

# Pediatric Candidate Pre-Transplant HIV, HBV, and HCV Testing

*OPTN Ad Hoc Disease Transmission Advisory and Pediatric Transplantation Committees*

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# Purpose and Proposal

- The amount of blood needed for pre-transplant HIV, HBV, and HCV testing of small, low weight pediatric candidates can lead to adverse medical outcomes from blood overdraw.
- The DTAC and Pediatric Committees propose modifying policy so that all candidates younger than 11 years of age are not required to receive HIV, HBV, and HCV testing during hospital admission for transplant.
- Instead, they can receive testing at any time between when they are waitlisted and transplantation.

# Rationale

- To date, no reported transmissions of HIV, HBV, or HCV from pediatric donors; no cases of donor-derived HIV or HCV transmission to pediatric recipients.
- Higher incidence of co-morbidities, anemia, and low weight for pediatric candidates = more vulnerability to negative impacts of blood overdraws.
  - Only about 1-5% of a healthy child's total blood volume can be safely drawn at one time.
  - Blood is needed for purposes other than infectious disease testing at the time of transplant.
- Avoidance of unnecessary repeat testing.
- Identified 11 as an age indicative of the onset of adolescence.

# Member Actions

- Transplant Hospitals
  - Members will not have to perform HIV, HBV, and HCV testing during hospital admission for transplant.
  - Instead, those candidates may receive testing at any time they are on the waiting list for a transplant.

# FAQs

- **What about alignment with the Public Health Service (PHS) Guideline?**
  - The Centers for Disease Control and Prevention (CDC), which publishes the PHS Guideline, participated in the DTAC-Pediatric Workgroup that developed the proposed solution. There are efforts to update the PHS Guideline and ensure continued alignment between OPTN Policy and the Guideline.
  - Also, the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) that advises the Secretary of HHS unanimously supported the proposed change.
- **Does this change any of the required pre-transplant infectious disease tests?**
  - This does not change any of the required pre-transplant tests, just the time frame in which they have to be performed for candidates younger than 11 years old.

# Additional Questions?

- Please direct all questions on the DTAC-Pediatric Committees' *Pediatric Candidate Pre-Transplant HIV, HBV, and HCV Testing Proposal* to Betsy Gans at [Betsy.Gans@unos.org](mailto:Betsy.Gans@unos.org) or Anne McPherson at [Anne.McPherson@unos.org](mailto:Anne.McPherson@unos.org)

# Provide Feedback

Submit public comments on the OPTN website

- January 27 – March 23, 2022
- **[optn.transplant.hrsa.gov](https://optn.transplant.hrsa.gov)**





# Regional Meeting Information

- Visit <https://optn.transplant.hrsa.gov/about/regions/regional-meetings/> for the latest regional meeting information and meeting materials

The screenshot shows the top navigation bar of the OPTN website with links for About, Policies & bylaws, Patients, Professionals, Data & calculators, and News & events. Below the navigation bar is the header 'Organ Procurement and Transplantation Network' and a large blue banner with the title 'Regional meetings'. A breadcrumb trail reads 'Home » About » Regions » Regional meetings'. On the left side, there is a vertical menu with 'WHAT IS THE OPTN', 'OPTN MEMBERSHIP', and 'GOVERNANCE', each with a dropdown arrow. The main content area features the heading 'Regional Meetings' in green, followed by a paragraph: 'Regional meetings are held twice each year during the winter and summer public comment periods. Regional meetings are an opportunity to influence policy proposals, prepare for upcoming changes, and hear perspectives from the transplant community about improvements to organ allocation.' Below this is a link: 'Here's [what you can expect](#) at regional meetings. New to the public comment process? [Learn more here.](#)'



Thank You For Listening!