



... and its Sections

| Cell Transplant Society | International Pancreas and Islet Transplant Association | International Society for Organ Donation & Procurement |
| Intestinal Transplant Association | International Xenotransplantation Association | Transplant Infectious Disease |

August 2009 • Volume VII • Issue II

OFFICIAL NEWSLETTER OF THE TRANSPLANTATION SOCIETY

Women Leaders in Transplantation

A special task force is underway to raise the profile of women leaders in transplantation with the goal to provide nurturing mentorship of young women in the development of their transplant careers.



First meeting for WLIT initiative (photo taken in Boston - May 20, 2009)

As the number of women transplant professionals increases exponentially, there is an ever increasing need for today's women leaders to provide support and guidance to future generations of transplant professionals. This TTS initiative looks to create and cultivate the relationships necessary to enable today's women to reach their full potential in the field of transplantation.

A special task force is underway to raise the profile of women leaders in transplantation headed by Kathryn Wood. The goal is to provide nurturing mentorship of young women in the development of their transplant careers.

TTS is planning a number of networking events and would like to contact all women working in the field of transplantation. This programme is targeted at trainees as well as established clinicians and scientists. To help assess the needs and views of women transplant professionals at every stage of their career, TTS has developed an online survey. TTS encourages all women working in the field of transplantation to express their views by completing the survey on the TTS website www.transplantation-soc.org and to keep up to date with the initiative by subscribing to the Society's mailing list for women transplant professionals.

Visit our website and complete a short survey on Women Leaders in Transplantation & join our mailing list for the latest news!

Supported through a grant from



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THE FIFTH DECADE OF INTERNATIONAL COOPERATION, INNOVATION, GROWTH AND PROGRESS

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PRESIDENT'S MESSAGE

Jeremy R. Chapman



Dear Members,

Webcasts of the 2008 Sydney Congress are still available for another few months and the easiest way to get there is via the TTS member website www.tts.org.

The future meetings of TTS this year are set out through the pages of the newsletter but let me draw your attention to the ISODP in Berlin and the joint IXA and IPITA meeting following soon after in Venice. Abstracts for the latter meeting have closed and we have record numbers - not surprising since the program is excellent and the venue city is hard to better. ITA is meeting in Italy too - in Bologna, Italy from September 9-12 and so Italy is the flavour of the year for TTS.

Vancouver 2010 is taking shape nicely - not only is the convention centre completed but it is one of the best centres in the world. We will all enjoy the modern facilities and its high tech capacities linked as it is to the city hotels by easy walking distances. Paul Keown and the Canadian team are working hard to finalise the program. Put it in your diary now: August 15-19, 2010.

CME is heating up as a topic of conversation. The spread of formal CME requirements for most clinicians in practice is a continuing theme. TTS is taking a number of initiatives to make the recording of the CME that you already do easy and straightforward. We have plans for augmenting the webcasts of our meetings so that if you view them you will get CME points, we are working hard to get Journal refereeing similarly recorded. We have the capacity to endorse meetings all over the world - so if you think that we can help you, please email me: president@tts.org

I look forward to meeting you around the world over the next year or so - if you have an idea, if you want to get more involved in your professional society, if you can help - then email me or call the office - we speak English, French, Japanese, Italian, Portuguese and Spanish so you should be able to get through to us.

With Sincerest Regards,

Jeremy R. Chapman
President, The Transplantation Society
president@tts.org

TTS is expanding and heading fast for 5,000 members spread around the world with the goal of 10,000 within reach. Two national transplant associations are now fully affiliated with TTS - Canada and Australia/New Zealand. The Swiss and many others are now joining TTS through this mechanism. Half the membership fee for TTS, all the benefits of membership of TTS just from joining your national society and simplicity for everyone. I urge you to talk to your national council and ask if they are talking to TTS about affiliation.

