Introduction

The OPTN Liver and Intestinal Organ Transplantation Committee (the Committee) met via teleconference on 10/04/2019 to discuss the following agenda items:

1. Region 8 Split Liver Variance
2. Other Existing Variances
3. Recovery of Kidneys
4. Public Comment Update: Clarification of Pre-Existing Liver Disease
5. Other Significant Items

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

1. Region 8 Split Liver Variance

The OPTN Board of Directors (the Board) approved a closed variance for the allocation of split liver segments in Region 8 at their June 2019 meeting.

Summary of discussion:

The variance that was approved by the Board in June 2019 permits participating transplant programs to offer the second segment of the split liver to a candidate at the same transplant program or an affiliated transplant program once the segment has been offered to candidates with a model for end-stage liver disease (MELD) or pediatric end-stage liver disease (PELD) score of at least 33 and Status 1 candidates listed at liver transplant programs within 500 nautical miles (NM) of the donor hospital.

The variance was approved with the expectation that it would be implemented on September 1, 2019. At that time, the Board expected the Acuity Circles policy, which uses NM as the unit of distribution, to be in effect. However, the units of distribution for deceased donor livers are still donation service area (DSA) and Region. Therefore, the Committee discussed a special public comment proposal to align the units of distribution used in the variance with the units of distribution used in the current allocation system.

The proposed resolution would allow the units of distribution used in the variance to remain in alignment with the units used in the allocation of deceased donor livers, pending allocation changes.

A formal vote was taken regarding: do you approve the policy language for the Region 8 Split Liver Variance to be sent out for special public comment?

Results were as follows: 13 (100%) Approve; 0 (0%) Abstain; 0 (0%) Not Approve

Next steps:

The proposed language will be posted for public comment.
2. Other Existing Variances
The OPTN contract requires the OPTN contractor to evaluate all existing variances and recommend whether the variances should be continued or terminated.

Summary of discussion:
The Chair informed the Committee of each of the liver variances that are technically active but are not being used. These variances will be recommended to be terminated by the Board because they are no longer in use. The Committee asked if the programs or OPOs that participated in the variances would be able to share pertinent data or experiences with the Committee.

Next steps:
Active variances that are no longer being used will be recommended to be terminated by the Board.

3. Recovery of Kidneys
The Committee previously discussed a project to require liver procurement teams to also recovery kidneys when requested.

Summary of discussion:
The Chair informed the Committee that the OPTN does not have the purview to require liver procurement teams to also recover kidneys. The Committee agreed to proceed with a communication encouraging the recovery of kidneys instead of a policy requirement.

The Committee noted that it is the responsibility of OPOs to coordinate organ recovery, so the OPO would need to request that the liver procurement team also procure the kidneys, not the kidney transplant team.

Next steps:
The Committee will proceed with a communication encouraging liver teams to recover the kidneys when requested by the OPO.

4. Public Comment Update: Clarification of Pre-Existing Liver Disease
The fall 2019 Public Comment period ended on October 2. The Chair presented the sentiment submitted on the Committee’s proposal to clarify the definition of pre-existing liver disease.

Summary of discussion:
The proposal was largely supported during public comment. It was supported at each regional meeting and by all societies that submitted comments.

Next steps:
The Committee will vote on the final policy language to be presented to the Board at their next meeting.

5. Other Significant Items
A Committee member informed the Committee of a recent effort in the transplant community to improve pediatric transplant outcomes. The Committee agreed to discuss the topic more at the in-person meeting.
Upcoming Meetings

- October 22, 2019 – Chicago, Illinois
- November 19, 2019 - Teleconference