

**OPTN/UNOS Liver and Intestinal Transplantation Committee**  
**Meeting Summary**  
**September 4, 2014**  
**Conference Call**

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*Discussions of the full committee on September 4, 2014 are summarized below and will be reflected in the committee's next report to the OPTN/UNOS Board of Directors. Meeting Summaries and reports to the Board are available at <http://optn.transplant.hrsa.gov/>*

**Committee Projects**

**1. Redesigning Liver Distribution**

A concept paper introducing the novel idea of Redistricting for liver distribution was released on June 16, 2014, with an accompanying questionnaire seeking community feedback on the concepts described. A total of 694 responses were received; these were considered by the Redesigning Liver Distribution Steering Committee in developing the agenda for a Public Forum to be held in Rosemont, Illinois on September 16, 2014. The intent of the Forum is to further the conversation about broader sharing and to discuss concepts intended to increase equity in access to liver transplantation.

During the August 4, 2014 call the Committee began to review the final data analysis of the concept paper questionnaire. The August call ran over the scheduled time and members were extended an invitation to attend an optional hour long call to review the data prior to the forum.

Detailed results of the concept document questionnaire are detailed in the executive summary also available at <http://optn.transplant.hrsa.gov/>

**Other Significant Items**

**2. Share 35/ Share 15/National Intestine Share, 1 Year Update**

In addition to the concept document questionnaire data, the Committee intended to review the Share 35, 1 year data, also to be presented at the forum.

The Committee reviewed the one-year results for the Share 35 policy, which was implemented on June 18, 2013. Highlights are as follows:

- a. The total number of deceased donor transplants for candidates with a MELD/PELD score over 35 increased overall.
- b. Regional sharing increased from 20.4% to 33.3. The percent of regional shares increased most in Regions 2, 3, and 5.
- c. Cold ischemia time remained static.

- d. The allocation MELD/PELD scores increased in all but 2 regions; there was no change in Regions 2 and 8.
- e. Overall, the number of transplants increased in every region except Region 1 (-1) and Region 7 (-33).
- f. There was no significant change in the 6-month post-transplant patient survival.
- g. The total number of liver discards decreased slightly, from 10.3% to 9.5%, as did the number of livers not recovered for transplant, which decreased from 14.1% to 13.0%. Liver discards increased in Region 1 (+10), Region 4 (+23) Region 8 (+8) and Region 10 (+7).
- h. Liver-Intestine transplants increased from 34 in the pre-era to 75 in the post era. The number of liver-Kidney transplants also increased (535 vs 504).
- i. The distance livers traveled increased in most regions, but decreased in Region 1 and Region 8.
- j. Waiting list additions increased in all MELD/PELD categories in the post-Share 35 era.
- k. Overall waiting list death rates remained the same. The relative risk of wait list mortality by ethnicity was not significantly different.
- l. Patients with a MELD/PELD score of 35 or higher experienced higher transplant rates and lower death rates in the post-Share 35 era.
- m. There was little change in the net flow of livers across DSAs pre- and post-Share 35.

### **Upcoming Meeting(s)**

- The next in-person meeting is scheduled for September 17, 2014 in Rosemont, Illinois.