2009 UPCOMING MEETINGS



XIth International Small Bowel Transplant Symposium

Bologna, Italy • Royal Hotel Carlton
September 9-12, 2009 • Chair: Dr. Antonio Pinna
www.isbts2009.com



2009 Organ Donation Congress (10th ISODP Meeting)

Berlin, Germany • Berlin Congress Center
October 4-7, 2009 • Chair: Dr. Günter Kirste
www.isodp2009.com



IPITA – IXA Joint Congress 2009

Venice, Italy • Venice Lido Congress Center
October 12-16, 2009 • Chair: Dr. Emanuele Cozzi
www.ipita-ixa2009.org

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2010 CONGRESS CENTRE UNVEILED

XXIII International Congress Venue is "Breathtaking"



**XXIII International Congress
of The Transplantation Society**

AUGUST 15-19, 2010 | VANCOUVER, CANADA



On April 3, 2009, the Premier of British Columbia, and a host of federal dignitaries and special guests took part in the Ribbon Cutting and Grand Opening of the beautiful \$900-million West Wing of the Vancouver

Convention Centre - the venue for the XXIII International Congress of The Transplantation Society in Vancouver from August 15-19, 2010.

Dr. Paul Keown, Chair of the Congress, and several other members of the National Organizing Committee, were honored to cut the ribbon for the beautiful facility, named "World's Best Convention Centre" by AIPC in 2008 before construction was even complete. The Premier highlighted the XXIII Congress in his remarks, due to its size and economic impact on the city. Delegates from around the world will be delighted with this fantastic venue with its state-of-the art technical facilities for all-electronic meetings, boasting a 6-acre energy-efficient "green roof", and full accessibility for the physically challenged.

The Convention Centre is within walking distance of all the major Congress hotels and many world-class restaurants and shopping. It is located one block from Vancouver's cruise ship port, as well as a new station for the Canada Line, a new rapid transit connecting visitors directly to the International Airport. Nature lovers will enjoy the 15-minute walk along the Seawall to one of the city's most iconic and famous landmarks, Stanley Park.

The groundbreaking translational program will draw together experts from around the world and will encompass advances in genomics, proteomics, molecular analyses of human diseases, innovations in biological and pharmacological immunosuppression, novel approaches to tolerance induction, technical developments in nanomedicine, robotic surgery and imaging, advances in clinical practice and many other topics at the cutting edge of stem-cell, cellular and solid organ transplantation. The world-famous Faculty for the Congress will be announced very shortly on the Vancouver 2010 Congress website. Online abstract submission for the Congress opens in September 2009, with registration opening online in November. Please visit our website at www.transplantation2010.org for further information.

The social program highlighting our West Coast cuisine, unique culture and arts, combined with the breathtaking natural beauty and extensive pre- and post-congress meetings and tours will underscore the role of Vancouver as one of the world's most popular tourist destinations.

The Cultural Evening on Tuesday, August 17th, 2010, will make available some of Vancouver's finest performing arts. Delegates may enjoy many options including a spectacular performance by Ballet BC; the internationally-acclaimed Bard on the Beach Shakespeare festival overlooking the magnificent Pacific Ocean; an exhilarating night with the Vancouver Theatre sports League, and many, many more. The Congress Dinner on Wednesday, August 18th, 2010, will feature exceptional West Coast cuisine, with a planned performance by Cirque du Soleil, the world renowned Canadian circus-style stage show. Preceding and following the Congress, delegates will have the opportunity to embark on one of many post-Congress tours, including an Alaskan cruise, a Canadian Rockies rail tour, or a day trip to Whistler, co-host of the 2010 Winter Olympic Games.

The National Organizing Committee is pleased to offer travel award scholarships to successful applicants, as outlined below. Full details, including application guidelines are available on the Congress website address highlighted below:

TTS Astellas Young Investigator Awards (3,000 US dollars)

Ten (10) awards for Young Investigators will be given to assist with travel and registration costs. These will be awarded to the top 10 scored abstracts whose first author applies for the award and who is under the age of 35yrs. Applicants must complete the appropriate section on the abstract submission and registration form. These awards were made possible through an unrestricted educational grant from Astellas.

