“This is a big step for the Society,” said Nicholas Tilney, TTS President. “We have pursued this accreditation over the last few years to show our commitment to providing high quality continuing education programs, to developing science and clinical practices in the field, and to promoting ethical practices within the transplant community.”

One key advantage of this accreditation is that TTS now has the authority and autonomy to accredit any educational activity it decides meets ACCME requirements. This includes all TTS and Section activities.

The main components of the Society’s clinical and scientific education program are the online seminars, New Key Opinion Leader meetings, and the International Congress. The TTS website hosts many scientific presentations on topics such as advances in clinical transplantation; new technologies, tools, and strategies for predicting outcomes; and organ donation and allocation. Education on global ethical practices is accomplished through the Global Alliance for Transplantation and the Director of Medical Affairs’ activities.

The Society’s recent focus has been on promoting ethical practices worldwide. ACCME providers are not eligible for accreditation if they present activities that promote treatments that are either known to have risks or dangers that outweigh the benefits, are known to be ineffective, involve organ sales, or the use of organs from executed prisoners.

“TTS is an international society with increasing global responsibility. Our recent focus, in collaboration with the WHO, has been on educating leaders in China, the Middle-East and Africa, and communicating our findings and results with all members of the Society. There are some truly unethical medical practices taking place. We feel it is our role to help fellow transplanters bring these practices to an end, and we are the only Society that is taking a stand on these issues,” added Tilney.

Throughout the multi-year accreditation process, TTS has had to assess its commitment to, and its role in, providing continuing medical education. The Society also had to analyze its current practices, identify areas for improvement, determine its future direction, and effectively present results to the ACCME.

If you have any suggestions for education programs that TTS should undertake, your feedback will be taken into consideration. Please contact TTS headquarters at info@transplantation-soc.org with your recommendations.
PRESIDENT’S MESSAGE

T he Officers and Staff of The Transplantation Society (TTS) greeted the New Year with enthusiasm, and hope this year will be successful for all TTS members.

The International Headquarters in Montreal is up and running. The space is efficient, beautiful, and humming with activity. Personnel are fitting into place after conscientious searches by the Officers. Filomena Picciano is the Director of Society Operations, Frank Lindo-Verissimo is the Membership Services Manager, Mariko Nakanishi is the Receptionist and Catherin Parker is the Project Manager. We are currently seeking a Manager of Technology to complete the list. We owe our staff much gratitude for their efforts on behalf of TTS.

The Headquarters held a very successful Christmas party for all of the Society’s administrative partners. This included our financial experts, accountants, travel agents, computer consultants, public relations consultants, legal counsel, and others. President-Elect Jeremy Chapman; Director of Medical Affairs, Francis Delmonico; and I, as President, attended. It was a great success, lasting for several hours.

Francis Delmonico, as Advisor for Human Transplantation to WHO, and liaison in the official relationship between TTS and the WHO, has energetically pursued the mission of our Society. He was active in several previously under-represented areas, particularly in regard to ethical guidelines for both donor and recipient. Please see his separate report on these activities on page 4.

Annika Tibell and her Ethics Committee have written important and deeply considered guidelines for members. Together, Annika and Francis have answered and rebutted a variety of challenges put forward in several countries. TTS can be proud of its activities in this area. It is the only Society so far, to speak publicly, and take positive action against irregular practices occurring throughout the world. Our Society is gaining in stature and importance through these efforts.

We have received summaries of the activities from the TTS Research Fellowship recipients. These young people are working in excellent laboratories under excellent mentors, are learning a great deal, and enjoying the experience. They are a vital resource and will become tomorrow’s leaders in our field. Have a look at their research on page 5.

The New Key Opinion Leader (KOL) meetings that Immediate Past-President Kathryn Wood initiated have been rousing successes. Meetings were held in 2006 in Barcelona and Buenos Aires, and recently in January in Hong Kong. Remaining meetings planned for 2007 are in Montreal, Geneva (in concert with the Global Alliance in Transplantation and WHO), Ankara, Sydney, South Africa and Mexico. Both KOL mentors and new KOLs — their trainees — have voiced great enthusiasm and extolled the educational and social benefits of these meetings.

We owe our corporate sponsors, Wyeth and Roche, a great debt for their generosity and efforts in these new KOL meetings.

