Introduction
The OPTN NLRB Subcommittee (the Subcommittee) met via Citrix GoToMeeting teleconference on 05/17/2021 to discuss the following agenda items:

1. Hepatocellular Carcinoma (HCC) Guidance- Candidates Beyond Downstaging
2. Candidates Listed at Multiple Programs
3. Other Significant Items
4. HCC ART Narratives

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

1. Hepatocellular Carcinoma (HCC) Guidance- Candidates Beyond Downstaging

The Subcommittee continued their discussion on updating the guidance for candidates beyond downstaging.

Summary of discussion:
Subcommittee members agreed that currently there is insufficient evidence to make a recommendation for revision of guidance. They advised to not make any modifications for the current guidance for candidates with HCC beyond downstaging criteria and will review explant pathology data at a future date.

Next steps:
The Subcommittee will present this recommendation to the liver committee during an upcoming meeting.

2. Candidates Listed at Multiple Programs

The Subcommittee discussed updating guidance to include candidates listed at multiple programs.

Summary of discussion:
Members suggested that if a candidates has received an exception at a different program within the last 6 months at the time of review, reviewers should be informed of the prior exception as they adjudicate cases. Member expressed that adding this to guidance would reduce confusion and inform reviewers that multi-listed candidates may have more than one exception. Members also agreed that guidance could include waving the six-month waiting period for HCC candidates who have already waited for six months.

The Subcommittee discussed methods for verifying that a candidate has a previous exception. A member suggested that the OPTN would verify this information. A member clarified that not many
patients will have previous active exceptions, so it may be best for the patient to inform the transplant program as opposed to the OPTN checking every candidate who has applied.

Next steps:
The Subcommittee will continue to discuss this topic during future meetings.

3. Other Diagnoses
Subcommittee members presented the results of their review of literature and current guidance for the following diagnoses: Ascites, Encephalopathy, Hepatic Hydrothorax, and GI bleeding.

Summary of discussion:

Ascites
• A member reported that he or she found no new literature and would not suggest any changes to guidance. The Subcommittee agreed with this recommendation.

Encephalopathy
• A member reported that while associated with waitlist mortality, there is no objective and reproducible biomarker for encephalopathy. The member reported that references within the guidance could be updated and that some language could be made more clear.

GI Bleeding
• A member reported that there is no objective biomarker for GI bleeding and recommended no changes to guidance. The Subcommittee agreed with this recommendation.

Hepatic Hydrothorax
• Members did not find evidence to update guidance and agreed that no changes should be made to hepatic hydrothorax guidance.

Next steps:
These recommendations will be presented to the Liver Committee.

4. HCC ART Narratives
Subcommittee members assigned to review HCC ART narratives presented their feedback.

Summary of discussion:
A member reported that after reviewing the narratives, they did not recommend any additional changes to HCC guidance. He or she added that ART leaders should consider providing a summary of the cases reviewed at the end of each week to keep the Subcommittee up to date.

Next steps:
The NLRB Subcommittee will continue to discuss ways to review ART cases.

Upcoming Meeting
• June 10, 2021
Attendance

• **Subcommittee Members**
  - Kimberly Brown
  - Alan Gunderson
  - Julie Heimbach
  - Jennifer Kerney
  - James Trotter

• **HRSA Representatives**
  - Jim Bowman

• **SRTR Staff**
  - Michael Conboy

• **UNOS Staff**
  - Matt Cafarella
  - Betsy Gans
  - Samantha Noreen
  - Kelley Poff
  - Liz Robbins
  - Leah Slife
  - Niyati Upadhyay