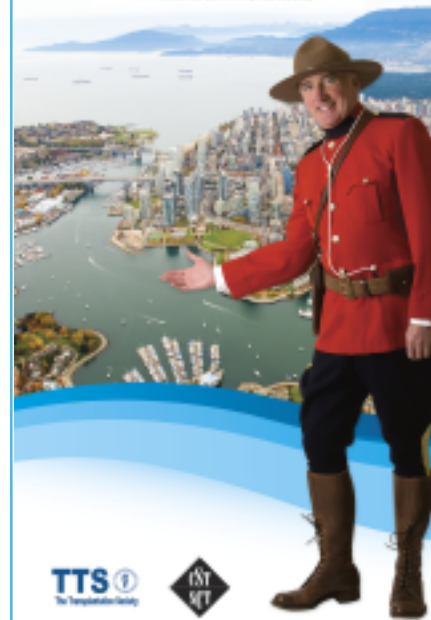
Successful applicants will be notified before 1 June 2010. For more information about the XXIII International Congress, please visit our website at www.transplantation2010.org.

– **Dr. Paul Keown, Chair**
2010 Transplant Congress
www.transplantation2010.org



**XXIII International Congress
of The Transplantation Society**

AUGUST 15-19, 2010 | VANCOUVER, CANADA
WWW.TRANSPANTATION2010.ORG



As an NGO of the World Health Organization in matters of organ donation and transplantation, The Transplantation Society has been very active in promoting the revised Guiding Principles of the WHO that were adopted by the WHO Executive Board in January 2009. President Jeremy Chapman and I represented TTS in a WHO Regional Consultation in Kuala Lumpur, Malaysia in June 2009, with Asian representatives participating from Japan, Korea, the People's Republic of China, Malaysia, Singapore, the Philippines, Mongolia, Vietnam, Fiji, and Australia. TTS also participated in a WHO meeting of Central Asian States including Armenia, Georgia, Belarus, and Uzbekistan, in Chisinau, Moldova.



The WHO Guiding Principles have been endorsed by the Council of The Transplantation Society. Recently, a Resolution was drafted by the Secretariat of the WHO to solicit support for the Guiding Principles by the World Health Assembly. The WHO Resolution is "committed to the principles of human dignity and solidarity which condemn the buying of human body parts for transplantation and the exploitation of the poorest and most vulnerable populations in the human trafficking that result from such practices".

This Resolution was originally intended for presentation to the May, 2009 World Health Assembly but the swine flu pandemic cut short the agenda. Thus, the Resolution has been postponed for consideration in 2010. Meanwhile, the Guiding Principles that have been endorsed by the WHO Executive Board are an important official document that is now provided in concert with the Declaration of Istanbul.

The WHO Guiding Principles are being targeted to government officials, ministries of health, and regulatory authorities. The Declaration of Istanbul has been directed towards professional societies, now endorsed by more than 70 organizations throughout the world. Nevertheless, Ministries of Health, for example in India, Malaysia, Egypt and China have made formal pronouncements in support of the Declaration of Istanbul.

The Declaration of Istanbul consists of four main sections: Preamble; Definitions; Principles; and Proposals. The essential principles of the Declaration of Istanbul call for an end to organ trafficking and commercialism and transplant tourism. Live organ donors as well as transplant recipients should receive proper care and opportunities for deceased organ donation should be enhanced. Finally, all countries with transplantation services should implement equitable and regulated systems for organ donation and allocation.

Some of the recommended Istanbul Proposals — or example, to establish deceased donation or to provide insurance for live donors — represent a guiding beacon to be achieved as best practice, especially in resource constrained environments or in countries that have yet to address national healthcare. Endorsement of the Declaration conveys an intent to implement the Declaration of Istanbul Proposals. The Declaration of Istanbul Custodian Group plans to work with representatives of WHO member states to fulfill the Principles of the Declaration of Istanbul which are in concert with the WHO Guiding Principles.

