

OPTN Ad Hoc Disease Transmission Advisory Committee

Meeting Summary

October 5, 2021

Conference Call

Ricardo La Hoz, MD, FACP, FAST, FIDSA, Chair

Lara Danziger-Isakov, MD, MPH, Vice Chair

Introduction

The Ad Hoc Disease Transmission Advisory Committee met via Citrix GoToMeeting teleconference on 10/05/2021 to discuss the following agenda items:

1. Require Lower Respiratory Testing for SARS-CoV-2 for Lung Donors, Public Comment Review/Vote
2. Update Data Collection to Align with US PHS Guideline 2020, Public Comment Review/Vote
3. 9/28 Closed Session Discussion

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

1. Require Lower Respiratory Testing for SARS-CoV-2 for Lung Donors, Public Comment Review/Vote

UNOS staff presented public comment feedback on the committee's retrospective public comment proposal to require lower respiratory testing for SARS-CoV-2 for lung donors.

Summary of discussion:

Members discussed public comment recommendation that lower respiratory testing should occur within 72 hours of procurement. Multiple members stated that was likely happening in practice, due to American Society of Transplantation (AST) guidelines, the DTAC Summary of Evidence, and what they had seen in their clinical practice. The Chair stated that the policy needs to balance safety with practical recommendations that still allow lungs to be utilized, and that putting a timing requirement could lead to logistical problems in organ recovery. UNOS staff pointed out that the OPO committee had also commented on a potential timeframe for a policy and recommended against it due to potential logistical constraints. One member stated that they thought that the time requirement was already within policy, and that they were supportive of it. Another stated that it isn't within policy, and that the timeframe should be based on center-specific level of comfort with acceptance, especially since delayed OR times could make OPOs out of compliance easily if a timeframe were to be implemented. The Chair and Vice Chair agreed with this statement and concern and asked if the member who had preferred a timeframe would be comfortable with leaving it out for now. The member agreed and stated that the program can always request an additional sample be run if needed.

Members discussed whether or not this policy should expire in May 2022, or whether it should be made permanent with ongoing review. One member stated that if COVID-19 is no longer a global risk, the policy shouldn't remain, but that it should remain for now. The Chair clarified that DTAC would continue monitoring the policy, and could make a recommendation for removal to the Executive Committee when appropriate, but that making the policy permanent would allow for flexibility to extend beyond May 2022, especially since this was the last scheduled Board meeting prior to the deadline. One member expressed concern about making this policy permanent, but stated that he was okay with it so

long as DTAC continues to review and monitor and can make the recommendation to remove the policy if it is no longer necessary.

Vote to send to the OPTN Board of Directors in December with the recommendation to make this a permanent policy, with ongoing review: 13 yes, 0 no, 1 abstain.

2. Update Data Collection to Align with US PHS Guideline 2020, Public Comment Review/Vote

UNOS staff presented public comment feedback on the committee's proposal to align data collection with the US PHS Guideline 2020.

Summary of discussion:

Committee members had no concerns about public comment feedback received, or about the proposal.

Vote to send to the OPTN Board of Directors in December for approval: 14 yes, 0 no, 0 abstain.

3. 9/28 Closed Session Discussion

Members discussed the aggregate format of the closed session case review from the previous meeting. Members agreed that it was more efficient and drew out themes from the cases. Members discussed the need for more preparation time prior to the meeting, as well as a smaller touch base with group members and leadership prior to the full meeting. One member stated that aggregate presentation worked especially well for malignancy cases. Members also agreed that while the format worked well for the majority of cases, some cases did still warrant full committee discussion due to their complexity. A member also stated that it was easier to have the same review partner for multiple cases.

The committee agreed that it would be beneficial to form a workgroup to focus on endemic disease. Multiple members volunteered.

Upcoming Meetings

- October 25, 2021

Attendance

- **Committee Members**
 - Ann Woolley
 - Debbie Levine
 - Dong Lee
 - Gary Marklin
 - Gerry Berry
 - Helen Te
 - Jason Goldman
 - Kelly Dunn
 - Lara Danziger-Isakov
 - Michelle Kittleson
 - Raymund Razonable
 - Ricardo La Hoz
 - Sarah Taimur
 - Stephanie Pouch
- **HRSA Representatives**
 - Jim Bowman
- **CDC Staff**
 - Ian Kracalik
 - Pallavi Annambhotla
 - Rebecca Free
 - Sridhar Basavaraju
- **FDA Staff**
 - Brychan Clark
- **UNOS Staff**
 - Ann McPherson
 - Abby Fox
 - Cassandra Meekins
 - Courtney Jett
 - Darby Harris
 - Nicole Benjamin
 - Susan Tlusty