

OPTN Vascularized Composite Allograft Transplantation Committee

Meeting Summary

October 26, 2022

Conference Call

Sandra Amaral, MD, MHS, Chair

Vijay Gorantla, MD, Ph.D., Vice Chair

Introduction

The OPTN Vascularized Composite Allograft Transplantation Committee (the Committee) met via Citrix GoToMeeting teleconference on 10/26/2022 to discuss the following agenda items:

1. NASEM Presentation
2. NASEM Report Discussion

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

1. NASEM Presentation

The Committee heard a presentation on a report from the National Academies of Sciences, Engineering, and Medicine (NASEM) entitled *Realizing the Promise of Equity in the Organ Transplantation System*.

Summary of discussion:

A member noted that much of the focus for expanding organ supply seems to be on increasing lower-quality organ use. They inquired if there was any incorporation of the concept of increasing living donation in the report for VCA, specifically, uterus.

The presenter agreed that the greatest numerical gains have been most apparent in lower-quality kidneys and donation after circulatory death (DCD) hearts and livers. The presenter further explained that there is an uptick in discards because more organs are being recovered compared to years ago, and a higher percentage of the organs that were never recovered before are being discarded. The presenter mentioned that although living donation is a great opportunity to increase the number of transplants, historically, advocating for the increased use of living donations has not been in the scope of the OPTN and is more appropriate for other stakeholders in the transplantation community.

2. NASEM Report Discussion

The Committee discussed the following questions:

- Thoughts on the current work?
- Anything else the OPTN Committees should be working on?

Summary of discussion:

A member asked if zip code data has been used in the NASEM report analysis or if there is an opportunity to incorporate zip code information in the future. The presenter replied that the OPTN collects zip code information for candidates. There have been discussions about collecting more granular data to make better predictions better based on social determinants of health, such as collecting street addresses. Another member expressed that some patients may not have access to insurance service coverage for transplantation; for example, an individual's insurance may not cover a

specific service, such as a lung transplant. The member inquired if this topic has been considered an issue in access to transplant. The presenter replied that there had been discussions about geographic inequities and Medicare coverage in different states; however, there may not have been a formal analysis on this topic and suggested it would be a great project idea.

The Chair mentioned that members have previously discussed that, besides uterus transplant, white males most often receive VCA transplants. The Chair asked the Committee about ideas on how the members could look at data to discern if there is equitable access to VCA for individuals who express interest. A member replied that it might be interesting to look at candidates who wanted a VCA transplant but were unable to get listed.

A member asked if anyone knew of a candidate who wanted a VCA graft, but did not receive one due to financial or psychosocial reasons. A member replied that their hospital helps cover expenses for patients who cannot afford it. Another member replied that there had been concerns about patients due to their economic status. Some patients don't have adequate support, stable insurance, or access to medications which could hinder them from being recommended for a transplant.

The Chair asked how programs are collecting data for people who were evaluated for a transplant but did not move forward. A member replied that their center has a database of people who were evaluated and not accepted. Another member noted that they helped publish a paper on candidates who were referred, screened, and listed.

A member asked how patients are referred. A member replied that 90% of their patients are referred through word of mouth and the program's website.

Next steps:

All OPTN Committees' NASEM project ideas will be documented and delivered to the OPTN Policy Oversight Committee for discussion and prioritization.

Upcoming Meeting

- November 16, 2022

Attendance

- **Committee Members**
 - Sandra Amaral
 - Vijay Gorantla
 - Brian Berthiaume
 - Charlie Thomas
 - Christina Kaufman
 - Debra Priebe
 - Elizabeth Shipman
 - Liza Johannesson
 - Paige Porrett
 - Bohdan Pomahac
 - Rick Redett
- **HRSA Representatives**
 - Jim Bowman
 - Shannon Dunne
- **SRTR Staff**
 - Bryn Thompson
- **UNOS Staff**
 - Tamika Watkins
 - Kelley Poff
 - Alina Martinez
 - Catherine Parton
 - James Alcorn
 - Sarah Booker
 - Rachel Hippchen