– Francis L. Delmonico
Director of Medical Affairs
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nKOL MEETING REPORT • AGRA, INDIA • APRIL 4-7, 2009

The nKOL meetings, established by Kathryn Wood, were intended to provide a forum for scientific exchange between established scientists and clinicians who are members of The Transplantation Society with younger colleagues who will be future leaders in the field.



The majestic city of Agra, proved to be an ideal backdrop for the eleventh nKOL meeting. Consistent with the spirit of the nKOL meetings, the Agra meeting was an informal intimate gathering that provided opportunity for scientific exchange, as well networking for the 29 Indian KOLs

and 17 nKOLs who attended. India ranks second only to the United States in the number of living donor kidney transplantations performed annually and there is considerable clinical and developing research expertise. The meeting program was

developed with the invaluable input of Drs. George T. John, Vijay Kher, Vivekanand Jha, Georgi Abraham, and Sandeep Guleria. Topics discussed included immune monitoring, management of the sensitized patient, as well as review of research activity in a number of leading Indian transplant centers. The meeting also included an opportunity to review some of the milestones in Indian transplantation, an overview of plans for a national transplant registry, renal transplantation in public hospitals, as well as new national Indian Organ Transplant policy including plans to support deceased organ donation in the country. TTS was represented by Professor Chapman, and Drs Delmonico, Suthanthiran and Gill. The conference was extremely well received and the goals of promoting a forum for scientific exchange as well as highlighting future leaders in the Indian transplant community were clearly achieved. TTS would like to thank Sunil Bajaj and his team from Panacea Biotech for supporting the Agra meeting through an unrestricted educational grant.



Bologna • Sept 9-12, 2009

The XI International Small Bowel Transplant Symposium will be held in Bologna (Italy) from September 9 to 12, 2009 at the Carlton Hotel.

This is the biannual symposium of the Intestinal Transplant Association (ITA), a section of The Transplantation Society.

This meeting is designed for the health professionals transplant team including surgeons, physicians, nurses, transplant coordinators, nurse practitioners, physician assistants, dietitians, pharmacists, social workers, physical therapists, occupational therapists, and others who are interested in the care of intestinal failure patients and intestinal transplant candidates and recipients.



The Symposium in Bologna will provide state-of-the-art information with practical management strategies and interventions for those involved in the care of children and adults with intestinal failure and following intestinal transplantation.

Medical and nursing care strategies that enhance survival and contribute to an optimum outcome will be presented.

Complications related to infection and rejection, guidelines for managing nutrition, psychosocial outcomes, rehabilitation, and physician/nursing management issues will be addressed. (www.isbts2009.com)

– Antonio D. Pinna, Loris Pironi and Augusto Lauro
Congress Chairs

Congress Update • Berlin • Oct 4-7, 2009

The ISODP meeting will be held October 4-7, 2009 in Berlin, Germany. Don't forget to register and make sure to sign up for membership for both ISODP and TTS to get the best rates. The ISODP website is www.isodp2009.org.



World Organ Donor Day will be held October 4, 2009 beginning at 14:00 in front of the Brandenburg Gate. This celebration will have invited guests such as the president of Germany, rock stars, and tributes from donors and recipients from all over the world.

Dr. Gunter Kirste, President-Elect of ISODP and Medical Director of DSO in Germany is host to this year's meeting. The program is diversified and will have many speakers on various topics on organ donation, preservation, ethics and more ... it will prove to be a very exciting meeting.

ISODP is going through a strategic planning process and would like your input. Look for a survey this summer to get your ideas for long term planning for education, goals for improving organ donation, and the future of ISODP. Kimberly Young from Canada, our ISODP secretary, has agreed to organize this survey.

ISODP is looking for "bids" for the ISODP 2011 meeting. If you would like more details or are interested in an application to host this meeting, you can e-mail Howard M. Nathan, President of ISODP, at hnathan@donors1.org.

