

OPTN/UNOS Pancreas Transplantation Committee
Meeting Minutes
November 13, 2017
Conference Call

Jon Odorico, MD, Chair
Silke Niederhaus, MD, Vice Chair

Introduction

The Pancreas Transplantation Committee (hereafter, the Committee) met via Citrix GoToTraining teleconference on 11/13/2017 to discuss the following agenda items:

1. Maximum Allowable BMI for KP Waiting Time Criteria Update

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

1. Maximum Allowable BMI for KP Waiting Time Criteria

The Committee reviewed feedback from the Kidney Committee and the recommendation of the Type 2 Diabetes Subcommittee (hereafter, the Subcommittee) and voted to send the proposal to public comment in January.

Summary of discussion:

The Committee reviewed the problem the proposal is seeking to solve: primarily that the 3rd KP (kidney-pancreas) waiting time criterion and maximum allowable BMI (body mass index) are arbitrary barriers to transplant that remove discretion from the transplant team. The Kidney Committee reviewed the proposal and offered support for addressing the problem by modifying the BMI cap, but recommended not removing the 3rd KP waiting time criterion and references to BMI. Instead, the Kidney Committee recommended an incremental increasing of the maximum BMI cap.

The primary concern of the Kidney Committee is that there may be a greater increase in SPK transplants than anticipated because of a general increase in Type 2 KP candidates and recipients. A Committee member recommended gathering data on Type 2 KP candidates and recipients to respond to this concern. Another Committee member noted that the current policy does not prohibit wait time accrual for Type 2 candidates, but for those Type 2 candidates with high BMIs. Therefore impact on kidney alone transplants would still be minimal because of self-policing and conservative center behavior choosing KP recipients. The Committee agreed that the available data on Type 2 recipients transplanted with high BMIs indicate impact on kidney alone transplants would be minimal.

The Committee decided to remove a section from current policy that provides an exception for pediatric candidates from the 3rd KP waiting time criterion (section 11.3.A). Once the 3rd KP waiting time criterion is removed from policy, the pediatric exception becomes superfluous. The Subcommittee had previously expressed concern whether removal of the section would have an impact on the pediatric population. After reviewing the kidney wait time criteria, which allows pediatric kidney candidates to be listed without medical criteria, the Committee agreed that the section would become unnecessary if the 3rd KP waiting time criterion was removed. Pediatric candidates would still accrue waiting time without medical criteria as it is with current policy.

The Committee reviewed the Subcommittee recommendation to support the original proposal, which removes the 3rd KP waiting time criterion and references to the maximum allowable BMI. The Subcommittee supported this option because it avoids an arbitrary cap and restores

discretion to the transplant team. The Subcommittee felt that the proposal to remove the 3rd KP waiting time criterion and references to maximum BMI best addresses the problem and thus represents the best solution.

The Committee agreed with the Subcommittee's recommendations and voted unanimously to send the proposal to remove the 3rd KP waiting time criterion and references to maximum allowable BMI to public comment in January.

Next steps:

The proposal will go out for public comment January 22, 2018.

Upcoming Meetings

- January 16, 2018 (teleconference)