

**OPTN/UNOS Minority Affairs Committee  
Meeting Summary  
January 19, 2016  
Conference Call**

**Jerry McCauley, MD, MPH, Chair  
Sylvia Rosas, MD, MSCE, Vice Chair**

*Discussions of the full committee on January 19, 2016 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. MAC Name Change**

The Minority Affairs Committee (hereafter, referred to as the Committee) leadership informed members that this project was still on hold. The Chair encouraged members to submit project ideas that would positively impact vulnerable populations.

**2. Blood Type B candidates and A2/A2B kidneys**

Since November, the workgroup met twice. They agreed to develop two surveys: one for centers who are participating to identify best practices and one for centers who are not participating to validate perceived barriers, with a target deployment date of late spring or early summer. A draft of the survey questions will be disseminated to the full Committee for input prior to distribution to centers. In addition, the workgroup submitted an abstract for the 2016 Transplant Management Forum to promote this effort.

The Committee Chair suggested submitting the topic to the Transplant Management Forum in 2017 for an oral presentation of survey results and intervention. In addition, he encouraged the workgroup to consider authoring editorials to bring awareness to the community that this provision of KAS is underutilized.

**Review of Public Comment Proposals**

**3. Simultaneous liver-kidney allocation**

The Kidney Transplantation Committee Chair presented the simultaneous liver-kidney allocation proposal, which will be released for public comment January 25, 2016. This proposal seeks to provide more clarity and consistency in the rules for liver-kidney allocation. The Committee did not have any concerns with this proposal.

**Other Significant Items**

**4. Imminent Death Donation**

The Ethics Committee presented their report on Ethical Considerations of Imminent Death Donation (IDD) to the Committee, requesting a formal response in terms of whether this donation option should be permissible and if so, under what circumstances.

The Committee was divided regarding this pathway. They iterated many of the same ethical concerns expressed in the report. The Committee indicated the need for objective clinical criteria or parameters to indicate what type of patient could potentially be an IDD donor, especially regarding the degree of brain damage in which this would be possible.

They raised concerns that minorities and other vulnerable populations would likely not accept this practice, as those groups tend to be wary of donation to begin with due to mistrust of the medical system generally. In addition, they may be unfairly treated.

However, there was consensus that the most relevant scenario in which this could be an option was when a family strongly desires donation to occur but the patient is not brain dead and is not a candidate for donation after cardiac death (DCD).

The Committee will compose a memo elaborating on these sentiments.

#### **5. Scientific Registry of Transplant Recipients Orientation**

The Scientific Registry of Transplant Recipients (SRTR) presented an introduction of the SRTR to Committee members to clarify the distinction between the mission and responsibilities of SRTR versus the OPTN.

#### **Upcoming Meeting**

- March 22, 2016