

# **Meeting Summary**

# OPTN Pancreas Transplantation Committee Meeting Summary June 28 2021 Conference Call

### Silke Niederhaus, MD, Chair Rachel Forbes, MD, Vice Chair

#### Introduction

The Pancreas Transplantation Committee (the Committee) met via Citrix GoToMeeting teleconference on 6/28/2021 to discuss the following agenda items:

- 1. Overview: Kidney-Pancreas Continuous Distribution Concept Paper
- 2. Removal of DSA and Region from Pancreas Allocation: 3-month Report
- 3. Committee Service Recognition

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

#### 1. Overview: Kidney-Pancreas Continuous Distribution Concept Paper

The Committee received the following overview on the Kidney & Pancreas Continuous Distribution Concept Paper:

- Introduces kidney and pancreas communities to the Continuous Distribution project
- Includes detail of what Continuous Distribution is, the Workgroup's progress on Phase I of the project (identifying attributes), and an outline of next steps
- Asks for community feedback on Workgroup's progress and ideas for potential system enhancements
- Jointly sponsored with the Kidney Transplantation Committee

#### Summary of discussion:

The Committee voted unanimously in support of submitting the Update on Continuous Distribution of Kidneys and Pancreata Concept Paper for public comment in August 2021.

#### 2. Removal of DSA and Region from Pancreas Allocation: 3-month Report

The Committee reviewed the 3-month monitoring report for the Removal of DSA and Region from Pancreas Allocation policy, which was implemented on 3/15/21.

The following is a summary of the monitoring report:

- Increase in kidney-pancreas transplant volumes were seen among:
  - o Age 35-49 years
  - o Hispanic
- Pancreas transplant volume increased
- More kidney-pancreas were distributed outside the donor hospital DSA, but most stay within 250 nautical miles
- Overall discard rate did not increase
- Non-local offer acceptance rate increased by 45%

• Some of the results align with the kidney pancreas simulated allocation model (KPSAM) modeling used to inform policy development

#### **Summary of discussion:**

A member inquired if the data presented was similar to what members have experienced at their respective centers. A member noted that, as far as exports outside of their DSA, their center noticed kidneys and pancreata were being distributed within 250 nautical miles.

A member inquired if there were findings from this data report that weren't predicted by the KPSAM. Staff mentioned that the KPSAM predicted pancreas transplant volume would have slightly decreased, but it was found that pancreas transplant increased. Staff also mentioned that the KPSAM also predicted other races and age groups than what was reported to experience increases in transplant volume; however, it was emphasized that this is only 3-month post-policy so the findings may still be variable compared to the KPSAM.

An Scientific Registry for Transplant Recipients (SRTR) representative stated that, in terms of numbers of transplant and simulation modeling, there are other facts that need to be taken into consideration. For example, the KPSAM did not account for Coronavirus Disease 2019 (COVID-19). A member also noted that there may be seasonal effects in donor numbers. The member inquired if data from 2019 should be analyzed for the pre-policy era, so there's data from before COVID-19.

A member noted that Region 10 had one of the largest declines in the number of transplants and had substantial decreases in the number of transplants that occurred the day after the allocation change. The member mentioned that the community needs to find out how long that equalization process will take to occur and look at the number of non-local offers, since efficiency of the system is important in organ allocation.

A member stated that the ultimate goal of the concentric circles seemed to be realized as eliminating the DSA as the unit of allocation, even with all the caveats mentioned.

An SRTR representative mentioned that the discard rates with a denominator of the number of eligible pancreas donors in the overall population should be observed. From this, the utilization of pancreas from these donors could be determined; the data in the monitoring report includes the number of deceased donor pancreas with intent for transplantation.

An SRTR representative stated that the KPSAM didn't predict the high dropout in offer acceptance rate with the local offers, which is affecting the efficiency of the system.

An SRTR representative mentioned that, if the discard rates don't decrease, then the Committee should monitor ischemia time as well.

A member inquired if a monitoring report will be presented every 3 months. Staff explained that the plan is to present a monitoring report at 6 months as well.

A member summarized that important points to take away from this presentation are that there is broader sharing, good utilization of kidney and pancreata (increased utilization in pancreata), and an overall increase in donors.

#### 3. Committee Service Recognition

The Committee acknowledged those members whose term is ending in July 2021 and thanked them for their contributions to the Committee.

# Summary of discussion:

There was no discussion. The meeting was adjourned.

## **Upcoming Meetings**

• July 19, 2021 (teleconference)

#### **Attendance**

#### • Committee Members

- o Silke Niederhaus
- o Rachel Forbes
- o Oyedolamu Olaitan
- o Luke Shen
- o Maria Friday
- o Parul Patel
- o Pradeep Vaitla
- o Randeep Kashyap
- o Todd Pesavento
- o Ty Dunn

#### HRSA Representatives

o Jim Bowman

#### SRTR Staff

- o Bryn Thompson
- o Jon Miller
- o Nick Salkowski
- o Raja Kandaswamy

#### UNOS Staff

- o Joann White
- o Rebecca Brookman
- o Ross Walton
- o Leah Slife
- o Nang Thu Thu Kyaw
- o Nicole Benjamin
- o Samantha Weiss
- o Sara Moriarty
- o Sarah Booker