Introduction

The Living Donor Committee (the Committee) met via Citrix GoToTraining teleconference on 06/10/2020 to discuss the following agenda items:

1. Living Donor Vascularized Composite Allografts (VCA) Policy 14 Project
2. New Project Discussion
3. Committee Service Recognition and Committee Roster Preview

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

1. **Living Donor Vascularized Composite Allografts (VCA) Policy 14 Project**

The Committee voted to approve the draft policy language for public comment.

**Vote:**

Do you approve sending the draft updates to Policy 14 for Public Comment?

Yes: 100% (13) No: 0% (0)

**Next steps:**

A public comment proposal will be drafted to accompany the policy draft language.

2. **New Project Discussion**

The Committee discussed potential ideas for new projects.

**Summary of discussion:**

**Evaluate Existing Exclusion Criteria**

The Committee discussed the idea of reviewing the contraindications to living donation according to [OPTN Policy 14.4D: Living Donor Exclusion Criteria](https://optn.transplant.hrsa.gov/resources/policies-and-guidelines/), specifically diabetes and active malignancy. The Chair explained if a kidney donor is diagnosed with low grade prostate carcinoma for example, the patient will be unable to donate because the active malignancy is a contraindication to donation.

Additionally, the Chair explained the current policy lists diabetes as a contradiction for kidney donation. The Chair informed the Committee of the most recent Kidney Disease: Improving Global Outcomes (KDIGO) guidelines which outlines selective use of kidney donors with diabetes.

The Chair asked the members if they think these topics warrant further research and discussion. Members agreed these were innovative ideas. A member proposed the idea of absolute versus relative contraindications. The member stated that the removal of diabetes from contraindications will require guidance and favored researching the topic more. The Chair reminded members that their role as a
committee is to work towards safe and informed donation processes for both donor and recipient. A member agreed and stated that living donation has endured because of conservative measures. Another member agreed and wondered if the Committee should look at the entire exclusion list and not just diabetes and malignancies. The Committee Chair recommended members to review the entire contraindication table in *OPTN Policy 14.4D: Living Donor Exclusion Criteria*.

A member suggested to look at how other countries classify diabetes. For example, the member stated that they believed the British Transplant Society classifies diabetes as a relative contraindication. A member asked for research to include associated long term outcome data of those donors. Members agreed that they are interested in further research on this topic.

A member proposed collecting data on new indications for liver diseases. The Chair agreed this is important data to capture but proposed that it falls under the purview of the Liver & Intestinal Organ Transplantation Committee because it involves recipient data collection. The Chair asked if the Liver and Intestinal Organ Transplantation Committee could provide a report on exceptional indications for living donation transplants. Staff responded they will work with the research team to determine what data is available.

*Optimization of the Living Donor Follow-Up (LDF) Form*

The Committee discussed the potential project idea of modifying the LDF forms. The Committee had previously expressed interest in using data to determine the risk of end-stage renal disease (ESRD) to prior living kidney donors. The Committee was reminded that the LDF is currently receiving an update because of the VCA Committee’s current data collection project.

The Committee requested more information on:

- How the implementation on the VCA update would affect further updates to the LDF
- What the OMB approval process timeline would be for changes to the LDF
- The original intent and long term goal of this project idea

*Other Project Ideas*

Committee members discussed other ideas for potential projects. A member explained their idea regarding analyzing access of living donation according to geographic area and socioeconomic disparities. The Chair responded that the Committee has often discussed this idea and, in the past, has attempted projects which address disparities. The Chair agreed this is highly valuable but the Committee has struggled on how to address this from an OPTN perspective. Another member agreed and emphasized the social vulnerability of the population really impacts living donation because of a variety of reasons.

Another member suggested the idea of exploring the frequency and utilization of deceased donor liver and living donor kidney for patients who need both. The Committee requested more information on this topic.

*Next Steps:*

Members will review *OPTN Policy 14.4D: Living Donor Exclusion Criteria* and KDIGO guidelines. Staff will bring a summary of the project ideas, available data, and next steps to the next meeting. The Data Governance team will be asked to give a presentation on the new data process at an upcoming meeting.

3. Committee Service Recognition and Committee Roster Preview

Committee members were recognized for their service on the Committee.
Upcoming Meetings

- July 8, 2020 (teleconference)
- August 12, 2020 (teleconference)