# SIMPOSIO SIBO

Worldwide Eye Banking (WEB) Project: overview nel campo dell'eye banking e del trapianto di cornea.
Raccolta ed analisi dati per la banca di Saint Etienne.

Bari, 22 Febbraio 2013

Alessandra Russo Paola Bonci Banca Cornee Imola

per conto della segreteria SIBO

# Worldwide Eye Banking (WEB) project: international survey of demand and supply.

#### **Author Information**

R JULIENNE<sup>1,2</sup> M ALDOSSARY<sup>2</sup> C NEFZAOUI<sup>1,2</sup> Z HE<sup>1</sup> BM HA THI<sup>1</sup> N CAMPOLMI<sup>1,2</sup> G THURET<sup>1,2</sup> P GAIN<sup>1,2</sup>

## 1

Corneal Graft Biology, Engineering and Imaging Laboratory, EA2521, Federative Institute of Research in Sciences and Health Engineering, Faculty of Medicine, Jean Monnet University, Saint-Etienne

#### 2

Department of Ophthalmology, University Hospital, Saint-Etienne

#### Acta Ophthalmologica

Volume 90, Issue Supplement 249, September 2012

Article first published online: 6 AUG 2012 DOI: 10.1111/j.1755-3768.2012.2266.x 2012 Acta Ophthalmologica Issue



#### ABSTRACT

**Purpose** The whole eye banking (EB) process, from corneal retrieval to surgery, is improving. Paradoxically, corneal blindness worldwide is still increasing. Supply seems lagging far behind global demand but only partial data of the worldwide situation is available. We therefore launched an international survey on the balance of demand and supply, called the "Worldwide Eye Banking" (WEB)-project. Our goal is to identify suitable solutions in countries willing to improve their corneal supply.

Methods Descriptive epidemiological worldwide transversal study. A questionnaire was designed and e-mailed to EB staff and ophthalmologists involved in corneal grafts using mailing lists from local and international ophthalmological societies or by face to face interview during international ophthalmology, eye research or EB congresses.

#### ABSTRACT

**Results** Significant disparities were highlighted. Developed countries tended to satisfy corneal demand. EBs in the United-States use short term storage and are exporters, while Europeans use long-term organoculture and nearly satisfy local demand. Keratoplasty indications have 2 profiles: infections, mainly trachoma, for developing countries and keratoconus, endothelial dystrophy or iatrogenic edema in developed countries.

**Conclusion** This demand/supply disparity, at this stage of the study (ongoing), is severe in most developing countries. Decreasing demand requires: 1) Trachoma fight in endemic zones, 2) Iatrogenic edema prevention. Increasing supply requires: 1) Corneal donation politic dynamism, 2) Local eye banking implantation in each country, 3) Optimizing storage technique for better efficiency (retrieved/delivered graft ratio), 4) Bioengineering of endothelial graft.

## DATI NAZIONALI RACCOLTI ED ELABORATI DA SIBO





#### Part I : Corneal transplantation for Italy

1) Number of keratoplasty performed each year (data from 2011)

2) The Top 5 indications, from the most common to the least one (among : Keratoconus =1, Bullous Keratopathy = 2, Failed Previous Graft = 3, Cornea Guttata = 4, Other Corneal Dystrophy = 5, Post Infectious = 6, Post Traumatic= 7, other causes= 8)

3) Percentage or number of failed previous graft on total Keratoplasty each year

4) Number of patients on the waiting list

4720	
8,1,2,4,3	
145	

Number of patients on the waiting list



#### Part I : Corneal transplantation for Italy

1) Number of keratoplasty performed each year (data from 2011)

2) The Top 5 indications, from the most common to the least one (among : Keratoconus =1, Bullous Keratopathy = 2, Failed Previous Graft = 3, Cornea Guttata = 4, Other Corneal Dystrophy = 5, Post Infectious = 6, Post Traumatic= 7, other causes= 8)

3) Percentage or number of failed previous graft on total Keratoplasty each year

4) Number of patients on the waiting list

5) Average waiting time (in months)



Average waiting time (in months)



# Part I : Corneal transplantation for Italy

1) Number of keratoplasty performed each year (data from 2011)	4720
2) The Top 5 indications, from the most common to the least one (among : Keratoconus =1, Bullous Keratopathy = 2, Failed Previous Graft = 3, Cornea Guttata = 4, Other Corneal Dystrophy = 5, Post Infectious = 6, Post Traumatic= 7, other causes= 8)	8,1,2,4,3
3) Percentage or number of failed previous graft on total Keratoplasty each year	
4) Number of patients on the waiting list	145
5) Average waiting time (in months)	5
6) In terms of number of keratoplasty, %performed in public care v/s %private care	
public	91%
private	9%
7a) The average cost of a keratoplasty	min 1250 max 2850
7b) The amount / percentage paid by the patient in public care	0
8) Surgical techniques : %Penetrating Keratoplasty v/s % Lamellar Keratoplasty v/s % Limbic stem cells	
pk	67%
lk	33%



1) Number of corneas collected locally/year (2011)	14917
2) Corneal collection : (enucleation, corneoscleral button, both)	both
3) %Multi-organ donor v/s %cadaveric donor	9,8%/90,2%

%Multi-organ donor v/s %cadaveric donor



1) Number of corneas collected locally/year (2011)	14917
2) Corneal collection : (enucleation, corneoscleral button, both)	both
3) %Multi-organ donor v/s %cadaveric donor	9,8%/90,2%
4) Time frame after death for enucleation / corneal removal (Hours)	9 h 30'

## Time frame after death for enucleation / corneal removal (Hours)



1) Number of corneas collected locally/year (2011)	14917
2) Corneal collection : (enucleation, corneoscleral button, both)	both
3) %Multi-organ donor v/s %cadaveric donor	9,8%/90,2%
4) Time frame after death for enucleation / corneal removal (Hours)	9 h 30'
5) Types of storage (Short term in $4^{\circ}C = 1$ , Organ culture $31^{\circ}C - 37^{\circ}C = 2$ , Refrigeration $24h = 3$ )	1, 2
5*) If Organ culture is used, (homemade =1 or commercial medium =2 or both =3)	2 (93%), 1 (7%)
6) The corneal collector (Medical/Paramedical/Non Medical)	Medical
7) Concerning Endothelial lamellar keratoplasty, is lab-precut lamellar graft available (Y/N)	Y
8) Total number of collecting centers	315

# Total number of collecting centers



1) Number of corneas collected locally/year (2011)	14917
2) Corneal collection : (enucleation, corneoscleral button, both)	both
3) %Multi-organ donor v/s %cadaveric donor	9,8%/90,2%
4) Time frame after death for enucleation / corneal removal (Hours)	9 h 30'
5) Types of storage (Short term in $4^{\circ}C = 1$ , Organ culture $31^{\circ}C - 37^{\circ}C = 2$ , Refrigeration $24h = 3$ )	1, 2
5*) If Organ culture is used, (homemade =1 or commercial medium =2 or both =3)	2 (93%), 1 (7%)
6) The corneal collector (Medical/Paramedical/Non Medical)	Medical
7) Concerning Endothelial lamellar keratoplasty, is lab-precut lamellar graft available (Y/N)	Y
8) Total number of collecting centers	315
9) Total number of Eye banks	14
10) Concerning legal consents or tissue donation laws, donation is possible	2 and 3

Only when expressed positively before death = 1

Each time unless expressed negatively before death on a refusal registry = 2Each time unless refused by the family after death = 3

# Grazie per l'attenzione!