

# **Meeting Summary**

OPTN Living Donor Committee
Meeting Summary
February 17, 2021
Conference Call

## Heather Hunt, JD, Chair Titte Srinivas, MD, Vice Chair

#### Introduction

The Living Donor Committee (the Committee) met via Citrix GoToMeeting teleconference on 02/17/2021 to discuss the following agenda items:

- 1. Cross-Committee Updates
- 2. OPTN Governance Presentation
- 3. Prior Living Donor Priority Discussion

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

## 1. Cross-Committee Update

The Committee was updated on cross-committee collaboration.

## Summary of discussion:

Policy Oversight Committee (POC)

Recent POC meetings focused on the OPTN Strategic Plan, which the Committee will receive a presentation on and have an opportunity to provide feedback in March.

Vascularized Composite Allografts (VCA) Genitourinary Workgroup

The VCA Genitourinary Workgroup has had initial meetings and a more substantial update will be given in a future Committee meeting.

Continuous Distribution Joint Call

The joint calls have provided high level updates of organ-specific committees progress on continuous distribution project efforts.

Exclusion Criteria Subcommittee

The first meeting was held and Subcommittee members are currently researching specific clinical exclusion criteria in order to decide if changes are warranted.

## Next steps:

The Committee will continue to receive updates on their cross-committee involvement.

#### 2. OPTN Governance Presentation

The Committee reviewed the governing structures of the OPTN.

## Summary of discussion:

There were no questions or comments.

#### 3. Prior Living Donor Priority Discussion

The Committee reviewed prior living donor wait list priority in OPTN policy. The Committee began initial discussions to develop a recommendation for a cross-organ approach to prior living donor priority in the Continuous Distribution context. The Committee will develop recommendations in consideration of NOTA and the Final Rule as well as providing medical and ethical rationale.

#### Summary of discussion:

The Committee reviewed and discussed a range of options for prior living donor wait list priority. The Committee emphasized the need to explain their rationale for which option they choose, as well as rationale for why they did not choose other options. The Committee will ultimately decide on a broad recommendation, and each organ-specific committee will determine where the priority falls within their allocation schemes.

A member asked about the background of prior living donor priority within kidney policy. An OPTN Ethics Committee representative stated that, historically, the societal value of reciprocity was used as rationale for prior living donor priority.

Another member emphasized the Committee should be cautious about creating a scenario that puts value on the type of living donation. Additionally, the member stated that the Committee should work to protect living donors, and not allow them to narrow their options as they tend to be a selfless population.

Option: No Prior Living Donor Priority

The Committee was not inclined to consider no priority as an option for prior living donors.

Option: Prior Living Donor Priority only for organ donated

A member asked if this priority option could vary by organ type.

Option: Prior Living Donor Priority for organ if causal connection to organ donated

A member stated that it will be difficult to define "causal connection". Another member stated that it will become even more difficult to determine a "causal connection" the farther out from time of surgery. The member wondered if a time limitation should be considered, if this option is discussed further. The OPTN Ethics Committee representative stated that time limits have not been utilized for priority for prior living kidney donors.

A member asked if this priority option could vary by organ type.

Option: Prior Living Donor Priority for any organ needed

The OPTN Ethics Committee representative stated that this option needs to be balanced against how many individuals are on the wait list and their medical criteria, because each prioritization given will take away an opportunity for other individuals waiting who were not prior living donors.

A member stated that this option makes the most sense, if an overriding principle of prior living donor priority is societal value of reciprocity. The OPTN Ethics Committee representative stated that a drawback to this option is the amount of individuals who remain unmatched. The representative further stated that from an Ethics stand point, the Committee should consider life-enhancing versus life-saving.

Another member suggested the Committee should brainstorm potential perceived negatives to this option in order to develop a comprehensive rationale and justification. For example, the Committee could receive feedback stating this option allows for individuals to potentially take advantage of the

system. However, the Committee can explain their rationale by citing the prior living donor priority in kidney policy which has been successful and historically demonstrated there is no evidence of potential abuse.

A member asked if there is data that shows an increase in living donation after the prior living donor priority was placed in kidney policy. The member suggested that if that is the case, then it could support the argument for this option as a choice.

Another member suggested that this option could include two levels of priority; higher priority for the donated organ and a lower priority for other organs.

## Next steps:

The Committee will continue discussions during the April virtual "in-person" meeting.

## **Upcoming Meetings**

- March 10, 2021 (teleconference)
- April 19, 2021 (teleconference, virtual "in-person")

#### **Attendance**

## • Committee Members

- Aneesha Shetty
- Angie Nishio Lucar
- Carol Hay
- o Carolyn Light
- Heather Hunt
- o Jessica Spiers
- o Mark Payson
- Mary Beth Stephens
- o Nahel Elias
- o Pooja Singh
- o Randy Schaffer
- o Rita McGill
- Roberto Hernandez
- Stevan Gonzalez
- o Titte Srinivas
- o Vineeta Kumar

#### HRSA Representatives

- o Jim Bowman
- o Mesmin Germain
- o Raelene Skerda

## • SRTR Staff

- Bertram Kasiske
- Krista Lentine

## UNOS Staff

- o Kerrie Masten
- Lindsay Larkin
- Matt Prentice
- Meghan McDermott
- o Rebecca Murdock
- Sarah Booker
- Terry Cullen
- Tina Rhoades

## • Other Attendees

o Mahwish Ahmad