Lower Respiratory SARS-CoV-2 Testing for Lung Donors

OPTN Ad Hoc Disease Transmission Advisory Committee (DTAC)
Purpose of Emergency Policy

- DTAC reviews potential cases of disease transmission to improve the safety of organ donation through the reduction of donor derived transmission events
- This policy addresses patient safety risk of donor derived COVID-19 to lung recipients
- Before emergency policy approved in April 2021, 30-40% of lungs were NOT tested by lower respiratory sample, supporting the need for requirement
Emergency Policy

- Require SARS-CoV-2 lower respiratory testing (e.g. BAL, tracheal aspirate) for all lung donors by nucleic acid test (NAT) with results available pre-transplantation of lungs
- Approved by Executive Committee April 26, 2021
- Implemented May 27, 2021
- Retrospective public comment: August 3 – September 30, 2021
Rationale

- 3 proven donor derived COVID-19 transmissions and 1 “near miss” in lung transplant recipients.
  - Tested negative in upper respiratory tract, later tested positive in a lower respiratory tract sample
  - Recipients developed significant complications and one died.

- COVID-19 predominantly affects lungs. Thus, lung transplant recipients at potentially higher risk of donor derived COVID-19

- Higher mortality risk for lung recipients with COVID-19 compared to other organs
Weekly % recovered lungs, respiratory tests

Red line shows May 27 implementation. