

# **Meeting Summary**

# OPTN Liver and Intestinal Organ Transplantation Committee OPTN Pediatric End- Stage Liver Disease (PELD)/ Status 1B Work Group Meeting Summary April 15, 2021 Conference Call

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#### Introduction

The OPTN PELD/1B Work Group (the Work Group) met via Citrix GoToMeeting teleconference on 04/15/2021 to discuss the following agenda items:

- 1. Analysis Report: Updated PELD Data Request
- 2. Discussion

The following is a summary of the Work Group's discussions.

#### 1. Analysis Report: Updated PELD Data Request

The Scientific Registry of Transplant Recipients (SRTR) presented the results of the updated PELD data request for the Work Group's consideration. The request included the following changes:

- Reparameterizing PELD factors and adding estimated glomerular filtration rate (eGFR) or Creatinine factors improved overall ability of PELD to discriminate on risk mortality
- Age and Growth Failure are continuous variables
  - No large drop in PELD for small changes in age, weight, or height
- Candidates with higher Serum Creatinine (or lower eGFRs) would benefit from adding a Creatinine (or eGFR) factor

#### 2. Discussion

The Work Group discussed the updated PELD scores and feedback from the liver committee.

#### Summary of discussion:

The Work Group discussed a graph that modeled various PELD and Model for End-Stage Liver Disease (MELD) equations and displayed projected mortality rate per person- year. A member asked if there was a way to decrease the mortality rate for the PELD, PELD eGFR and PELD Creatinine (CR) models. Another member confirmed that the most robust data is found in the lower left area of this graph. A member asked if it was possible to find out how many of the pediatric deaths occurring at lower PELDs were because the candidate became too sick to transplant. The presenter responded that he could figure that out.

The Work Group compared PELD Cr to PELD eGFR. A number of members voiced support for PELD Cr. A member asked if there was a way to account for malnutrition in pediatric candidates because malnourished candidates tend to have less creatinine, so these candidates could be disadvantaged. A member agreed and suggested that the Work Group would have to pursue an alternative method to account for this factor. Another member suggested the Work Group use measured GFR. A member

responded that currently the OPTN does not collect this data point. The Work Group determined that in order to consider the best path forward for adolescent candidates, the SRTR should determine the fit of both PELD eGFR and PELD CR on adolescent candidates.

#### Next steps:

The Work Group will submit a data request to evaluate PELD eGFR and PELD CR for adolescent candidates to the SRTR.

# **Upcoming Meetings**

• May 20, 2021

## Attendance

# • Work Group Members

- Walter Andrews
- o Julie Heimbach
- Steven Lobritto
- o Douglas Mogul
- o Emily Perito
- Sarah Schwarzenberg

# • HRSA Representatives

o Jim Bowman

## • SRTR Staff

- o Andrew Bonham
- Michael Conboy
- o Marilyn Levi
- David Schladt

## UNOS Staff

- o Rebecca Brookman
- o Matt Cafarella
- o Julia Foutz
- o Betsy Gans
- o Kelley Poff
- o Niyati Upadhyay