, Sir HN Reliance Foundation Hospital, Mumbai
Ratna Devi	Head, Indian Alliance of Patients Group (IAPG) & CEO & Co-founder, DakshamA Health & Education.
Sandeep Attawar	Program Director & Chair, Institute of Heart-Lung Transplant, KIMS Hospitals
Sanjay Dixit	Director Medical Education, SAIMS Indore; Ex I/C Director, SOTTO MP
Sanjay Nagral	Senior Consultant & Director, Department of Surgical Gastroenterology, Jaslok Hospital & Research Centre, Mumbai
Shyam Sunder Nowal	Consultant Nephrology, Manipal Hospital, Jaipur
Sonal Asthana	Lead Consultant, HPB & Multiorgan Transplantation, Aster CMI Hospital, Bengaluru
Sreejith Sreekumar	Senior Consultant, Centre for Liver & Biliary Sciences, Max Hospital, Saket
Srishti Jain	Professor & Additional Director, Department of Critical Care, MGMCH, Jaipur & Director ECMO Centre.
Sujatha S	Associate Director - Courses, MOHAN Foundation
Sunil Shroff	Managing Trustee, MOHAN Foundation
Trilly Rachel Mathew	Director of Operations - India & Middle East, Alliance for Paired Kidney Donation
Vrinda Pusalkar	Secretary NATCO
Vrishali Patil	Joint Secretary, ZTCC Pune

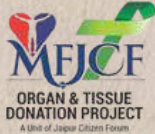






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