Introduction

The PELD/Status 1B Criteria Workgroup (the Workgroup) met via Citrix GoToMeeting teleconference on 01/21/2021 to discuss the following agenda items:

1. Pediatric Waitlist Mortality Characteristic Review
2. Status 1B Data Request

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

1. **Pediatric Waitlist Mortality Characteristic Review**

The Workgroup aims to account for characteristics not currently collected by the OPTN to better predict waitlist mortality for children and equalize mortality risk within the pediatric population.

**Summary of discussion:**

A member presented portal hypertensive bleeding to the Workgroup. The member reported that there is evidence that portal hypertensive bleeding predicts pediatric waitlist mortality. A member added that portal hypertensive bleeding is a discrete and objective criterion. Another member suggested that the Workgroup might look at some of the other criteria shown during the presentation when considering the Status 1B data request.

A member presented ascites to the Workgroup. He reported that it is possible that this characteristic predicts pediatric waitlist mortality in moderate – severe and spontaneous bacterial peritonitis (SBP) cases. The member added that he believes the degree of ascites should be captured for patients of all ages. Another member asked why ascites is not a required field for patients under the age of 12. A member answered that it is not collected due to lack of trust and the difficulty of quantifying ascites. Members discussed that more work on quantifying ascites should be done with imaging and ultrasound technology.

2. **Status 1B Data Request**

The Workgroup discussed a data request to inform the conversation on Model For End-Stage Liver Disease (MELD)/Pediatric End-Stage Liver Disease (PELD) 25 threshold and sorting within Status 1B.

**Summary of discussion:**

The Workgroup discussed the data request in two parts. The first is the MELD/PELD 25 threshold. A member asked how encephalopathy would be recorded. UNOS staff responded that collection of encephalopathy data is optional for patients under 12, but looks to be complete enough for analysis. A
member added that encephalopathy can be hard to measure. Another member reported that it will be important to look at how many patients meet all criteria for Status 1B, except the MELD/PELD threshold.

The second part of the data request focuses on sorting within Status 1B. A member reported that this part of the data request aims to find out which candidates are too sick to transplant or die while on the waiting list and could be better sorted based on diagnosis within the 1B Status. A member confirmed that Status 1B by exceptions typically have chronic liver disease or listed for both a liver and intestine transplant. Another member suggested that the Workgroup look at diagnoses for granted Status 1B exceptions.

Next steps:

The Work Group will submit the discussed data request and review the results when available.

Upcoming Meeting

- February 18, 2021
Attendance

- **Workgroup Members**
  - Andrew Bonham
  - Regino Gonzalez- Peralta
  - Julie Heimbach
  - Evelyn Hsu
  - George Mazariegos
  - Douglas Mogul
  - John Magee
  - Emily Perito
  - Sara Rasmussen
  - Jorge Reyes

- **HRSA Representatives**
  - Jim Bowman
  - Marilyn Levi

- **SRTR Staff**
  - Michael Conboy
  - David Schladt
  - Andrew Wey

- **UNOS Staff**
  - Rebecca Brookman
  - Matt Cafarella
  - Julia Foutz
  - Betsy Gans
  - Kelley Poff
  - Karen Williams