

**OPTN Liver and Intestinal Organ Transplantation Committee
National Liver Review Board (NLRB) Subcommittee
January 9, 2024
Conference Call**

James Pomposelli, MD, PhD, Chair

Introduction

The OPTN National Liver Review Board Subcommittee (the Subcommittee) met via WebEx teleconference on 01/09/2024 to discuss the following agenda items:

1. National Liver Review Board (NLRB) Project Prioritization

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

1. National Liver Review Board (NLRB) Project Prioritization

The Subcommittee discussed and prioritized potential project ideas.

Summary of discussion:

The Committee reviewed the list of potential projects and spent the majority of the meeting discussing updating nomenclature related to Non-Alcoholic Steatohepatitis (NASH)/Non-Alcoholic Fatty Liver Disease (NAFLD).

Update NASH/NAFLD Nomenclature

A member stated that metabolic dysfunction associated steatohepatitis (MASH) and metabolic and alcohol related/associate liver disease (MetALD) are two distinct definitions in the diagnosis nomenclature. The member stated that MetALD is new and there remains some education needed for the community, but it is its own category and needs proper distinction. The member stated that they do not believe every transplant program will adequately identify a patient with NASH and alcoholic steatohepatitis (ASH). The member explained that when entering data, one diagnosis must be selected first which results in all of the data aligning with that first diagnosis that is entered. The member added that MetALD was created because it is felt to be distinctly different than straightforward NASH/MASH versus the overlap for patients that drink some alcohol, but not enough to diagnosis it as an alcohol related disease. The member advocated for an all-encompassing change to the nomenclature because future data on outcomes for MetALD will be important when comparing to metabolic dysfunction-associated steatosis liver disease (MASLD) or MASH.

Another member wondered if adding MetALD would be confusing for the coordinators who enter the data. A member responded that the coordinators do not determine the diagnosis, they are entering the data. The member stated that perhaps MetALD will not be entered often but believes this diagnosis is going to evolve over time and it will be important to have it as a distinct diagnostic category. Another member agreed that adding MetALD may be more preferable than relying on a coordinator to decide whether NASH or ASH was the primary diagnosis for the patient.

A member stated that MetALD is a new diagnosis in the nomenclature and that the community needs more education to understand the definition for MetALD. Several members agreed that education will be paramount.

A member suggested exploring ideas to leverage technology to help select the appropriate diagnoses. Another member responded that the most important thing is that those who are diagnosing are clear on the underlying liver disease and appropriately managing care. The member also noted that healthcare systems are updating the nomenclature of their diagnosis codes to include MetALD, so it will potentially be more confusing for members if OPTN does align in updates to the nomenclature as well.

The Subcommittee agreed that NASH should be changed to MASH. The Subcommittee will continue to discuss whether to recommend adding MetALD as a distinct diagnosis code.

Review NLRB Guidance

The Subcommittee expressed interest in developing score recommendations for diagnoses found in NLRB guidance. A member noted that reviewing data on the score that is assigned to non-standard exception cases will be important in determining whether there is variation.

Alcohol-Associated Hepatitis

A member suggested the Subcommittee explore the possibility to endorse guidelines developed by other societies.

Next Steps:

The Subcommittee will continue to prioritize and refine project ideas.

Upcoming Meetings

- February 13, 2024, at 2 pm ET (teleconference)

Attendance

- **Subcommittee Members**
 - Allison Kwong
 - Joseph DiNorcia
 - Kym Watt
 - Neil Shah
 - Scott Biggins
 - Shimul Shah
- **HRSA Representatives**
 - Jim Bowman
 - Marilyn Levi
- **SRTR Staff**
 - Jack Lake
 - Katie Audette
 - Nick Wood
 - Simon Horslen
- **UNOS Staff**
 - Cole Fox
 - Erin Schnellinger
 - Katrina Gauntt
 - Kayla Balfour
 - Meghan McDermott