The Australian Corneal Graft Registry

Dr Miriam C Keane PhD

The ACGR is funded by the Commonwealth Government of Australia via the Organ and Tissue Authority (DonateLife)

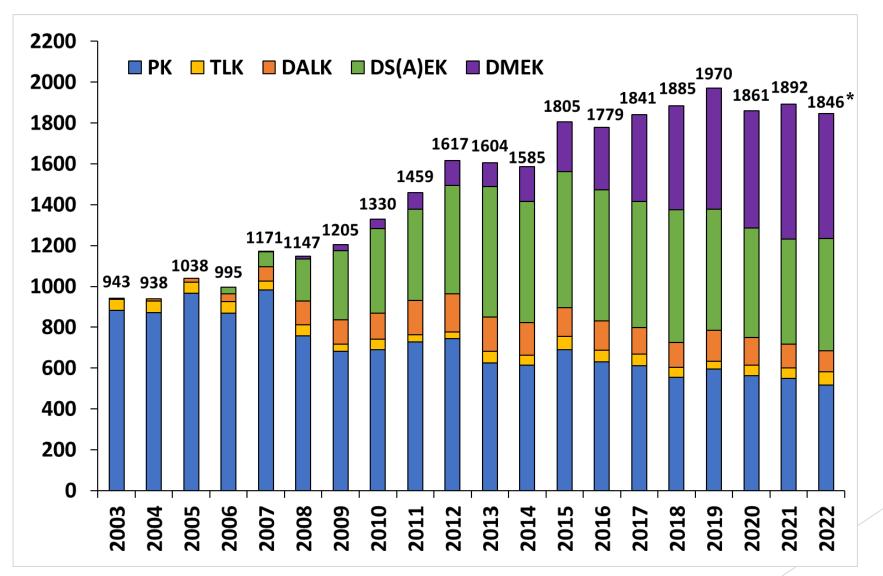
The ACGR Database - 16th Feb 2023

		Registered	Followed	Failed	EGF*	PNF*
	Total	44173	79 %	24%	7%	2%
1985 onwards	РК	27875	83%	26%	6%	<1%
	Patch/TLK	1770	74%	21%	12%	1%
	Limbal	92	74%	34%	15%	1%
2000 Introduced in 2006 2007	DALK	2222	63%	8%	3%	<1%
	DS(A)EK	7877	77%	24%	9 %	5%
	DMEK	4337	64%	17%	12%	9 %

EGF = Early graft failure, failed within 12 months of graft

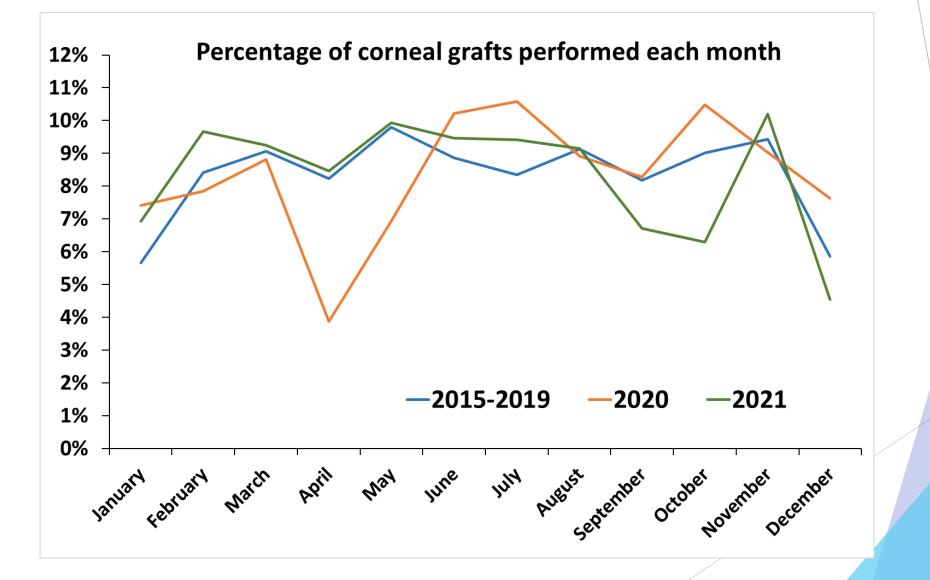
PNF = Primary non-functioning graft, surgeon specified that graft never cleared/attached