Kathryn Wood, Francis Delmonico, Philip Halloran, and I attended and spoke at the University of Louvain, Belgium during a celebration of its 3000th kidney transplant. Yves Vanrenterghem hosted this important event. After all, Guy Alexandre in Louvain, initiated the use of brain dead donors in 1963, several years before general acceptance of what has become the linchpin of our field.

Finally, TTS has been fully accredited by ACCME. This important step not only allows us to act as an independent body to provide CME and similar credits to those who attend our meetings, but also allows us to award these credits to those who attend meetings in our Sections. I would like to thank everyone involved in making this happen, especially Kathryn Wood and Jeremy Chapman.

Have your say on the location of the 2012 TTS Congress

All full, active members of TTS have been sent ballots that need to be mailed back by April 13, 2007. There are two cities to choose from Berlin, Germany and Gothenburg, Sweden. The winning location will be announced at TTS Council meeting in San Francisco in May 2007.

If you have paid your membership dues and did not receive a ballot, contact the TTS headquarters to obtain one.
Ethics and science discussed at New KOL meeting in Hong Kong

A n expanded network, opportunities for research collaboration and scientific learning are what the 50 key opinion leaders left Hong Kong with in January. “The New KOL meeting definitely provided an opportunity for young researchers to present and share updated research output in their fields. I made some important connections that will allow me to collaborate in the future on research in the field of liver transplantation and liver cancer,” said New KOL Kwan Man, Assistant Professor at the University of Hong Kong.

“I was impressed by the Hong Kong group’s work on small-for-size syndrome in liver transplantation. My work will benefit from ideas on markers of tolerance and cellular therapy presented in excellent talks by groups from Berlin and Kyoto. The presentations from Stanford and Sydney on gene arrays were excellent. This novel analysis will probably only find a place in routine diagnostics in more than ten years, but the results shown during the meeting were very exciting,” explained Piotr Trzonkowski, Medical University of Gdansk, Poland.

“Meeting key opinion leaders, both established and new, from a diverse array of disciplines expanded my general knowledge of organ transplantation. This knowledge gave me insight into pertinent issues of regional organ procurement and ethics, and tolerance, along with practical day to day research ideas for my area of interest, chronic allograft nephropathy,” said New KOL, Matthew Vitalone, who is currently completing his Ph.D. at the University of Sydney, NSW, Australia.

From January 18 to 20, the participants discussed biomarkers and immune monitoring in transplantation, and novel approaches to the diagnosis and therapy of post-transplant infectious diseases. Other issues discussed included chronic allograft dysfunction, living donor transplantation, and expanding the donor pool.

“We discussed some ethical issues very seriously during the meeting,” continued Trzonkowski. “Transplantation has faced this problem since the beginning, and it is very encouraging that people working in transplantation are now open for this kind of discussion.”

TTS would like to thank F. Hoffman-La Roche Ltd. for supporting the 2007 New Key Opinion Leader meeting in Hong Kong through an unrestricted educational grant.

In April, Montreal will host the New KOL meeting, bringing together North American experts in the field of transplantation for similar discussions.
I have participated in TTS or WHO sponsored meetings in Trinidad; Ljubljana, Slovenia; Guangzhou, China; Khartoum, Sudan; Manila; and Kuwait City. Our objective has been to develop relationships with ministry officials and transplant professionals throughout the world.

The Port of Spain, Trinidad and Tobago meeting was organized by the Pan American Health Organization (PAHO), and it hosted delegates from the Bahamas, Barbados, Guadeloupe, Jamaica, Trinidad and Tobago, and Spain. The objective was to evaluate the feasibility of establishing a collaborative system for organ donation and transplantation in the Caribbean, using infrastructure already in place.

The report of the Amsterdam Forum was presented as a guideline for living donor care. Trinidad is to launch a program of deceased organ donation in 2007 and TTS will provide its professional support to that effort. The Lisbon report on the care of the kidney transplant recipient will also be a useful guide for these countries.

A WHO consultation with Middle East transplant professionals was held in Kuwait City preceding the MESOT conference in late November 2006 and was attended by delegates from Iran, Pakistan, Lebanon, Syria, Tunisia, Libya, Morocco, Kingdom of Saudi Arabia, Yemen, United Arab Emirates, and Jordan.

The Kuwait document, developed as a result of this meeting, expressed an opposition to the widespread commercialism and transplant tourism that exists in that region and throughout the world. The Kuwait document also calls for the development of a legal framework in each country that enables deceased organ donation with death determined by internationally accepted neurological or cardio respiratory criteria.

