

OPTN/UNOS Ad Hoc International Relations Committee
Meeting Minutes
May 10, 2017
Teleconference

Susan Gunderson, MHA, Chair
Kishore Iyer, MD, Vice Chair

Introduction

The Ad Hoc International Relations Committee met by teleconference on 05/10/2017 to discuss the following agenda items:

1. 2016 Annual Report of Non-US Resident Transplant Activity
2. Upcoming Report to the OPTN Executive Committee

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

1. 2016 Annual Report of Non-US Resident Transplant Activity

Data Summary:

UNOS Research staff provided a brief summary of the data included in the 2016 annual report:

Waitlist Additions

- There was a slight increase in overall waitlist additions from 58,868 to 57,610. There was a slight increase in the number of waitlist additions of non-U.S. residents from 746 to 760. Additionally, the percentage of non-U.S. residents in the U.S. for the reason of transplant actually decreased.
- The number of waitlist additions for candidates who were in the U.S. specifically for transplant decreased from 321 in 2015 to 287 in 2016. Additionally, there was an increase for the percentage of people that were in the U.S. for the reason other than transplant.
- The number of transplant programs with at least one non-U.S. resident waitlist addition increased to 201 (an increase of seven). There were 625 programs (75.7%) that did not have a single waitlist addition for a candidate that was a non-U.S. resident; a decrease from 2015 when there were 666 programs.
- There were 46 programs that added four or more registrations for non-U.S. residents which is an increase from the 33 programs in 2015. The number of programs adding one, two and three remained relatively the same.
- After the four year trend of increase for all organs and in total, most organs showed a decrease in the number waitlist additions for non-U.S. citizens, non-U.S. residents specifically in the U.S. for reason of transplant. Kidney, liver, lung, and overall the number of waitlist additions decreased from 2015 to 2016. Heart was the only organ that saw an increase, both in raw number and in proportion.

Transplants

- In 2016, there were 27,622 total deceased donor transplants. Only 340 of those were for non-U.S. residents, and 141 were in the U.S. specifically for the reason of transplant.
- Of the 795 transplant programs that performed at least one transplant in 2016, 635 of those programs (79.9%) did not transplant a single non-U.S. resident. Only 30 programs (3.8%) transplanted four or more non-U.S. patients.

- For deceased donor transplants of non-U.S. residents, kidney transplants did increase although the proportion remained the same. Heart transplants did increase in raw numbers, while the proportion remained the same. However in total, the number of transplants performed for non-citizens that were in the U.S. for transplant did decrease overall, and decreased in proportion of total transplants overall.

Observations

- There was no difference between the percent of non-U.S. residents listed for transplant, the percent of non-U.S. residents receiving transplants. While there might be a small numerical difference, statistically there is no difference between the two proportions. The absolute number of waitlist additions and deceased donor transplants remains very low as it has for the past several years.
- After a four-year increase, the absolute number of waitlist additions and deceased donor transplants decreased from 2015 to 2016. This was the reversal of a four-year trend. The activity appears to be concentrated within a small number of programs. Most of the programs that are registering candidates do not list non-U.S. resident candidates; 75 percent of those programs that list any candidate do not list non-U.S. resident candidates.

Summary of Discussion:

One committee member noted that this is the best data the committee has seen in years; the numbers are low but not negligible but have also appeared to have leveled off. There is an interesting distribution among the transplant centers where these transplants are being performed but it is difficult to come to any conclusions about the data.

The Committee briefly discussed the number of non-U.S. residents that become deceased donors. They recommended including the information in the report with the caveat that the information is inconsistently reported and might not be accurate.

Next steps:

Submit the annual report for inclusion in the Board of Director materials for the June 5-6, 2017 meeting.

2. Upcoming Report to the OPTN Executive Committee

The Committee chair noted that she had accepted an invitation to provide an update to the OPTN Executive Committee and request feedback on a path forward.

Summary of discussion:

Committee leadership has drafted a summary report for Executive Committee review. This report contains a summary of the data, observations/conclusions, and draft recommendations and areas of potential concerns.

The Committee discussed the recommendation to request additional information from transplant programs. Several committee members questioned the purpose of requesting this information. Is it simply to inform transplant programs and get them to assess the impact on their waitlist? While the absolute numbers are small, there is the potential impact on the DSA and region. For example, if an active pediatric transplant center is transplanting non-resident candidates with metabolic disease. These candidates might be listed at Status 1B which could have a significant impact on regional candidates.

Committee members provided feedback on the draft summary report and agreed to continue discussions on a path forward following input from the Executive Committee.

Next steps:

Finalize summary report for the Executive Committee.

3. Other Significant Items

- None

Upcoming Meeting

- TBD