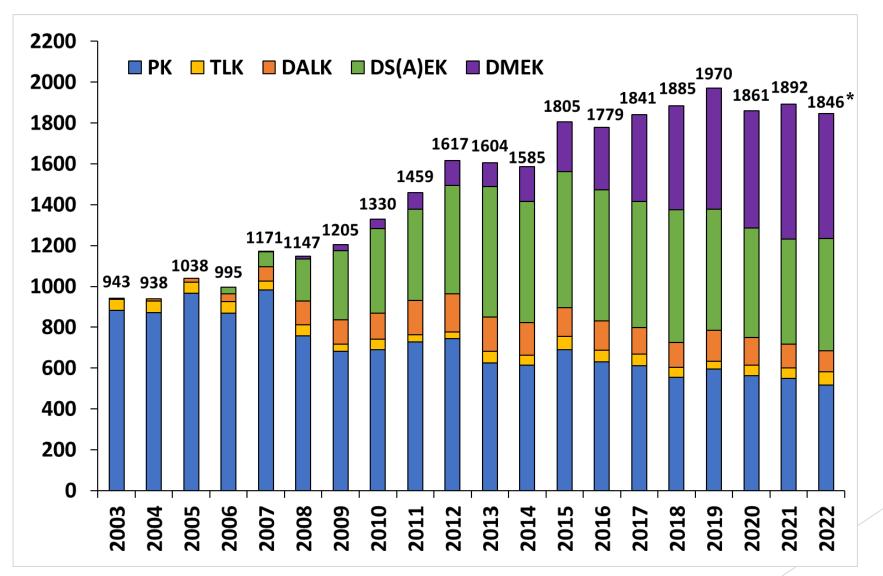
*Both likely to be underreported for grafts from 2021 and 2022



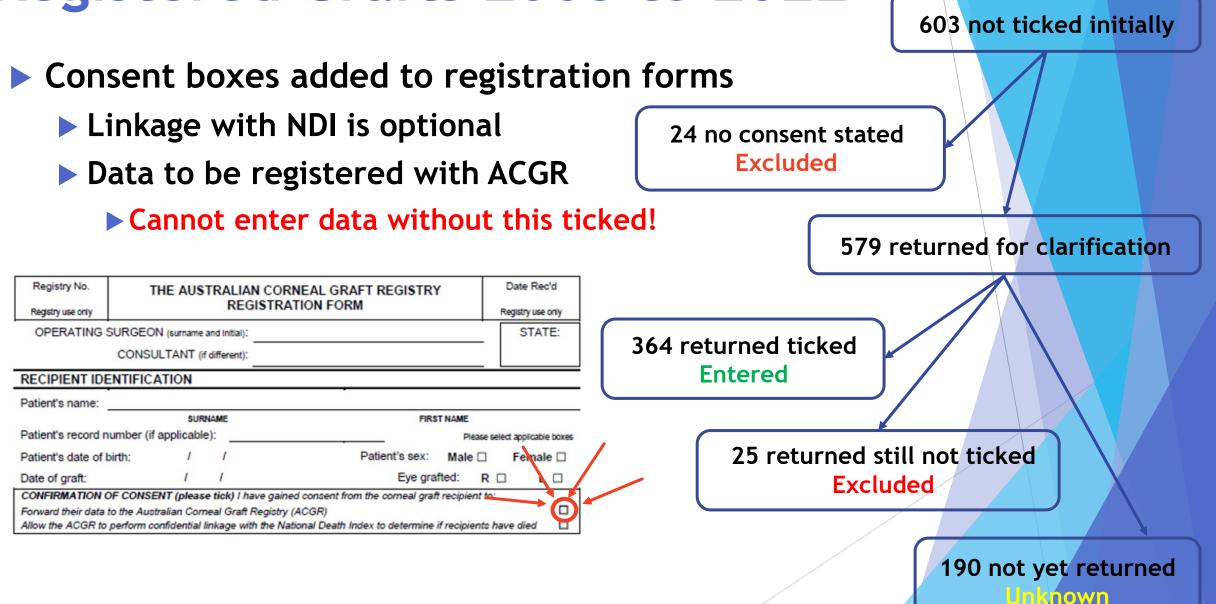
*Registrations for grafts performed in 2022 are still being received and entered

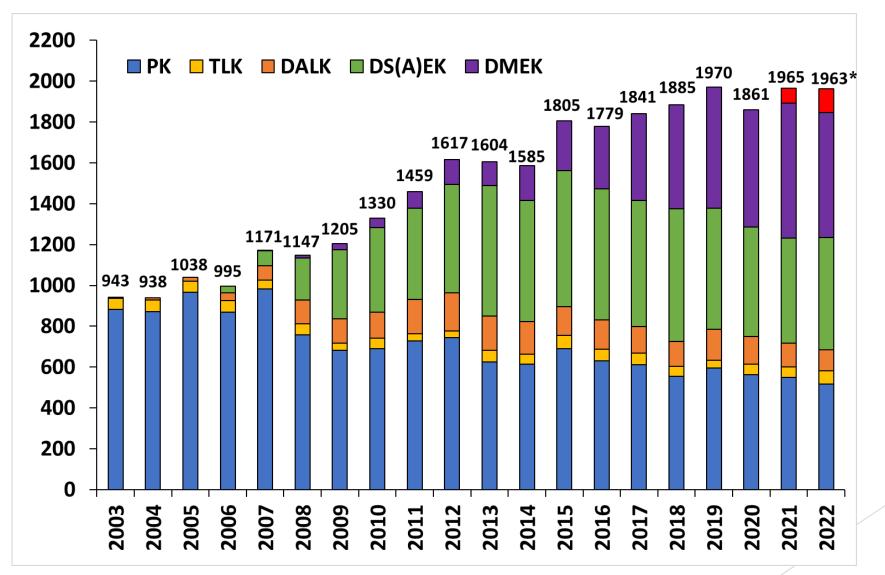
The effect of COVID-19 on Corneal Grafting in Australia 2020-2021





