

Clarify Multi-Organ Allocation Policy

OPTN Organ Procurement Organization Committee

Background

- Policy Oversight Committee strategic policy priority on multi-organ allocation
 - Initial phase to address multi-organ allocation policy
- Multi-disciplinary workgroup with representation from 11 OPTN Committees

Purpose of Proposal

- Provide OPOs with clearer direction when offering certain multi-organ combinations
 - Addressing the multi-organ combinations in this proposal will provide policies for 97% of multi-organ transplants
 - Clear thresholds will limit OPO discretion and improve consistency in multi-organ allocation decision-making

Proposal: Heart and Lung Multi-Organ Criteria

Establish medical criteria for when OPOs must offer the second organ to the same candidate when allocating according to either the heart or lung match run

- Criteria reflect multi-organ candidates with elevated medical urgency
- 80% of multi-organ transplants in 2019 would meet proposed criteria

Proposed criteria for heart and lung candidates to receive offers for either a kidney or liver, if listed for a second organ:

- Heart Adult Status 1, 2, and 3, Pediatric Status 1A and 1B
- Lung Candidates with a lung allocation score of greater than 35

Proposal: Change to Geographic Unit

- Current policy uses 250 NM for heart and lung, 150 NM for liver as threshold for required sharing of second organ
- Proposal increases distance to 500 NM to better align with heart and lung policies
 - Lung allocation ranks candidates at least 12 years old within 500 NM (for donors 18 or older)
 - Heart allocation begins with Status 1, 1A, and 2 candidates within 500 NM (for donors 18 or older)

Proposal: Reference to Kidneys

- Current policy does not reference kidneys as the second required organ
 - Common practice to allocate a kidney from the same donor if a candidate is also listed for a kidney
- This proposal adds specific language addressing kidneys as part of heart-kidney and lung-kidney combinations
 - Consistency in allocation of heart-kidney and lung-kidney combinations

Proposal: Clarity on Match Runs

- Current policy does not address which match run OPOs use to allocate multi-organ combinations
- Proposal clarifies that OPOs allocating according to the heart or lung match run must offer the liver or kidney to a candidate listed for the second organ if they meet the proposed criteria

Rationale

- Current policy requires significant OPO discretion for certain multi-organ combinations, leading to inconsistency in multi-organ allocation
 - Defines medical criteria
 - Aligns multi-organ allocation geographically with heart and lung policy
 - Specifies required second organ type
- This proposal is the first step to address multi-organ policies
 - Future projects will address eligibility criteria and safety nets

What do you think?

- Is Heart Adult Status 1, 2, 3 and Pediatric Status 1A and 1B and a lung allocation score of greater than 35 appropriate thresholds for when OPOs must offer a liver or kidney to a multi-organ candidate listed for those organs?
- Is 500 NM an appropriate distance for when OPOs must offer a liver or kidney to a multi-organ candidate meeting the proposed criteria?