

**INTERIM REPORT OF THE
OPTN/UNOS AD HOC DISEASE TRANSMISSION ADVISORY COMMITTEE**

March 10, 2011

The OPTN/UNOS Ad Hoc Disease Transmission Advisory Committee met via teleconference on Thursday, March 10, 2011, and considered the following items:

1. The Chair provided a brief update regarding upcoming conference calls for the Committee's Encephalitis Subcommittee and Confidential Medical Peer Review (CMPR) Subcommittee. Both of these groups will meet later this month and provide an update to the full Committee during the April 6 meeting in Chicago.
2. The Chair shared with participants that a committee member had been contacted to be a legal expert regarding a case that was reviewed by the DTAC in 2009. All members were reminded that such requests should be declined due to confidential medical peer review and that UNOS/OPTN should always be notified when such requests are received.
3. The Chair provided a brief update regarding the timeline for public comment on the soon-to-be released proposed changes to the US PHS "high risk" donor guidelines. The proposal is currently at HRSA now, and the upcoming public comment period is expected to run for 30 days. A release date has not been announced. Members interested in participating in a call to review and develop a public comment response were asked to contact the committee liaison.
4. The Committee reviewed eight potential disease transmissions with 45 day follow-up and assigned tentative classifications to each. One involved ongoing testing and consideration by the CDC, and could not be classified to date.

As part of the case review discussion, members considered how to best address scenarios where research testing was completed using donor samples and reported back to the OPO as well as the use of testing for off-label usage. Two specific scenarios have been noted in 2011 where the question of how to consider this information and what recipient centers should do with it have presented concerns to the committee as well as the involved OPO and transplant programs. A committee member opined that such testing should only be completed retrospectively, that results should not be used to allocate organs. Further discussion on this issue will take place during the April 6 meeting in Chicago.

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