GOVERNMENT PROMISES ACTION AT GUANGZHOU MEETING

In November, over 600 Chinese organ transplant professionals met in Guangzhou, China, to hear Vice-Minister of Health Professor Jiefu Huang deliver a provocative address regarding the practice of organ transplantation in China. I was honored to support the Vice-Minister on behalf of TTS as he set forth objectives that would curtail transplant tourism and provide a regulatory oversight of practices within China.

Continued on page 5
Four investigators granted TTS Fellowships

At the 1st World Transplant Congress, TTS introduced four new Fellowship Awards to support the research of young investigators. These awards were given to four deserving candidates to investigate regulation of the immune response, especially tolerance to organ allografts and to investigate complications following lung transplantation.

Regulatory T-cells (Treg) maintain tolerance to allografts and prevent graft versus host disease, so Giorgio Raimondi aims to evaluate the potential of these cells to induce tolerance to allografts. He aims to optimize production and separation of activated alloantigen-specific Treg cells based on their PD-1 receptor. Then their effect will be evaluated in a mouse heart model when administered post-transplant. Any synergistic effect after co-administration of these cells and rapamycin-modified dendritic cells will also be investigated. This research will be in Dr. Angus Thomson’s laboratory at the Starzl Transplantation Institute in Pittsburgh. Raimondi studied previously at the University of Milano-Bicocca.

Immunosuppressant protocols produce significant survival (> 80 per cent) after cardiac transplantation, but do not prevent chronic allograft vasculopathy (CAV). Joyce Popoola will define rejection in animals to develop an understanding of the physiological mechanisms resulting in tolerance to allografts. As CD4+ and CD8+ T-cells are likely involved in CAV, targeting negative T-cell co-stimulatory pathways may regulate them and result in T-cell anergy, apoptosis and immunoregulation. Popoola is based in the Transplant Biology Research Center at Brigham and Women’s Hospital, Boston. She studied for a Ph.D. at Guy’s Hospital, London and collaborated with the Transplant Immunology Center in Oxford.

Allogeneic immune responses can be suppressed by populations of non T and Treg-cells. Xian-Liang Li will study the conditions for the in vitro derivation of CD8+ CD45RClow T-cells. He will then define their interaction with endothelial cells and dendritic cells and the mechanisms involved in inhibiting heart allograft rejection in rats. He will also study the influence of 2, 3 dioxygenase expression on allograft tolerance induction. Li’s research is being carried out at Hotel Dieu Hospital, University of Nantes, France.

Following lung transplantation, infections and chronic rejection (bronchiolitis obliterans syndrome, BOS) are major complications. Herpes viruses and respiratory viruses are involved, either directly (pneumonitis) or indirectly to cause BOS. Oriol Manuel will focus on lung transplant patients to evaluate a novel vaccination strategy to boost the immunogenicity of inactivated influenza vaccine and to investigate the possible reactivation of herpes virus in broncho-alveolar lavage samples. He is studying this problem in The Infectious Diseases Service and Transplantation Center at University Hospital, Lausanne, Switzerland, and received his medical training at the University of Barcelona.

KIDNEY TRANSPLANTATION UNDERWAY IN CENTRAL AFRICA

TTS and WHO convened a meeting of transplant professionals from Senegal, Nigeria, Mali, Kenya and Sudan to address the urgent issues pertinent to the practice of transplantation in Africa. There was also participation from Morocco, Tunisia, Egypt, and South Africa at the meeting held in Khartoum, Sudan. The Lisbon report (which will be published soon as a supplement in Transplantation) was the reference document used to provide guidelines for the group.

In December 2006, I had the honor of travelling to Guatemala City to meet with Rudolph Garcia-Gallont, Randall Lou-Meda, and Vicente Sanchez Polo to help establish a program on pediatric kidney transplantation at the Roosevelt Hospital. During this visit, I also met with Minister of Health Victor Longo to facilitate the availability of immunosuppressive medications in Guatemala.