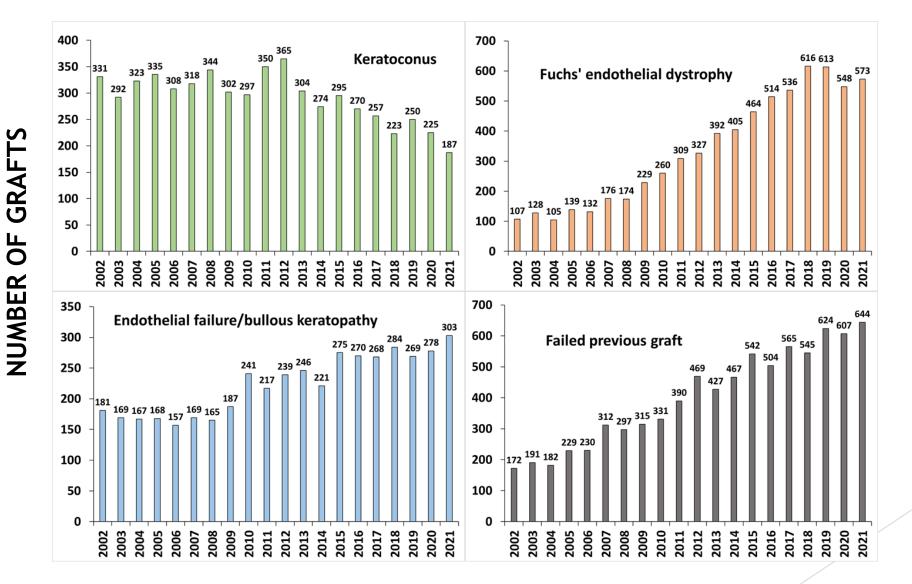
*Registrations for grafts performed in 2022 are still being received and entered





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Indication for Graft 2002 to 2021



