

**OPTN Liver and Intestinal Organ Transplantation Committee
National Liver Review Board Subcommittee
Meeting Summary
April 9, 2020
Conference Call**

**James Trotter, MD, Committee Chair
James Pomposelli, MD, PhD, Committee Vice Chair
Julie Heimbach, MD, Subcommittee Chair**

Introduction

The National Liver Review Board (NLRB) Subcommittee (the Subcommittee) met via teleconference on 4/9/2020 to discuss the following agenda items:

1. Proposed changes to portopulmonary hypertension standard exception criteria
2. Exception Narratives Data Request
3. Cholangiocarcinoma Data Request

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

1. Proposed changes to portopulmonary hypertension standard exception criteria

A physician member of the community gave a presentation to the Subcommittee on suggested policy revisions for portopulmonary hypertension MELD exception criteria.

The presenter recommended the following revisions to POPH MELD exception policy:

- Modify pulmonary hemodynamic criteria to additionally grant exception if, with POPH treatment, PVR is less than 240 mmHg, regardless of mPAP
- Suggest liver disease severity criteria be MELD greater than 12

The presenter also asked the Subcommittee to consider creating a POPH MELD exception registry.

Summary of Discussion

The Subcommittee recommended a strong education effort rather than creating the suggested liver disease severity criteria limit. There was also a recommendation to add a free-text field to the exception form that allows for entering a liver-related indication for liver transplant. The Subcommittee Chair commented adding data elements to the forms would need to go through the OPTN data governance process.

Next Steps:

The proposed revisions will be presented to the full Committee on April 14 for further discussion.

2. Exception Narratives Data Request

The Subcommittee reviewed a data report on themes in NLRB exception narrative justifications and reviewer comments.

Summary of Data:

The report is a qualitative analysis of exception cases submitted to the NLRB from May 14, 2019 through October 31, 2019 with an ART appeal form or Liver Committee appeal form. The Subcommittee reviewed qualitative data on reviewer votes, reviewer comments, and justification narratives.

3. Cholangiocarcinoma Data Request

The Subcommittee reviewed a data report requested by the NLRB Subcommittee on waitlist mortality, transplant, and survival data for patients with cholangiocarcinoma (CCA) exceptions compared to those with hepatocellular carcinoma (HCC) exceptions.

Summary of Data:

The report summarized the following:

- Probability of removal from the waitlist for transplant is similar for CCA and HCC candidates
- Probability of removal from the waitlist due to death or too sick for transplant is higher for CCA candidates compared to HCC candidates
- In the cohort of DD liver transplant recipients from 11/1/2015-7/31/2017: There were no statistically significant differences in post-transplant survival probabilities over a two-year period
- In the cohort of DD liver transplant recipients from 1/1/2012-7/31/2014: CCA recipients experienced lower post-transplant survival probabilities than HCC recipients over a five-year period. The difference is less evident during the first year post-transplant

Next Steps

In current policy, CCA exception candidates are assigned MMat-3. The Subcommittee Chair asked the other subcommittee members to think about if this assigned score is appropriate for CCA exception candidates. This data will be presented to the full committee on April 14 for further discussion.

Upcoming Meeting

- May 14, 2020