As DMA I have also had the honor to participate in the new KOL meetings which have afforded another opportunity to develop relationships with global transplant professionals.
MATTHEW VITALONE
Allograft Fibrosis and Nephropathy

Matthew Vitalone received an award for studying “Epithelial-to-Mesenchymal Transition (EMT) in Chronic Allograft Nephropathy (CAN).” Biopsies were taken at one and three months from 24 renal transplant recipients. Interstitial fibrosis was assessed by a pathologist and by image analysis. Total RNA was extracted, converted to cDNA and hybridized onto human cDNA microarrays. Progressive fibrosis from one to three months occurred in nine recipients with CAN. Creatinine at one year correlated with delayed graft function and donor age. Patients with CAN had 43 genes differentially expressed, most (65 per cent) of which are associated with fibrosis and tissue remodeling. EMT assessed by dual staining showed low levels of tubular expression but minimal interstitial cells. Gene expression for EMT markers was not consistently unregulated by microarray and RT-PCR. He concluded EMT has a minor role in allograft fibrosis and CAN, and other pathophysiological processes are more important.

Vitalone is scheduled to complete his Ph.D. in 2007 at the University of Sydney, NSW, Australia.

QIQUAN SUN
Humoral Rejection at Different Time Periods

Qiquan Sun’s paper was entitled, “C4d-positive Acute Rejection at Different Time Periods after Renal Transplantation: Different Clinico-histopathological Manifestations Require Different Treatment Strategies.” Kidney allograft recipients (n=56) with C4d-positive steroid-resistant acute rejection (AR) were in three groups. Some recipients (28) had very early rejection (VER) at less than 15 days, five had early rejection (ER) between 15-180 days and 23 had late rejection (LR). More with ER and LR had their immunosuppressant reduced or withdrawn and they had decreased serum albumin and hemoglobin. Those with VER had fever and rapid graft dysfunction requiring dialysis. Most (87 per cent) with LR had interstitial fibrosis, tubular atrophy and 13 per cent had transplant glomerulopathy. Immunosuppressants reversed most VER with a one-year survival of 96 per cent compared to 60 per cent and 52 per cent in the ER and LR groups.

Sun graduated from Nanjing University School of Medicine with a Ph.D., directed by Prof. Lei-Shi Li. Now he is a surgeon and transplant nephrologist in Jinling Hospital, China. His research is focused on antibody-mediated rejection and he has published over twenty papers as the first author.

MARTIN BODINGBAUER
Post Transplant Fractures

Martin Bodingbauer studied osteoporotic fractures, a major cause of morbidity in transplant patients. His award winning paper was entitled, “Prophylactic Bisphosphonate Treatment Prevents Bone Fractures After Liver Transplantation.” At transplantation, patients were randomly assigned to a controlled, prospective, open-label single center trial. One group (46 patients) received zoledronic acid, calcium and vitamin D; the control group (n = 50) received the same doses of calcium and vitamin D. The primary endpoint was either fracture or death. Secondary endpoints included bone mineral density, calcium concentration, morphometry of trabecular bone biopsies and serum markers of bone metabolism. Follow up was for 18 months and results were analyzed on an intention to treat. The primary endpoint was reached in 46 per cent of the control group but only 26 per cent of the treated group. The treatment group had less bone deterioration and 75 per cent of event free survival was 360 days in this group and 200 days in the control group.

Bodingbauer is a graduate of the Medical University of Vienna where he is currently a member of the Department of Surgery.
**Basic Science 2007 in Halifax**
The 10th Basic Science Symposium will take place in Halifax, Nova Scotia, Canada at the Westin Nova Scotian Hotel and Conference Centre from **September 5 to 8, 2007**. The international program will focus on critical areas in transplantation, including, Innate Immunity, Tolerance, Stem Cells, Tolerance and Transplantation, and Imaging of the Immune System. Travel Awards are available for young investigators and trainees. Visit [www.bss2007.ca](http://www.bss2007.ca) for further details.

**Global leaders discuss intestinal transplantation in sunny California**
Under the University of California, Los Angeles (UCLA) patronage, the Xth International Small Bowel Transplant Symposium will take place at the Fairmont-Miramar Hotel in Santa Monica, California from **September 5 to 8, 2007**.

A Pre-Symposium Workshop is planned for September 5, 2007 with topics including Nursing and Allied Healthcare, Pathology, Intestinal Referral, Wait-List Mortality, and Nomenclature.

The Symposium, including Plenary, Parallel and Poster Scientific sessions, will continue from September 6-8, 2007. International experts will focus on Immune Regulation and Dysregulation of the Gut, Latest/Hottest Treatments for Intestinal Failure and the Prevention of PN Complications and Latest Outcomes from Large Centers and Registries including the UNOS/SRTR Database and the Intestinal Transplant Registry and much more.

