

OPTN Liver and Intestinal Organ Transplantation Committee Meeting Summary March 5, 2021 Conference Call

James Trotter, MD, Chair James Pomposelli, MD, PhD, Vice Chair

Introduction

The OPTN Liver and Intestinal Organ Transplantation Committee (the Committee) met via Citrix GoToMeeting teleconference on 03/05/2021 to discuss the following agenda items:

- 1. OPTN Public Comment Presentations
- 2. Request for Feedback: Refusal Codes Review
- 3. Ongoing Review of NLRB Diagnoses and Policy
- 4. Public Comment Feedback

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

1. OPTN Public Comment Presentations

The Committee provided feedback on three items out for the Winter 2021 public comment period.

Summary of discussion:

Update Transplant Program Key Personnel Training and Experience Requirements, Membership and Professional Standards Committee (MPSC)

A member noted that when membership requirements for intestine transplant programs were implemented in 2018, this shut down several programs for days. This member recommended that the MPSC consider any possible unintended consequences during future implementations. A member asked how many programs this would impact. The presenter responded that this could eventually impact all members of the OPTN, as the MPSC is attempting to restructure the process to make it more consistent.

Clarify Multi-Organ Allocation Policy, Organ Procurement Organization (OPO) Committee

Members asked the OPO committee to consider the development of a pathway for candidates to receive a heart transplant following a liver transplant. A member added that this pathway could benefit candidates with congenital heart disease who may develop cardiac cirrhosis and have higher prevalence of hepatocellular carcinoma (HCC). Another member agreed and reported that this could also assist candidates with high panel reactive antibodies (PRA). A member reported that they support the proposed 500NM circle and criteria.

2021-2024 OPTN Strategic Plan, Executive Committee

A member commented that the Executive Committee should monitor strategic plan goals to ensure that they do not compete. This member suggested that programs that focus on outcomes may be discouraged to use higher risk organs and therefore unintentionally decrease the number of transplants performed. Another member added that the low rate of utilization for high risk organs is perpetuated because programs know candidates often select their program based upon the transplant survival rate as opposed to the number of transplants performed. Members agreed that more candidates could be

successfully transplanted if the Scientific Registry of Transplant Recipient's (SRTR) 5 tier outcome assessment was reworked to not dissuade programs from using a wider pool of organs. A member commented that the goals and initiatives of the strategic plan do align with recent concerns in the community and could help initiate discussions on these issues.

Next steps:

Committee leadership will edit and approve draft comments to be posted to the OPTN Public Comment Website on the Committee's behalf.

2. Request for Feedback: Refusal Codes Review

The Committee gave feedback on a list of proposed refusal codes

Summary of discussion:

Feedback:

- Add a candidate anatomy refusal code to the Candidate- Related Reasons code category
- Add a malignancy refusal code to the Disease Transmission Risk code category
- Move the number of HLA mismatches unacceptable refusal code from the Donor and Candidate Matching code category to the Cross- Match Related Reasons code category
- Add a donation after cardiac death (DCD) unlikely to arrest refusal code
- Increase the number of characters allowed when further specifying the refusal reason in the Other, specify code category

Next steps:

The Committee's feedback will be considered as refusal codes are developed.

3. Ongoing Review of NLRB Diagnoses and Policy

The Committee heard an update on the work of the NLRB Subcommittee.

Summary of discussion:

A member of the NLRB Subcommittee explained that they have been developing a process to systematically review diagnoses in NLRB policy and guidance to ensure they remain accurate. The Subcommittee will review each of the 47 diagnoses at least once every three years. The Subcommittee will first start will HCC, Ascites, GI bleeding, Hepatic, Encephalopathy, Heptic Hydrothorax, and Primary Sclerosing Cholangitis (PSC)/ Secondary sclerosing cholangitis (SSC). The Committee was asked to give feedback on the project plan and diagnoses for review.

A member suggested moving Diffuse Ischemic Cholangiopathy up on the list to review this diagnosis at an earlier date.

The Committee agreed that the *Ongoing Review of NLRB Diagnoses in Guidance and Policy* should move forward to seek Policy Oversight Committee (POC) approval.

Next steps:

The Ongoing Review of NLRB Diagnoses in Guidance and Policy will seek approval from the POC on March 10, 2021.

4. Public Comment Feedback

The Committee heard an update on the Committee's proposals currently out for public comment.

Summary of discussion:

A member noted a suggestion in his or her that exception candidates be sorted but their lab model for end-stage liver disease (MELD)/pediatric end-stage liver disease (PELD) instead of time since submission of initial approved exception.

Next steps:

The Committee will consider post- public comment feedback during their next meeting.

Upcoming Meetings

- April 2, 2021
- April 14, 2021

Attendance

• Committee Members

- o Pete Abt
- Diane Alonso
- Sumeet Asrani
- Derek DuBay
- o James Eason
- Alan Gunderson
- Julie Heimbach
- Bailey Heiting
- Jennifer Kerney
- o Shekhar Kubal
- James Markmann
- Greg McKenna
- Mark Orloff
- o James Pomposelli
- Jorge Reyes
- o James Trotter
- **HRSA Representatives**
 - Jim Bowman
- SRTR Staff

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- Andrew Wey
- o John Lake
- UNOS Staff
 - Sally Aungier
 - Matt Cafarella
 - Betsy Gans
 - o Robert Hunter
 - Adel Husayni
 - Sarah Konigsburg
 - o Jason Livingston
 - Jennifer Musick
 - o Joel Newman
 - o Samantha Noreen
 - Kelley Poff
 - Matt Prentice
 - Liz Robbins
 - Sharon Shepard
 - o Leah Slife
 - Karen Williams

• Other Attendees

- o Samatha DeLair
- o Samantha Taylor
- Clifford Miles
- James Sharrock
- Kurt Shutterly