

**OPTN Lung Transplantation Committee
Meeting Summary
November 30, 2023
Conference Call**

**Marie Budev, DO, MPH, Chair
Matthew Hartwig, MD, Vice Chair**

Introduction

The Lung Transplantation Committee (the Committee) met via Webex teleconference on 11/30/2023 to discuss the following agenda items:

1. Standardize Six-Minute Walk Project: Review policy language to support transition plan
2. VOTE: Do you support including the transition plan policy language in the Standardize Six-Minute Walk public comment proposal?
3. New Promote Efficiency of Lung Allocation Project: Review and discuss proposed data fields Promote Efficiency of Lung Allocation Project
4. VOTE: Do you support sending the Promote Efficiency of Lung Allocation proposal out for public comment in January 2024?

The following is a summary of the Committee's discussions.

1. Standardize Six-Minute Walk Project: Review policy language to support transition plan

During their meeting on November 16, 2023, the Committee finalized updates to the *Standardize Six-Minute Walk* proposal and approved the proposed policy language, data definition, and updates to guidance. During this meeting, members supported a transition plan to require lung candidates registered at the time of the implementation to complete an oxygen titration test ahead of the six-minute walk test within 6 months of implementation.

The Committee reviewed proposed policy language to support the transition plan.

Proposed transition plan policy language

For lung candidates registered prior to September 5, 2024, who are at least 11 years 6 months old on September 5, 2024, transplant programs must perform an oxygen titration test prior to conducting the six-minute walk test for reporting a six-minute walk distance by March 5, 2025.

Proposed public comment Question: How much time would lung transplant programs need to prepare for this implementation?

Summary of discussion:

The Committee supported including the proposed transition plan language and public comment question as presented.

Staff explained that the proposed September 5, 2024, date was based upon a typical implementation timeline after the June 2024 Board for projects without programming. They continued that the March 5, 2025, date could be included in the proposal, but the Committee could also use the Winter 2024 public

comment period to ask how much time lung transplant programs would need to prepare for this implementation. The Committee supported the proposed transition plan language and public comment question as presented.

2. VOTE: Do you support including the transition plan policy language in the Standardize Six-Minute Walk public comment proposal?

The Committee voted on including the proposed transition plan language.

Summary of discussion:

The Committee approved including the proposed transition plan language; votes were as follows: 15 yes; 0 no; 0 abstained.

There was no further discussion.

Next steps:

The OPTN Policy Oversight Committee and OPTN Executive Committee will review and vote on the Six-minute Walk proposal for public comment approval at their January meetings.

3. New Promote Efficiency of Lung Allocation Project: Review and discuss proposed data fields Promote Efficiency of Lung Allocation Project

The Committee reviewed the *Promote Efficiency of Lung Allocation* project voting items.

Proposed data collection

History of anaphylaxis to peanut and/or tree nut

Acceptable responses: Yes/No/Unknown

Definition: Select “Yes” if the donor has any history of anaphylactic allergic reaction to peanuts and/or tree nuts. Anaphylaxis is an acute, potentially life-threatening, IgE-mediated allergic reaction that occurs in previously sensitized people when they are re-exposed to the sensitizing antigen.

Select “No” if the donor had no history of anaphylaxis to peanuts or tree nuts.

Select “Unknown” if donor historian or donor medical records are not available and it is not clear if the donor had a history of anaphylaxis to peanuts or tree nuts.

Previous sternotomies

Acceptable responses: Yes/No/Unknown

If yes – user can select one or more of the following:

- Coronary artery bypass graft surgery (CABG)
- Congenital heart defect surgery
- Maze procedure
- Heart valve replacement
- Other, specify

Definition: Select “Yes” if the donor had one or more previous sternotomies and select the applicable procedure type(s). Sternotomy is a surgical incision through the sternum, often used for open heart surgeries.

Select "No" if the donor had no previous sternotomies.

Select "Unknown" if it is not clear whether the donor had previous sternotomies.

Summary of discussion:

The Committee supported that if there is presence of a sternotomy scar, but the procedure is unknown, the Organ Procurement Organization (OPO) should select yes and enter "procedure type unknown" in the "other, specify" field.

The following questions were posed to the Committee for discussion:

- What should the OPO select if there is scarring indicating a previous sternotomy, but OPO is unable to identify procedure type?

Members discussed that scarring would indicate a previous sternotomy and that the OPO and coordinator will likely have a direct conversation regarding the identification of the previous procedure type. Members also pointed out that if the previous sternotomies field is used as a filter, programs would need to determine if they would take an organ from a donor with "unknown" previous sternotomies anyway. For this reason, Committee agreed that if there is presence of a sternotomy scar, but the procedure is unknown, the OPO should select yes and enter "procedure type unknown" in the "other, specify" field.

- Should any guidance be provided on what should be entered in the "other, specify" field?
 - Would ministernotomy fall under "Sternotomy"? Or should that not be reported under this data field?

Staff explained that collection of additional information reported in the "other, specify" field could not be used for filtering offers but could provide information to lung transplant programs for evaluating offers. Members agreed that ministernotomy could be reported via the "other, specify" field.

4. VOTE: Do you support sending the Promote Efficiency of Lung Allocation proposal out for public comment in January 2024?

Summary of discussion:

The Committee approved the proposed transition plan language; votes were as follows: 15 yes; 0 no; 0 abstained.

There was no further discussion.

Next steps:

The OPTN Policy Oversight Committee and OPTN Executive Committee will vote on the Promote Efficiency of Lung Allocation proposal for public comment approval at their January meetings.

Upcoming Meeting

- December 14, 2023 at 5pm ET (teleconference)

Attendance

- **Committee Members**
 - Marie Budev
 - Matthew Hartwig
 - Pablo Sanchez
 - Thomas Kaleekal
 - Wayne Tsuang
 - Brain Keller
 - Edward Cantu
 - Erika Lease
 - Jackie Russe
 - Lara Schaheen
 - Stephen Huddleston
 - Tina Melicoff
 - David Erasmus
 - Brian Armstrong
 - Katja Fort Rhoden
- **HRSA Representatives**
 - Marilyn Levi
 - James Bowman
- **SRTR Staff**
 - David Schladt
 - Katie Audette
- **UNOS Staff**
 - Kaitlin Swanner
 - Susan Tlusty
 - Leah Nunez
 - Holly Sobczak
 - Kelley Poff
 - Samantha Weiss
 - Chelsea Weibel
 - Houlder Hudgins
 - Krissy Laurie
- **Other Attendees**
 - n/a