YEAR GRAFT PERFORMED

Indication for Graft 2002 to 2021

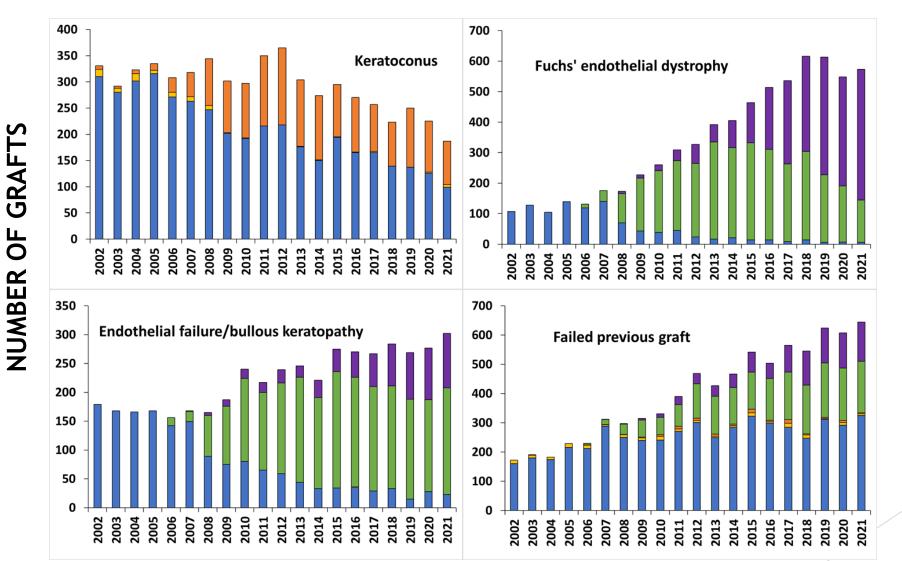
DMEK

DS(A)EK

DALK

TLK

🗖 PK

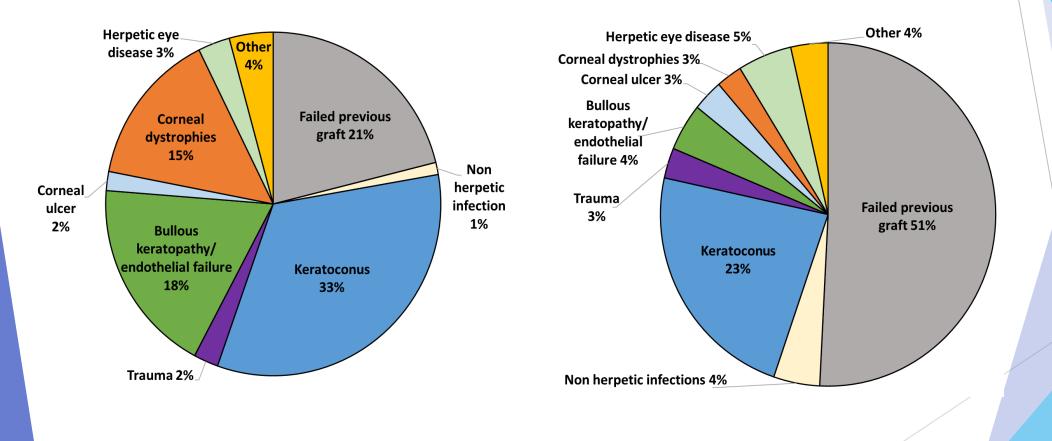


YEAR GRAFT PERFORMED

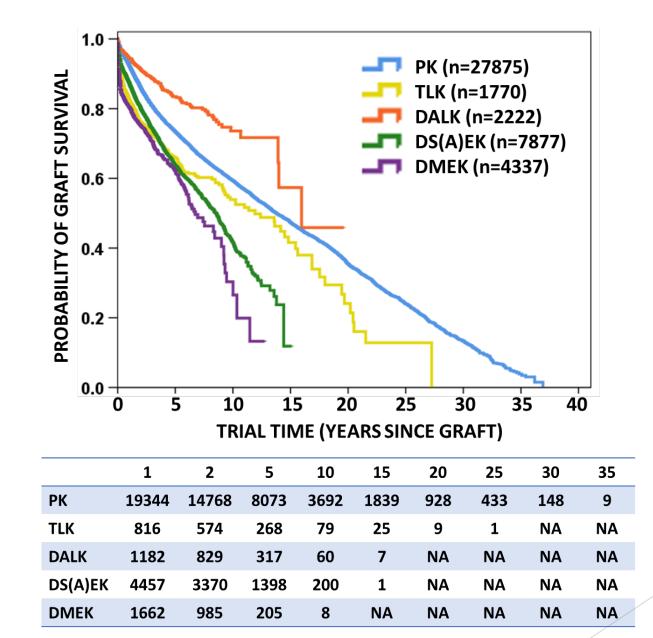
Shift in Indication for PK

2002 to 2006

2017 to 2021



Overall survival of registered grafts



Reasons for Graft Failure

Of registered grafts

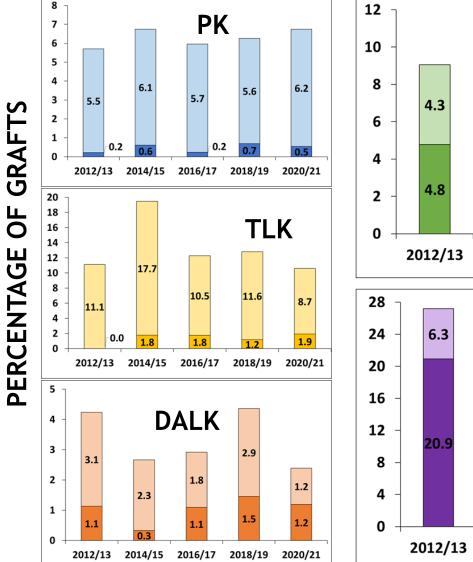
	PK	DS(A)EK	DMEK	All grafts
Endothelial failure	6%	9 %	5%	6%
Rejection	7%	3%	1%	5%
Primary non-function	<1%	5%	8%	2%

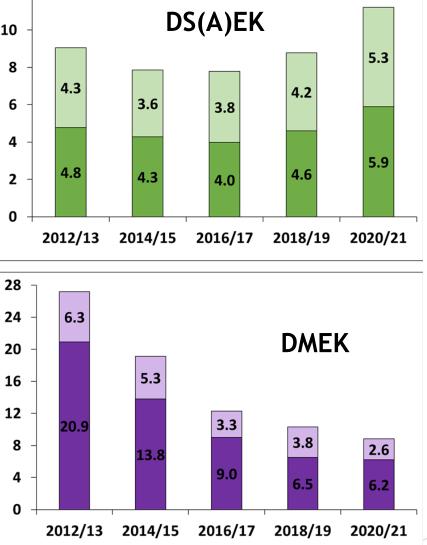
Of failed grafts

	PK	DS(A)EK	DMEK	All grafts
Endothelial failure	23%	40%	28%	25%
Rejection	26%	12%	8%	21%
Primary non-function	3%	22%	49 %	10%

Note: Reasons for failure of TLK and DALK not shown but included in overall figures