Look forward to seeing you in Berlin in October!

– Howard M. Nathan, President ISODP



IXA UPDATE
INTERNATIONAL XENOTRANSPLANTATION ASSOCIATION

JOINT IPITA/IXA CONGRESS
VENICE • OCTOBER 12-16, 2009



Clinical Islet Trial Receives Conditional Approval in New Zealand

New Zealand's Health Minister has approved a clinical trial of xeno islet transplantation, in response to an application from LCT, Ltd. A public discussion of the protocol is scheduled for August under the sponsorship of a local news organization, and LCT expects to initiate the trial in September. Available elements of the NZ review reflect full engagement of the NZ regulatory agency and the public in a relatively transparent, evidence-based assessment of a candidate xeno-based therapeutic approach. Published preclinical evidence does not suggest that LCT's islet encapsulation approach is likely to offer benefit to trial participants, and thus this trial does not meet IXA's published Interim Recommendation criteria (www.transplantation-soc.org/downloads/IXA-Islet-guidance-2-17-08.pdf). However, IXA supports the process by which this decision was reached.

WHO Evaluates International Regulations for Xenotransplantation

WHO and IXA jointly sponsored a conference in Changsha, China in November, 2008. The resulting "Changsha Communique" <http://www.who.int/transplantation/xeno/ChangshaCommunique.pdf>, was developed to provide internationally applicable guidance to

national regulatory authorities with respect to evaluation and regulation of clinical xenotransplantation trials. This guidance is scheduled to be formally considered by the World Health Assembly during 2010.

Consensus Recommendations for Xeno Islet Transplantation

IXA has completed substantial work on Consensus Recommendations for Islet Xenotransplantation Trials, under the guidance of a multidisciplinary group headed by Bernhard Hering. Recommendation of this group were released for public comment in July of 2009, and will be published in Xenotransplantation in conjunction with the Venice meeting. During the next 18 months IXA will convene similar expert panels to develop Consensus Recommendations for other emerging xeno-based cell and organ transplant therapies.

Venice 2009

The Joint IPITA/IXA meeting will convene in Venice from October 12-16, 2009. We hope you will join us to learn about recent progress in xenotransplantation, and for a special symposium on management of the sensitized patient, which will be held on October 14. Visit the website for more details:

www.ipita-ixa2009.org

From May 7-10, TTS organized the third New Key Opinion Leader (nKOL) meeting in Latin America that was held in Salvador, Brazil and was Co-Chaired by Dr. Mario Abbud-Filho and TTS Councilor Dr. Federico G. Villamil. During the opening ceremony, Dr. Silvano Mario Attilio Raia was honored as Pioneer in Transplantation for having performed the first live donor liver transplantation worldwide. The scientific program was divided in 8 sessions entitled cellular therapy, organ donation and allocation, clinical issues, ethics, acute rejection, immunosuppression, basic science and liver allocation by MELD and covered topics on kidney, liver heart and intestinal transplantation. Salvador gathered 26 pairs of established TTS leaders with their corresponding fellows or junior faculty coming from each of the global regions, 20 from Latin America, 3 from North America and one each from Asia, Europe and Oceania. As expected, the presentations had a high level of technical expertise, encouraged open discussions with the audience and allowed interactions between disciplines. However, as expressed by distinguished participants Drs. Richard Freeman and Dr. Alex Bishop "The unique aspect of these meetings is to have the opportunity to hear about the reality and challenges of organ donation and transplantation in different areas of the world".



Not surprisingly, use of generic immunosuppressive agents and copies, organ donation and allocation, transplant registries, organ commerce and use of HIV- or Chagas-positive donors in Latin America were the topics of major interest and the ones who generated the deeper and longer discussions. The small size and the informal format of the meeting favored a spirit of collegiality and allowed permanent interaction between clinicians and basic scientist. Many future research collaborations between participating groups started at this meeting. Overall, delegates thought this was a very valuable and well organized meeting. "What we liked more was the format of the presentations with KOL-nKOL pairs covering very diverse topics and encouraging nice discussions" said Dr. Villamil while summarizing the opinion of participants. TTS would like to thank Wyeth Pharmaceutical for making this meeting possible through an unrestricted educational grant.