Registration is now open. The abstract submission deadline is May 1, 2007. More information can be found at [http://transplant.mednet.ucla.edu/isbts2007](http://transplant.mednet.ucla.edu/isbts2007).

**CTS, IXA, and IPITA plan first joint meeting**
Final plans are being made for the first Joint Meeting of the Cell Transplant Society (CTS), International Pancreas and Islet Transplant Society (IPITA), and International Xenotransplantation Association (IXA). It will take place **September 15 to 20, 2007** at the Hyatt Regency, Minneapolis.

Plenary Sessions, workshops and posters will focus on preservation, pretreatment and product testing, trends in immunosuppression, overcoming the organ shortage, animal engineering, tissue engineering, and much more.

A wine and cheese and an exciting Gala Event are being planned. Abstract submission deadline is scheduled for May 15, 2007. Early bird registration rates are available until May 15, 2007. TTS will support 30 Best Abstract awards for young investigators, 10 from each Section, who are TTS members. For more information, visit [www.cts.ipita-ixa-2007.org](http://www.cts.ipita-ixa-2007.org).

**World experts in transplant infectious disease discuss progress in research**
You are invited to the 3rd International Transplant Infectious Disease Conference, to be held in conjunction with the 13th Congress of the European Society for Organ Transplantation (ESOT). It will be held in Prague, Czech Republic from **September 29 to 30, 2007**. Some topics to be presented are donor-derived infections, progress in transplant infectious disease, and herpes virus infections. Visit [www.intmedpress.com/tid](http://www.intmedpress.com/tid) for more information and registration details.

**2007 Organ Donation Congress – Save the date!**
ISODP invites you to the 2007 Organ Donation Congress, a joint meeting between the International Society of Organ Donation and Procurement (ISODP) and the International Transplant Coordinators Society (ITCS). It will be held at the Loews Philadelphia Hotel from **November 11 to 14, 2007**. Topics include expanded donor criteria, donor management, pediatric donation, ethical and legal issues, donor registries and tissue donation, just to name a few. Don’t miss the opportunity to share the results of your research. Visit [www.isodp2007.org](http://www.isodp2007.org) to submit your abstract online.

**Founder of modern transplant practices celebrates**
Yves Vanrenterghem, Head of Nephrology at the University of Louvain in Belgium and a member of TTS Council, co-hosted a meeting with Professor Pirenne, surgeon, to celebrate the 3000th kidney transplant at the University.

There were four invited speakers: Nicholas Tilney, TTS President; Francis Delmonico, DMA of TTS; Kathryn Wood, Immediate Past-President; and Philip Halloran, organizing host of the 2010 TTS Congress in Vancouver.

The University of Louvain is the second oldest in Europe, established the 14th century and has one of the oldest transplant programs (begun in 1963). Organs from brain dead donors were first used there, five years before the Harvard ad hoc Committee published their “Definition of Irreversible Coma,” a concept that is a principle foundation of the field of transplantation.

The audience consisted of 200 invitees involved with transplantation, including physicians, surgeons, nurses, coordinators, and other interested parties.

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Image: Prof. Vanrenterghem, Prof. Michielsen, Prof. Verberckmoes, Nicholas L. Tilney, and Francis L. Delmonico, gathered before the scientific meeting.
UPCOMING MEETINGS

2007

Basic Science Symposium 2007
Halifax, Nova Scotia, Canada
September 5 to 8, 2007
(Westin Nova Scotian Hotel and Conference Center)
CHAIRS: Ken West, Anthony Jevnikar, and Lori West
WEBSITE: www.bss2007.ca

Xth International Small Bowel Transplantation Symposium
Santa Monica, CA, USA
September 5 to 8, 2007
(Fairmont-Miramar Hotel)
CHAIR: Douglas G. Farmer
WEBSITE: www.transplant.mednet.ucla.edu/isbts2007

2007 Organ Donation Congress (9th ISODP and 6th ITCS)
Philadelphia, PA, USA
November 11 to 14, 2007
(Loews Philadelphia Hotel)
CHAIR: Howard M. Nathan
WEBSITE: www.isodp2007.org

2008

22nd International Congress of The Transplantation Society
Sydney, Australia
August 10 to 14, 2008
CHAIR: Jeremy Chapman
WEBSITE: www.transplantation2008.org

SOCiETY OFFICERS

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

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