

OPTN Liver & Intestinal Organ Transplantation Committee

Meeting Summary

April 3, 2020

Conference Call

James Trotter, MD, Chair

James Pomposelli, MD, PhD, Vice Chair

Introduction

The Liver & Intestinal Organ Transplantation Committee (the Committee) met via Citrix GoToTraining teleconference on 4/3/2020 to discuss the following agenda items:

1. NLRB Enhancements Public Comment Review
2. Acuity Circles One Month Report
3. COVID-19 Update

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

1. NLRB Enhancements Public Comment Review

The Committee reviewed public comment feedback on the *Enhancements to the National Liver Review Board* proposal.

Summary of Data

The proposal was widely supported across the OPTN regions. Two themes in public comment were:

- Inactive reviewers should be removed every six months, not 12 months
- Not all adults with metabolic disease should be considered for MMaT-3- Review themes from public comment

Summary of Discussion

The Chair of the NLRB Subcommittee supported the recommendation to remove inactive reviewers every six months.

Another subcommittee member commented NLRB applications often have very limited narratives which makes it difficult to determine if a patient is eligible for exception points.

Next Steps

The Committee will continue discussions on the proposal and will consider how they could better align the scope of the NLRB in policy and the NLRB guidelines. The Committee will vote on the language to send to the Board of Directors at their next meeting on April 14.

2. Acuity Circles One Month Report

The Committee reviewed some data from the acuity circles one-month post-implementation activity report.

Summary of data

The Committee viewed key data points comparing data from three cohorts:

- February 5 – March 4, 2019 (first pre-era)
- January 7 – February 3, 2020 (second pre-era)
- February 4 – March 2, 2020 (post-era)

The following data points were presented to the Committee comparing the three cohorts above:

- Number of registrations added to liver waiting list by week
- Number of liver donors recovered by week
- Liver discard rate by week
- Number of deceased donor livers recovered by era, DSA of recovery, and discard status
- Number of deceased donor liver transplants by week
- Number and percent of deceased donor liver transplants by age group and era
- Number of deceased donor liver transplants by HCC exception status and week
- Number of deceased donor liver transplants by era, DSA of transplant center, and donor DCD status
- Number of deceased donor liver transplants by transplant program
- Number and percent of deceased donor liver transplants by MELD or PELD score or status and era
- Distribution of distance from donor to transplant hospital for deceased donor liver transplants by week
- Percent of deceased donor liver transplants that traveled further than 150NM by week
- Percent of deceased donor liver transplants that occurred within same DSA as donor hospital by week
- Number of deceased donor liver transplants by era, DSA of transplant center, and donor share type
- Number of liver candidates removed due to death or too sick to transplant by week

The report summarized:

- Metrics are constrained to data points that are reliably available while adhering to data submission lags required by OPTN policy
- One month metrics suggest no apparent national changes in trends during the post-policy period compared to trends seen in similar pre-policy periods with respect to:
 - Number of deceased donor livers being recovered
 - Number of deceased donor liver transplants
 - Discard rates
 - Removals from the waiting list due to too sick to transplant or death
- Metrics suggest an increase in distance and non-local sharing during the post-policy period compared to similar pre-policy periods
- The system will continue to be monitored closely and metrics and trends will continue to be added as more time and data accrue
- The impact of COVID-19 pandemic may be a confounding factor in analyzing this policy change in the coming months
- Still too early to evaluate whether policy was successful at achieving its goals and true performance

The full one-month post-implementation report is available on the OPTN website.

Summary of Discussion

A committee member requested to see the number of organs being recovered and exported to determine if local teams are recovering organs for distant hospitals. The Committee was informed the OPTN does not currently collect information on whether recovery teams are local.

Numerous committee members agreed it's too early to evaluate trends in the metrics post-implementation of acuity circles. Another committee member noted it will be difficult to separate data from the effects of allocation compared to the effects of COVID-19.

Next Steps

More data will be added to each metric on a regular basis. The Committee will continue to be monitor post-acuity circle implementation metrics closely.

3. COVID-19 Update

The Committee reviewed information related to OPTN's recent guidance for members as well as system changes in response to the COVID-19 pandemic. Up to date information and guidance can be found on the UNOS website.

Next Steps

Members are encouraged to report their COVID-19 issues through the provided OPTN survey. Results will be shared with HRSA daily and system-wide transplant metrics will be monitored daily to identify issues. The Committee will continue to be updated of any emergency policy changes due to COVID-19.

Upcoming Meetings

- April 14, 2020
- May 1, 2020