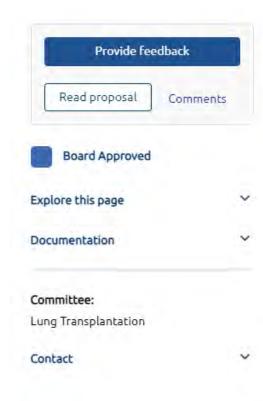
## **OPTN Lung Transplantation Committee**

*Summer 2022* 

# **Continuous Distribution of Lungs**

- Implementation slated for early 2023
- Resources for OPTN members and patients:
  - OPTN website
  - Playlist of educational offerings
  - Webinars
  - Submit questions to <u>member.questions@unos.org</u>

## https://optn.transplant.hrsa.gov/policies-bylaws/public-comment/establishcontinuous-distribution-of-lungs/



### Establish Continuous Distribution of Lungs

### At a glance

#### Current policy

The current system allocates lungs by placing candidates into categories that are arranged by priority. Sometimes a candidate's category places them on the side of a hard boundary that would prevent them from appearing higher on the match run. Continuous Distribution is a proposed allocation system that considers multiple patient and donor attributes all at once with an overall score. This overall score includes medical urgency, patient outcomes, biological make-up, and other candidate factors and efficiency of organ placement.

#### Learn how it works







https://optn.transplant.hrsa.gov/policies-bylaws/a-closer-look/continuousdistribution/continuous-distribution-lung/

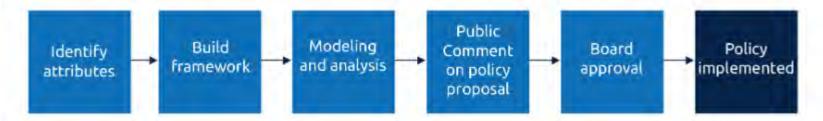
### Continuous distribution - lung

Lung is the first organ type to work through establishing continuous distribution as its new framework for allocation. The work began with the Thoracic Committee in winter 2019. When the <u>Lung Transplantation</u> <u>Committee</u> formed in summer 2020, it continued the work on continuous distribution of lungs.

In fall of 2021, the Lung Transplantation Committee's proposal <u>Establish Continuous Distribution of Lungs</u> opened for public comment.

The proposal received unanimous approval by the OPTN Board of Directors on Dec. 6, 2021. Plans for implementation are underway, and professional and patient education is in development.

The Lung Committee followed a series of steps to build the framework. Below you will find more information about what has been involved with each step of the process, and any results.



# **Related Proposals**

- Revise Lung Review Board Guidelines, Guidance, and Policy
  - Operational guidelines for the new Lung Review Board in continuous distribution
  - Clinical guidance for requesting exceptions related to pulmonary hypertension
  - Policy changes to align requirements with other organ review boards

### Update Multi-Organ Allocation for Continuous Distribution of Lungs

- Changes lung composite allocation score (CAS) threshold for required heart-lung, lung-liver, and lungkidney shares from 28 to 25
- Clarifies heart-lung policy

## **Feedback or Questions**