EGF and PNFG rates over time



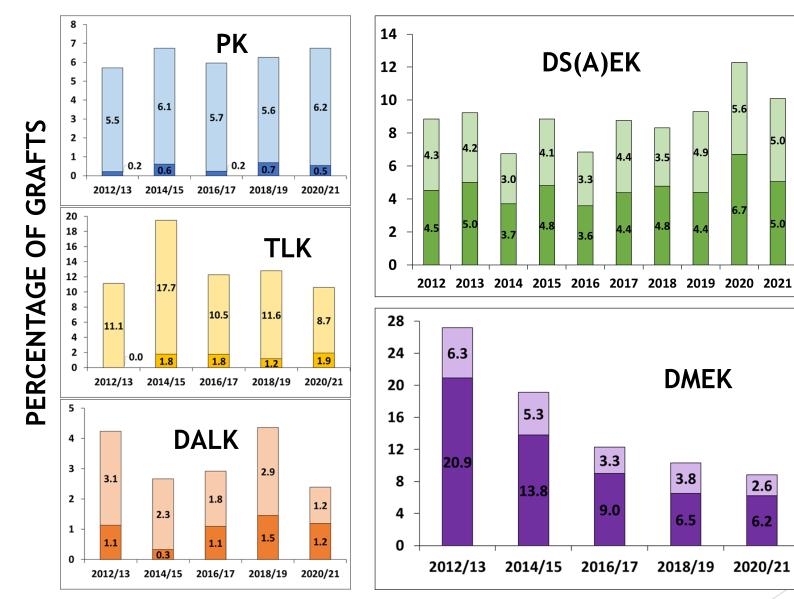


Darker portion = PNFG

Lighter portion = EGF (1 year)

YEAR GRAFT PERFORMED

EGF and PNFG rates over time



Darker portion = PNFG

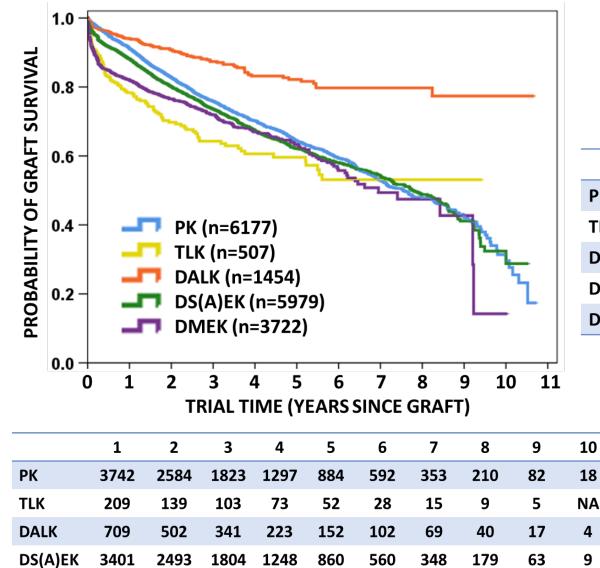
5.0

5.0

Lighter portion = EGF (1 year)

YEAR GRAFT PERFORMED

Survival of registered grafts 2012-2021



DMEK

Survival probability

	3m	6m	1y	2y	5y
РК	0.97	0.95	0.91	0.83	0.64
TLK	0.89	0.83	0.78	0.70	0.60
DALK	0.97	0.96	0.94	0.91	0.82
DS(A)EK	0.94	0.92	0.88	0.80	0.62
DMEK	0.87	0.85	0.82	0.77	0.63

2021/22 Major Report

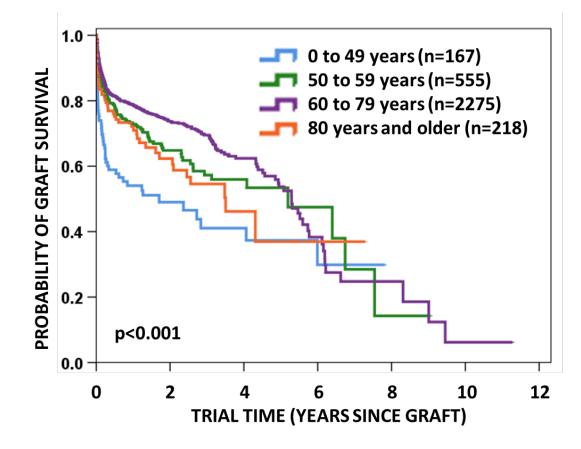
Latest major report released May 2022

- Census date 31st December 2020
- Individual chapters per graft type
 - Univariate Kaplan-Meier survival curves
 - Cox proportional hazard regression
 - Best corrected visual acuity in surviving grafts
- Comparisons across graft types
- Available: <u>https://doi.org/10.25957/9vyp-0j93</u>

2021/22 Major Report - DMEK

- 3215 grafts, 1756 followed
 - > 2018 report: 1250 graft, 600 followed
- Significant results
 - Donor age
 - Donor and recipient sex
 - Graft era
 - Graft size
 - Use of Geuder injector
 - Surgeon caseload and follow-up

