

OPTN Pancreas Transplantation Committee

Meeting Minutes

December 18, 2019

Conference Call

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Introduction

The OPTN Pancreas Transplantation Committee (the Committee) met by teleconference on December 18, 2019 to discuss the following agenda items:

1. OPTN Board of Directors (BOD) Update
2. Alaska Donors- Review & Vote on Policy Language
3. Policy Oversight Committee (POC) Update
4. Import Back Up Update

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

1. OPTN Board of Directors (BOD) Update

The Committee was given an overview of the December BOD meeting.

Summary of discussion:

A member asked about any opposition to passing the *Eliminate the Use of DSA and Region in Pancreas Allocation Policy* proposal.

Discussion around opposition to the passing of the proposal had to do with circle size along with two Board members who preferred a population density based circle. A Board member also gave a suggestion that after a kidney or pancreas has traveled beyond 250 Nautical Miles (NM), it should go to advanced placement to expedite the allocation process. There has been no modeling done on this, but members of the BOD thought this could be worth looking into for Continuous Distribution (CD).

Eliminate the Use of DSA and Region in Pancreas Allocation Policy proposal passed with the support of 34 board members.

Next Steps:

Eliminate the Use of DSA and Region in Pancreas Allocation is set for a December 2020 implementation.

2. Alaska Donors- Review & Vote on Policy Language

The Committee voted on sending the following policy language on Alaskan donors to Spring 2020 Public Comment:

11.7 Administrative Rules

11.7.A Location of Donor Hospitals

For the purpose of determining the location of the donor hospital for allocation of pancreas, kidney-pancreas, or islets, kidneys and pancreata procured in Alaska will be considered procured from the Seattle Tacoma Airport, Seattle, Washington.

Summary of discussion:

A member asked if a particular Organ Procurement Organization (OPO) had made any statements on the necessity of considering Alaskan donors to be from Seattle (SeaTac). It was explained that when the organ allocation systems for kidney and pancreas are switched to be based on a 250 NM circle, certain consideration for Alaska should be made as there are no "local" transplant programs in Alaska. Also, 250 NM from Alaska will include no transplant programs, so these offers would become National automatically. This could contribute to an underutilization of organs from Alaska and ultimately lead to more discards. In order to achieve the best use of donated organs, it has been proposed to have donated pancreata from Alaska be treated as if they are from Seattle.

A member confirmed that this administrative rule was similar to the one passed but not yet implemented for liver. This member commented that it would be beneficial to have this allocation language in place for all organs to establish consistency within the system and that the OPO Committee should consider sponsoring the initiative. The Committee discussed that while this administrative rule could help positively impact utilization for abdominal organs, the different zones in thoracic allocation and differences in ischemic time imply the administrative rule is not an applicable or necessary change to make in thoracic policy.

A member noted that organs flown from Alaska already regularly go to Seattle, as it would be logistically challenging to reallocate from Alaska.

A member asked if this change could impact Hawaii and Puerto Rico. It was explained that the main difference between Alaska and Hawaii/Puerto Rico is that the latter have transplant programs where organs could be allocated to nearby candidates. These localities have a local population that could benefit from procured organs, while Alaska does not. A member added that the potential for organ loss can be decreased by implementing SeaTac, while Hawaii and Puerto Rico can function under the normal allocation system.

The Committee was asked, "Do you support the Alaska allocation administrative rule policy language going forward to the OPTN Spring 2020 Public Comment period?"

Vote: Y- 100%- 13 members, No- 0%- 0 members

Next Steps:

The Alaska allocation administrative rule policy language will move forward to the OPTN Spring 2020 Public Comment period.

3. Policy Oversight Committee (POC) Update

The Committee was given an update that they are permitted to start work on continuous distribution as of December 2019. The POC also plans to work on general multi-organ policy as of December 2019 and the Committee can start on pancreas specific multi-organ policy in mid-2020.

Summary of discussion:

No discussion.

4. Import Back Up Update

The Committee was informed on the Workgroup's recent developments. This Workgroup has been renamed "Released Kidney/Pancreas Allocation" to better describe its function.

Summary of discussion:

A member asked what percentage of pancreata came from an import match run. In 2018, there were 35 (3%) acceptances that came from an import (versus match) run. A member asked about having to run a new match for data import tissue typing. This member thought that match reruns may have inflated the 3%. This data has been cleaned and aggregated, but the public comment document does plan to specifically ask how tissue typing could impact this proposal. Sometimes, an organ undergoing reallocation has very little tissues available for physical cross matching. Specific feedback on this topic could reveal the extent of this issue.

Next steps:

The Committee was informed that the OPO Committee has voted to send the solution to public comment. The Public Comment period for this proposal will be January 22, 2019 until March 24, 2019.

Upcoming Meetings

- January 15, 2020 (teleconference)
- February 19, 2020 (teleconference)