LEGISLATIVE NEWS • TRANSPLANT TOURISM AGAINST ISLAMIC LAWS

SHARIAT COURT OF PAKISTAN DECLARES THAT TRANSPLANT VENDOR AND TOURISM ARE AGAINST ISLAMIC LAWS.

The Shariat Court, a bench of the Supreme Court of Pakistan, after holding 8 hearings in 3 cities, recently declared that sale or purchase of human organs and transplantation of foreigners who do not have legitimate family donors is against the spirit of Islamic Laws.

Ten years ago, in the absence of national laws, there was a shift in Pakistan from living related kidney transplants in public sector hospitals to unrelated commercial transplants in private centres where the poor became 'donors' for the rich. Renal transplantation was not possible for more than 90% of Pakistani patients with renal failure, while rich buyers from Europe, Middle East and India, excluded from India by their changes in the law, made Pakistan the "cheapest organ bazaar in the world".

The Sind Institute of Urology and Transplantation (SIUT) in Karachi, performing over 500 transplants a year, became a vanguard in the struggle against transplant tourism. Its policy for over two decades has been to provide integrated dialysis and transplantation free of cost to all, irrespective of cast, color and creed.

The World Health Organisation and TTS supported SIUT's approaches and with mounting pressure from civil society, the Pakistani government passed in September 2007 the "Human Organ and Tissue Ordinance 2007". With this ordinance, commercial unrelated transplants of both locals and foreigners were banned. It allowed donation from living related and in case of non availability of family donors, permitted only unrelated altruistic donors after rigorous investigations.



Soon after passing the legislation the powerful commercial lobby started a campaign against the law implying that it was restrictive and patients were dying due to shortage of

organs. A sinister move was made to bring amendments in the Ordinance in the National Assembly to permit unrelated donors to be paid by the recipients and to allow transplant of foreigners (supposedly to help economy of the country). A select committee of the National Assembly rejected these amendments in January 2009 and the Ordinance became a law and part of the Constitution of Pakistan. The failure did not deter the commercial lobby and they moved to the Shariat Court.

The recent verdict of the Shariat Court has now hopefully ended all avenues for organ sale and transplant tourism in Pakistan. It is a victory for all of the profession both locally and internationally who have helped in the struggle towards prohibition of organ sale and transplant tourism in Pakistan. The promulgation of the transplant law will eventually open the door to deceased donor transplantation both of the kidney and of other solid organs in Pakistan.

– Dr. S. Adibul Hasan Rizvi, President
Transplantation Society of Pakistan

SPECIAL PROFILE

2008 TTS Young Investigator Awards



Ten TTS-Astellas Pharma Young Investigator Awards were presented to TTS members with the highest scoring abstracts during the Sydney Congress. TTS will be profiling the award winners throughout the year in the Tribune.



Jenna Iwasenko – *Patient outcomes in two steroid-free regimens using Tacrolimus monotherapy after Daclizumab induction and Tacrolimus and MMF in liver transplantation.*

She recently completed her PhD (thesis submitted) in the Virology Division, Department of Microbiology, SEALS and the School of Biotechnology and Biomolecular Sciences, University of NSW in Sydney, Australia. Prior to her PhD, she completed a Bachelor of Science (Hons) at UNSW after studying human cytomegalovirus (CMV) antiviral resistance in immunocompromised patients. Her PhD research, under the supervision of Prof. William Rawlinson and Dr. Gillian Scott, continued the examination of genetic factors of CMV and other herpesviruses such as HHV-6 and HHV-7 and their role in the outcomes of antiviral therapy in transplantation. While the use of antiviral agents in the immunocompromised transplant population has reduced adverse