DMEK - Donor Age

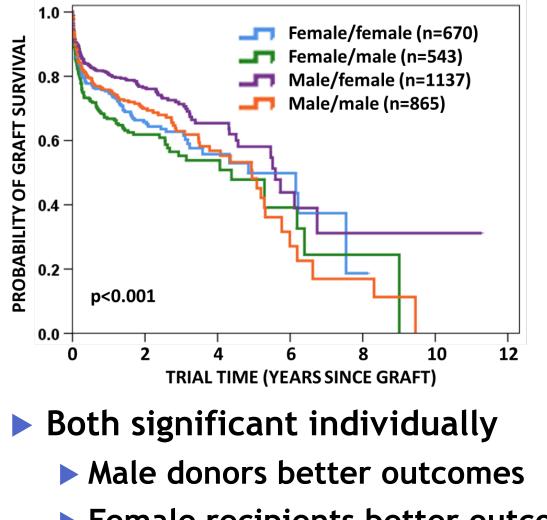


Under 50 years significantly poorer than 60 to 79 years

Hazard ratio: 1.62

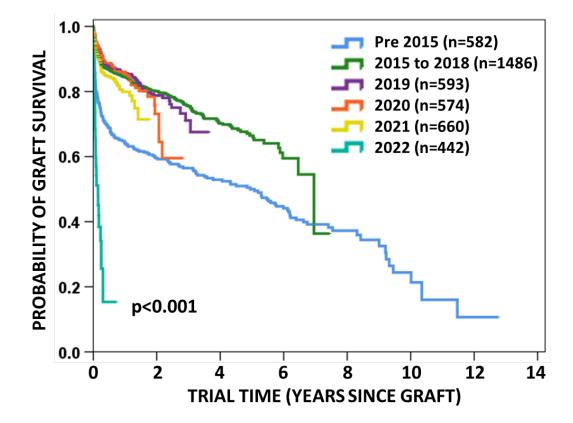
No significant differences 50+ years

DMEK - Donor and Recipient Sex



- Female recipients better outcomes
- M>F better than F>M and F>F

DMEK - Graft Era - Current Data

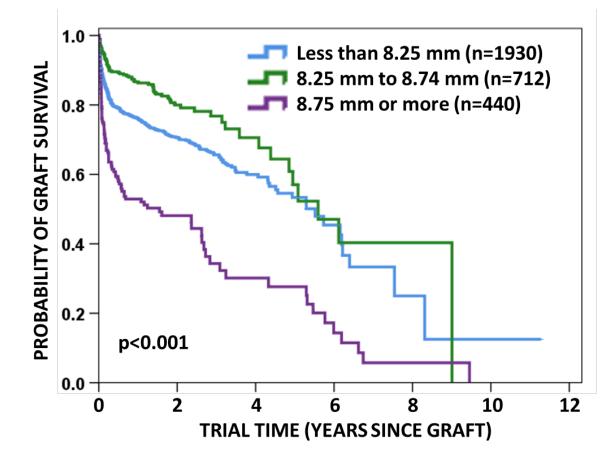


- 2015 to 2018 better than pre 2015
- Lag time to follow-up for 2019 and 2020

Results similar to 2015 to 2018

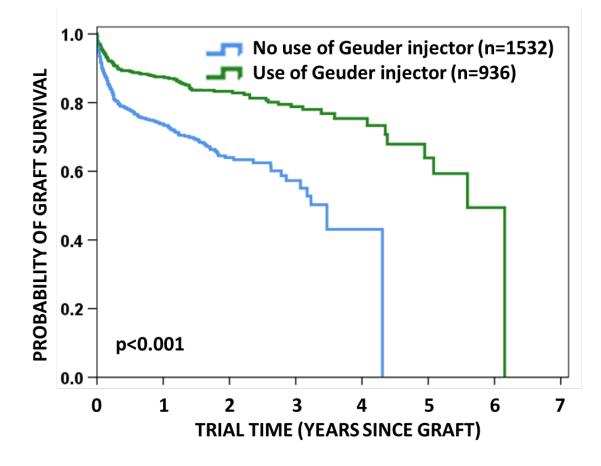
Helps to account for effect of lack of FU in Cox model

DMEK - Graft Size



8.25 mm to 8.74 mm significantly better
 HR 1.50 vs <8.25 mm; HR 1.91 vs 8.75+ mm

