

**OPTN Histocompatibility Committee
Meeting Summary
April 17, 2020
Conference Call**

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Introduction

The Histocompatibility Committee met via Citrix GoToTraining teleconference on 04/17/2020 to discuss the following agenda items:

1. COVID-19 Resources/Update
2. HLA Equivalency Tables 2020 Update and Vote
3. CPRA Calculator RFP Update
4. Round Robin Updates
5. KPD Project Discussion
6. Thoracic Candidate Sensitization Data
7. Open Forum

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

1. COVID-19 Resources/Update

UNOS staff presented on the current UNOS COVID-19 response efforts.

Data summary:

Slides attached.

Summary of discussion:

The Committee had no questions or concerns.

2. HLA Equivalency Tables 2020 Update and Vote

UNOS staff presented on the tables changes prior to and post public comment. The Committee Chair called for a vote to send the proposal to the Board of Directors (BOD) for approval.

Data summary:

Slides and policy language attached.

Summary of discussion:

The Committee is happy for the precedent of epitope-based assignment being set, and grateful for all of the hard work being put in by the subcommittee. The Chair also asked about the UNOS validation process, and UNOS staff explained the process of checking current tables against UNET values and current policy language, as well as checking tables 4-15 and 4-16 for consistency of values between them.

The Committee voted unanimously to send the proposal forward to the BOD for approval.

Next steps:

UNOS staff will compile the Board Report to send with the policy language to the BOD for approval at their meeting in June.

3. CPRA Calculator RFP Update

UNOS staff presented on the current progress of the Request for Proposal (RFP) for an updated CPRA calculator.

Data summary:

Slides attached.

Summary of discussion:

The Committee was unaware of the level of effort required when proposed, but is glad for all of the work that has gone into the project and excited for the outcome. Kransdorf is still waiting to hear back from JAMA on the status of his submitted manuscript.

Next steps:

UNOS expected to release RFP to potential bidders at the end of April.

4. Round Robin Updates

Committee liaisons presented on relevant projects they've been working on with the committees they support.

Summary of discussion:

- Data Advisory Committee: Starting a project on HLA-related data
- Kidney Committee: Biggest focuses have been medical urgency and continuous distribution
- Organ Procurement Organization Committee: Liaison just got added to the invite list
- Operations and Safety Committee: Putting together a question and answer session on how members have been responding to COVID-19, reaching out to DTAC about guidance on donor testing
- Pancreas Committee: Working on continuous distribution along with Kidney, as well as reallocation and high CPRA matching

5. KPD Project Discussion

UNOS KPD Program Director presented on the status of histocompatibility-related declines in the UNOS KPD program.

Data summary:

Slides attached

Summary of discussion:

Concerns about current program raised by committee:

- Length of time for a physical crossmatch, centers have 15 days to complete from date the offer was made
- 24% of all declines in the KPD program are histocompatibility based, with 8% being on physical crossmatches and 16% on virtual crossmatches. Some of these are due to known unacceptable antigens
- KPD histocompatibility policies not updated along with deceased donor histocompatibility policies

- KPD programs are not required to have histocompatibility lab information listed

Potential policy steps discussed:

- Requiring raw HLA typing data be uploaded
- If a potential candidate is sensitized, requiring HLA director or designee to review pre-select
- Creating education on pre-select and potential match review
- Requiring transplant centers and histocompatibility labs review cases together on a regular basis
- Accountability for broken KPD chains, possibly structured after National Kidney Registry (NKR)

Committee was unanimous in agreement to form a workgroup to start addressing concerns and potential solutions.

Next steps:

UNOS Committee liaison will initiate a workgroup to start addressing KPD policy concerns.

6. Thoracic Candidate Sensitization Data

UNOS Research staff presented on the research request submitted by the Committee on sensitized thoracic candidates.

Data summary:

Slides attached.

Summary of discussion:

Committee would like to know rates of HLA mismatch for the 90-100% CPRA group. The Committee would like to know whether or not the Thoracic Committee was as concerned about the potential for highly sensitized candidates to be disadvantaged. Leadership explained that they are developing a survey to gauge the feelings of the Thoracic transplant community, and the Histocompatibility Liaison to the Thoracic Committee explained that he believes it may be a concern, especially for cardiac transplant, but that allocation policies can be a controversial subject. He believes that the Thoracic community also wants equitable policies, and that allocation points would incentivize centers to enter unacceptable antigens, but that the Lung subcommittee would likely be less concerned about this than the Heart subcommittee.

A Committee member also brought up that this data is likely underrepresenting the problem of sensitization in thoracic candidates, and that looking into patients who received offers but declined due to crossmatches or unacceptable antigens might help to better represent this issue.

Next steps:

UNOS Research to look into 90-100% CPRA HLA mismatch rates, and present data to Thoracic Committee. Research also to present second half of data at next Histocompatibility Committee meeting. UNOS Histocompatibility liaison to work on survey, along with UNOS Thoracic liaison.

7. Open Forum

The Committee Chair opened the floor for open discussion of any concerns of committee members.

Summary of discussion:

A Committee member brought up creation of an HLA equivalency table for null alleles. There is currently no OPTN standard for null alleles, and while ASHI requires null allele typing, CAP does not. As it is not uniform across accrediting agencies, the committee member felt the OPTN should address whether or

not this is necessary for solid organ donation. The Committee felt that the OPTN including common null alleles in an equivalency table would be beneficial, and felt that labs should be required in policy to define all listed alleles.

Next steps:

UNOS Policy staff will document the request for null alleles to be included in the upcoming HLA Equivalency Tables review, pursuant to OPTN *Policy 4.9: HLA Antigen Values and Split Equivalences*.

Upcoming Meetings

- May 12, 2020, Conference Call
- June 9, 2020, Conference Call