clinical outcomes associated with CMV infection and disease, the emergence of CMV antiviral resistance is a continuing issue in an era of widespread prophylaxis. After analysis of the CMV UL97 protein kinase and UL54 DNA polymerase gene coding sequences, it was determined that up to a third of patients contained antiviral resistant CMV sequences. Further, 15% of patients were diagnosed with multiple mutations conferring resistance to a minimum of two antiviral agents, including new mutations of unknown resistance phenotype. Nearly half of antiviral resistant CMV sequences were identified in lung transplant recipients, despite this group accounting for only 14% of patients. The research group is continuing to define viral events, including multidrug resistance mutations, viral co-infection and factors unique to patient groups, in order to improve patient outcomes with a view to minimisation of CMV antiviral resistance and improvement of post-transplant therapeutic algorithms.



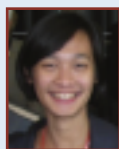
Hooi Sian Eng – *Clinical significance of B cell positive crossmatches (BXM) and Luminex® defined anti-HLA Donor Specific Antibodies (DSA) in well matched, highly sensitized patients from the Australian National Interstate Exchange.*

This study was initiated by the Australian Renal Transplant Advisory Committees (RTAC), in collaboration with Australian tissue typing laboratories, Australian Red Cross Blood Service, Australia and New Zealand Dialysis and Transplant Registry (ANZDATA) and more than 35 hospitals.

Highly sensitized patient sera were tested using Luminex assays. BXM was performed by complement-dependent lymphocytotoxicity (CDC) technique. This study found that, only two thirds of positive CDC-BXM in highly sensitized patients were caused by DSA. Although associated, positive CDC-BXM was not an independent predictor of humoral rejection. However, Luminex defined DSA were associated with all rejection types, and were an independent predictor of total and humoral renal allograft rejection. Thus, Luminex defined DSA are a superior predictor of total and humoral

rejection than a positive B cell crossmatch in highly sensitized patients.

Miss Eng was born in 1979 in Penang, Malaysia. She received a KUOK Foundation Scholarship to pursue a Biomedical Science Degree, and graduated with honours in 2003, at University of Malaya, Malaysia. She was awarded a Malaysian National Science Fellowship in 2003 and graduated with her Master of Medical Science in 2005, at The University of Malaya, Malaysia. Miss Eng received an Australian Endeavour Award and a University of Adelaide Scholarship for her PhD study in Transplantation Immunology under supervision of Drs. Graeme Russ, Toby Coates and Peter Barty. On behalf of her research team in South Australia, Miss Eng accepted Young Investigator Awards from The Transplantation Society of Australia and New Zealand (TSANZ) in 2007 and 2008 and Kidney Health Australia Award for The Best Clinical Science Presentation by The Australian and New Zealand Society of Nephrology (ANZSN) in 2007. Miss Eng was also nominated for The President's Award of TSANZ and Young Investigator Award of ANZSN in 2008.



Thet Su Win – *The role of donor CD4 T cells within solid organ transplants in graft rejection.*

Originally from Burma, she was selected to undertake the MB/PhD programme at the University of Cambridge, UK. She undertook her PhD at the Department of Surgery, Addenbrooke's Hospital, under the supervision of Dr. Gavin Pettigrew and Professor J. Andrew Bradley. Her project examines the role of donor CD4 T cells within heart grafts in the development of chronic allograft vasculopathy, using a mouse heart transplantation model. In this bm12 to C57BL/6 model, humoral vascular changes develop, but interestingly, only autoantibody, but no alloantibody, is detectable. No autoantibody was generated if donor CD4 T cells were depleted before heart graft retrieval or in recipients that lacked MHC class II expression specifically on B cells, indicating that autoantibody development is

a consequence of donor CD4 T cell recognizing the class II complex on autoreactive B cells. We confirmed an effector role for autoantibody in graft rejection by priming recipients for autoantibody before transplantation and showing that the hearts transplanted into these animals developed vascular obliteration and accelerated rejection. Therefore, the study suggests that passenger CD4 T cells within heart transplants can contribute to allograft vasculopathy by providing help for autoantibody generation. This finding has potentially significant clinical implications since it suggests that depleting lymphocytes in donor organs prior to transplantation may indicate a novel mechanism of protection from allograft vasculopathy.