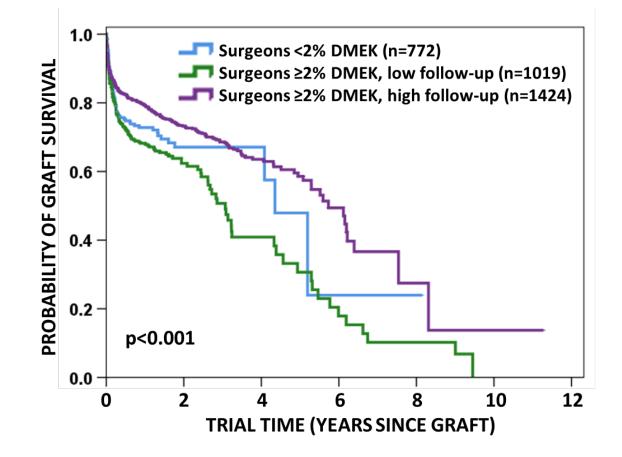
DMEK - Geuder Injector



Not included in 2018 due to lack of data

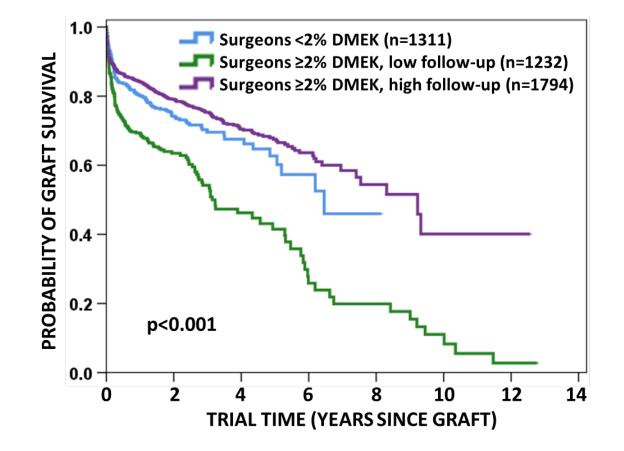
HR 1.97 vs not used

DMEK - Caseload and Follow-up



- Surgeons with high follow-up significantly better
 HR 1.70 low volume, HR 1.73 low follow-up
- Helps to account for effect of lack of FU in Cox model

DMEK - Caseload and Follow-up - Current Data

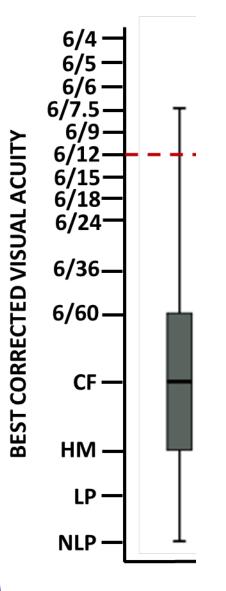


Low caseload surgeons getting closer
 Improved 5 year survival

Reporting of Visual Acuity Outcomes

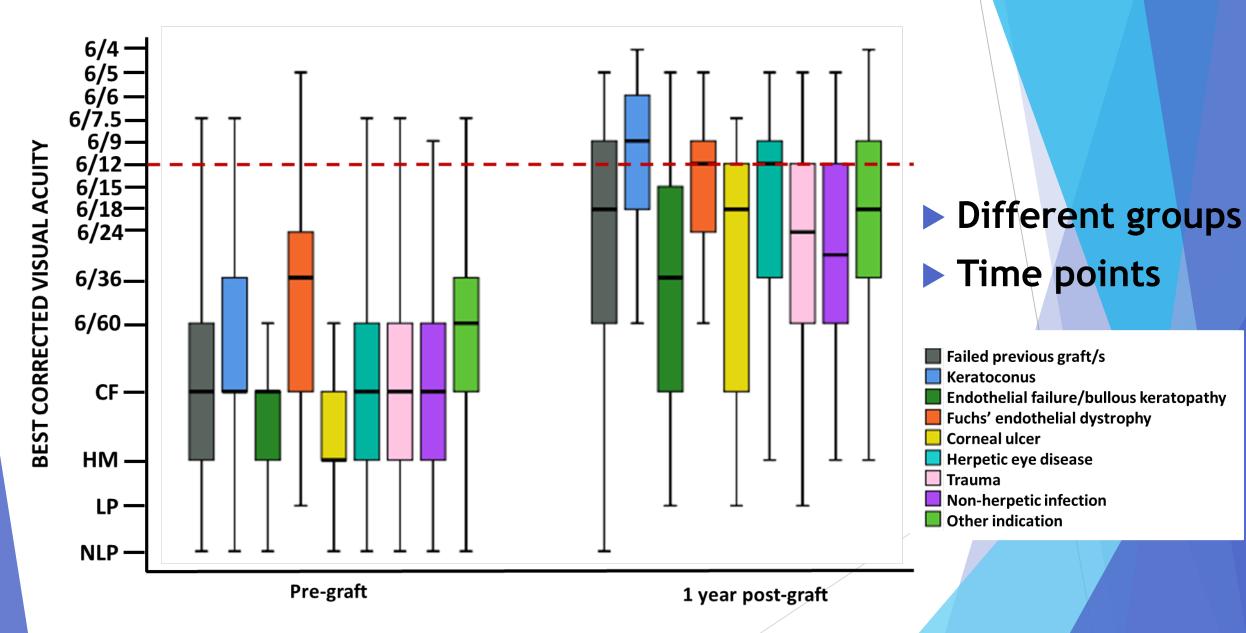
- Clearer way to display data
- Multiple time points
- Allow easy comparison between groups
- Achievement of 6/12
- Focus on surviving grafts

