

Meeting Summary

OPTN Living Donor Committee
Exclusion Criteria Subcommittee
Meeting Summary
February 5, 2021
Conference Call

Pooja Singh, MD, Chair

Introduction

The Living Donor Committee Exclusion Criteria Subcommittee (the Subcommittee) met via Citrix GoToMeeting teleconference on 02/05/2021 to discuss the following agenda items:

- 1. Background & Discussion
- 2. Data Review & Discussion

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

1. Background & Discussion

The Subcommittee reviewed the background of the exclusion criteria for living donation policy.

Summary of discussion:

A member asked for more information regarding the reasons these exclusion criteria were added to policy. Staff responded that the original reason for why each exclusion criteria was added was difficult to find.

Another member requested the Subcommittee review how diabetes is defined.

A member asked if policy should set clinical exclusion criteria. Another member responded that policy is not supposed to set clinical practice, and that programs set clinical practice based on evidence. The member stated that the Living Donor Committee should create policy to protect the donor.

Another member recommended creating qualifiers for certain exclusion criteria to add into policy.

A member suggested the Subcommittee review the exclusion criteria for living donation in its entirety in order to back-up decisions for changes to certain criteria. The member added that instead of the policy language stating "must exclude all donors who meet any of the following exclusion criteria", it could be changed to "exclude donors resting on medical judgement".

2. Data Review & Discussion

The Subcommittee reviewed and discussed data related to living donor exclusion criteria.

Data summary:

The Subcommittee reviewed current exclusion criteria and available data related to exclusion criteria including:

- Current fields on the living donor-registration form (LDR) related to exclusion criteria
- Number and percent of living kidney and liver donors with history of cancer
- Cancer-free interval reported for living kidney and liver donors with history of cancer
- Diabetes status indicated on LDR for living kidney donors

- Treatment for living donors with diabetes indicated on the LDR
- Number and percent of living kidney donors with history of hypertension
- Method of control reported for living kidney donors with history of hypertension
- Number of therapeutic kidney donors and transplants
- Living donor-derived malignancy

Summary of discussion:

The Chair asked if there was more information on the indications for therapeutic kidney donors identified in that data set. The Chair asked if the post-donation follow-up is the same for therapeutic donors as it is for living organ donors. A member responded that living donor follow-up is not required for therapeutic donors.

The Chair mentioned that the British Guidelines do not include diabetes as an absolute contraindication, instead it suggests thorough evaluation of potential diabetic donors and analyzing the risk and benefits.

A member emphasized that as the Living Donor Committee, the members should work towards ensuring that the processes in place are safe for living donors. The member stated that if the project's pathway concludes with center's developing individual protocols for living donor exclusion criteria, then the Living Donor Committee should develop guidance or structure to protect living donors.

Next steps:

Members will research clinical exclusion criteria before the next meeting.

Upcoming Meetings

- March 5, 2021 (teleconference)
- April 2, 2021 (teleconference)

Attendance

• Committee Members

- o Angie Nishio Lucar
- Heather Hunt
- Nahel Elias
- o Pooja Singh
- o Randy Schaffer
- o Titte Srinivas
- o Vineeta Kumar

• HRSA Representatives

- Adriana Martinez
- o Raelene Skerda
- Vanessa Arriola

• SRTR Staff

Bertram Kasiske

UNOS Staff

- o Kerrie Masten
- o Leah Slife
- Lindsay Larkin
- o Meghan McDermott
- o Nicole Benjamin
- Sarah Booker
- o Tina Rhoades