She is currently undertaking an academic foundation programme in surgery at Addenbrooke's Hospital, and plans to pursue a career in academic surgery.

IN MEMORIAM

JEAN DAUSSET • 1916-2009

SCIENTIST, PIONEER IN ORGAN TRANSPLANTATION
NOBEL PEACE PRIZE LAUREATE HELPED TO
VERIFY COMPATIBILITY

Jean Dausset, TTS Member, 1996 Medawar Prize recipient and 1980 Nobel Laureate has passed away at the age of 92. Professor Dausset was an immunologist and pioneer behind organ transplants and mapping of the human genome. His 1958 discovery of the human leucocyte antigen (HLA) tissue system allowed doctors to verify compatibility between donor and receiver for an organ transplant.





Professor Dausset was born in Toulouse on Oct. 19, 1916. He had studied and went on to become an esteemed Professor at the Faculté de Médecine de Paris, France. Because of the German invasion he joined the free French Forces in Forces in North Africa in 1940, participating in the liberation of France five years later. As founder of the France-Transplant and the Center for the Study of Human Polymorphism, which helped create a genetic and physical map of the human genome and localize genes responsible for genetic diseases.

His major scientific achievements included the demonstration that HLA antigens on cell surfaces determine the immune responses. His collaboration with TTS President Felix Rapaport on differences in survival of skin grafts in human subjects proved the importance of genetic differences between donor and recipient. He and others extended these studies over decades to show that genetic factors were critical in all racial groups. The results of such work also explained individual gradations of immune responsiveness against infection, auto-immunity, and against foreign grafts. In 1980, he shared the Nobel Prize for Medicine with Americans George D. Snell and Baruj Benacerraf, also members of TTS, for their work on genetically determined structures on cell surfaces that regulate immunological reactions.

EDUCATION & COMMUNICATION COMMITTEES REPORT

In the coming months, TTS will be highly active in providing more educational content to the membership. Through the revitalization of the TTS website and the expansion of the internal capacities of the International Headquarters we will strive to increase, not only the amount of educational content, but the quality as well.

A plan has been devised with the following objectives and targets:

- All official TTS meetings and congresses will now feature **narrated screen recordings of all the sessions**. The first recordings, from our nKOL Brazil meeting are now available to TTS members. The Sections will also benefit from the website infrastructure to post recordings for their members as well. 
- As of November 2009, online **CME accreditation** will be made available for selected narrated screen recordings and selected articles from *Transplantation Journal*.
- As of August 2009, in conjunction with the journal *Transplantation*, TTS will provide **CME credits for article reviews**.
- TTS has subscribed to Adobe Connect Professional, a web conferencing service, to implement a **Distant Learning Program**. This webinar-based program will consist of periodic invited lectures and unscheduled pop-up presentations/discussions in times of emerging transplantation news. The system, open to TTS Members, has a capacity for 100 simultaneous participants and simulates a virtual classroom environment. CME credits will be provided to participants whenever possible. 
- Program on **education on organ donation and transplantation in schools**. This initiative, initially proposed by Felix Cantarovich, will be developed to advocate and educate our youth on the benefits and importance of transplantation science.

We look forward to any suggestions from the membership, please feel free to contact us (communications@tts.org).

– Jeremy Chapman, TTS President / Education Committee Chair
Federico Villamil, Communications Committee Chair
Stefan Tullius, Communications Committee / Website Liaison
Marcelo Cantarovich, Co-Chair Education Committee / CME Liaison

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To consolidate its position as the leading global organization, the Council has representation from all six regions of the world: North America; Latin America; Europe; Africa-Middle East; Oceania; and Asia.

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