Reporting of Visual Acuity Outcomes

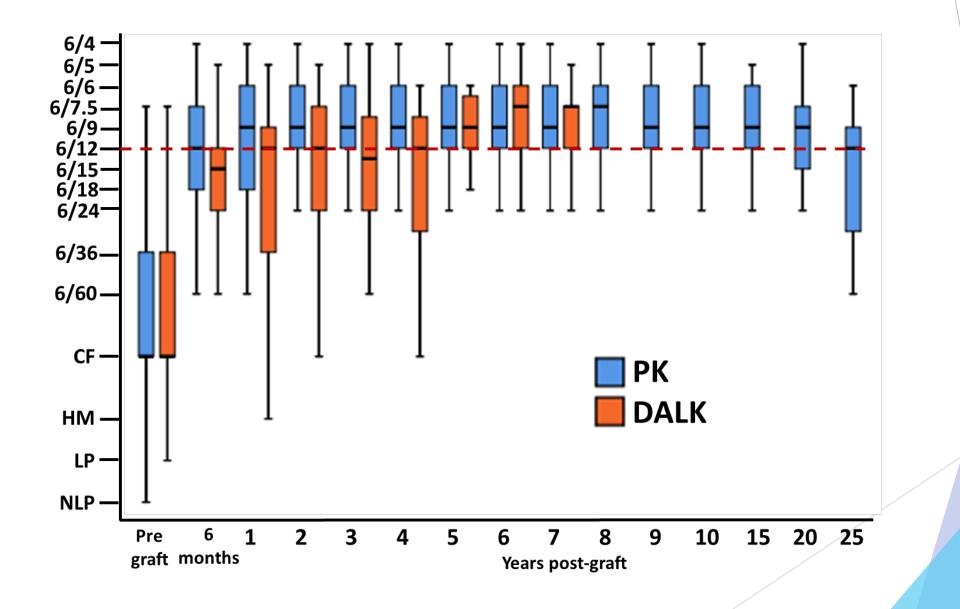


- Box and whisker plots
 - BCVA on y-axis (improving)
 - Dashed line shows 6/12 level
 - Line: Median BCVA achieved
 - Box: Inter-quartile range (50% of cases)
 - Whisker: Range (excluding outliers)

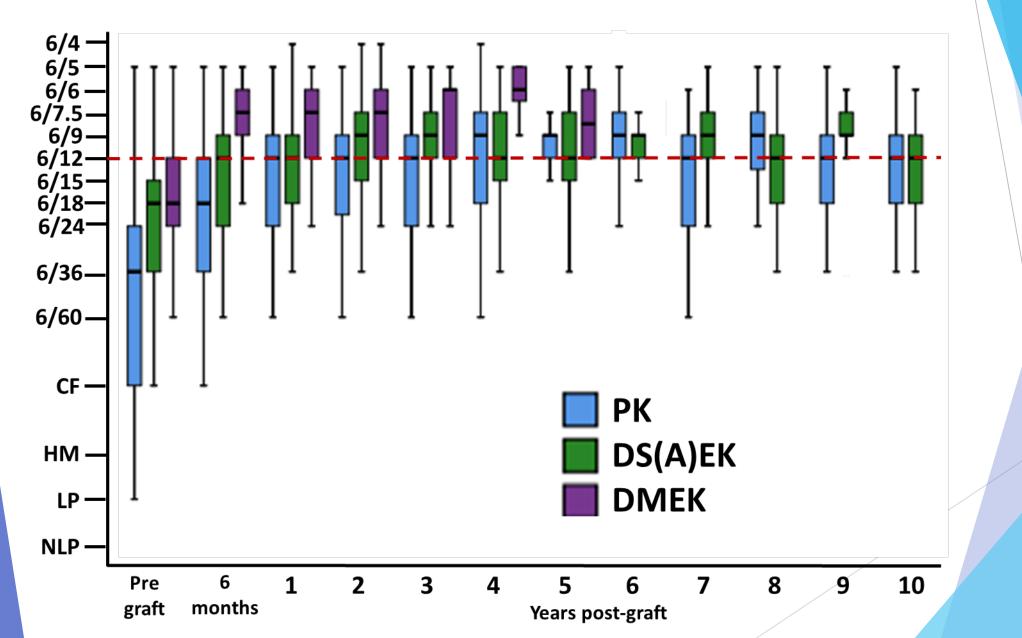
Visual Acuity Outcomes - PK



Visual Acuity Outcomes - Keratoconus



Visual Acuity Outcomes - Fuchs' Endothelial Dystrophy



Summary

- Continued shift in graft type
- Some impact of COVID,
 - Previous levels maintained
- Ongoing changes in indications for graft
 - Increase in repeat grafts (PK)
- Reasons for failure
 - PNFG rates reducing for DMEK
 - Endothelial failure for DSEK
- 2021/22 Major report
 - Factors affecting DMEK survival
 - Analyses of BCVA outcomes

Acknowledgments

- Contributing surgeons and eye banks
- The Australian Government Organ and Tissue Authority
- The ACGR is a declared quality assurance activity under the Commonwealth Qualified Privilege Scheme.
- Assistance with updating the records held within the database is provided by the Australian Institute of Health and Welfare through linkage with the National Death Index.

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2021/22 report: https://doi.org/10.25957/9vyp-0j93









