

**OPTN/UNOS Pancreas Transplantation Committee
Meeting Minutes
June 12, 2017
Conference Call**

**Jonathan Fridell, MD, Chair
Jon Odorico, MD, Vice Chair**

Introduction

The Pancreas Transplantation Committee (hereafter, the Committee) met via Citrix GoToTraining teleconference on 06/12/2017 to discuss the following agenda items:

1. PAK Guidance

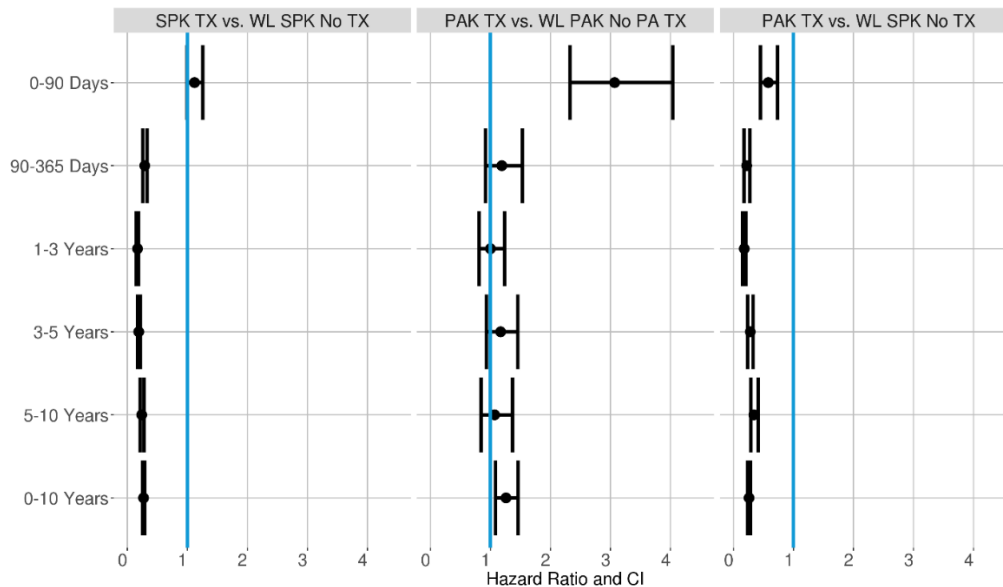
The following is a summary of the Committee’s discussions.

1. PAK Guidance

The Committee discussed the pancreas after kidney (PAK) guidance document that the Committee plans to send out to public comment this year.

Summary of discussion:

The Committee discussed the results of the data analysis, which found that the pancreas was protective of kidney graft survival if it followed either living or deceased donor kidney transplantation. The middle panel in the hazard ratio compared PAK transplant to waitlist PAK with no pancreas transplant, whereas the other two panels used waitlist SPK with no transplant as a comparison. Committee members felt that the hazard ratio should use the same comparison across the panels, and that the middle panel should be removed. Instead, the focused comparison would be with PAK recipients and SPK candidates. The Committee expressed support for removing the middle panel from the hazard ratio graph, seen below:



The Committee expressed interest in using a slide from the Wisconsin data showing mortality of the different types of transplants compared to staying on dialysis as a useful illustration of the importance of transplantation for diabetic uremic candidates. The Committee liaison will add the graph to the proposal.

The Committee discussed which candidates would benefit from PAK transplantation. The guidance specifies diabetic uremic candidates that have waited over a year for an SPK would be appropriate for a PAK transplant. A member wondered if there were other specific groups that it would be appropriate to mention. The Committee discussed subsets of PAK patients segmented by type 1 or type 2 diabetics, BMI, hypoglycemia, and secondary complications from diabetes that could be used in future analyses to identify appropriate PAK candidates. In general, the Committee felt that the guidance document could further emphasize the context for using PAK transplantation for diabetic uremic candidates.

The Chair noted it was important for the Committee to feel comfortable with the proposal before submitting the proposal for public comment. The Committee supported continuing to work on the guidance document, with the modifications mentioned during the call. The Committee felt that there was more discussion that was needed before voting to send the PAK Guidance document out for public comment.

Next Steps

The Committee liaison will set up a call to discuss the PAK Guidance further and determine if the revised document is ready to send out to public comment. Based on committee feedback, the guidance document will be modified and recirculated to the Committee for review. The research liaison will modify the hazard ratio chart based on Committee feedback.

Upcoming Meetings

- June 26, 2017
- June 30, 2017