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With ESOT celebrating its 40th anniversary, what has been your biggest ESOT highlight to date?

The education and scientific pathway that ESOT has developed so far, from supporting future transplant professionals through our HESPERIS course to assisting fully educated professionals who enjoy innovative and top-class science through the ESOT Congress.

In short, ESOT provides a full range of diverse and multispecialty educational possibilities for the entire transplant community.

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Reflecting on the last 40 years, what role has ESOT played in advancing transplantation in Europe?

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Why are transplantation rates across European countries so varied?

Fundamentally, a higher number of deceased and living donors will support higher transplant rates. There are also country-specific factors, like the type of regulation for deceased organ donation (opt-out vs opt-in system), governmental support, including the reimbursement system and donation promotion activity, training programmes, the commitment of ICU personnel and public awareness.

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When exploring how we can tackle inequality in organ transplantation across Europe, what are the core areas we need to improve?

This requires country-specific analysis, but there are several benchmark parameters that can be useful for comparing results, including the number of transplants per type of organ, transplant centres, deceased donor reports, actual and utilised DBD/DBD, and donor transplant coordinators per type. Additional parameters include reimbursement for transplant activity and the availability of facilities and technology.

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Which groups face the most barriers to organ transplantation?

People with low health literacy, poor social support and psychomorbidity, as well as immigrants.

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Patient organisations and charities play a pivotal role in helping to tackle inequality in organ transplantation across Europe – what can they do?

Patient organisations and charities can advocate for the rights of patients to be assessed for transplantation regardless of their background.

This does not mean the right to be accepted.

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What steps can national transplant societies and local healthcare systems take to improve equality in organ transplantation across Europe?

Drive education through international internships, sister programmes and training; organise visits and interviews with national stakeholders; support networking between experts across the EU; and deliver research initiatives.

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The paradigm shift where ESOT advocated for person-centred transplant care as its mission, focusing on the person with an organ and not the organ in the person. The launch of the ESOT Patient Inclusion Initiative is a standout example.

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Regional variations in organ transplantation exist within European countries - what causes this?

Different organisational models for organ donation and transplantation; the inexistence of national authorities in charge of transplantation; the healthcare system (reimbursement programmes, immunosuppression coverage, etc.); the professional’s expertise and capacity; and the specific role of donation experts in hospitals.

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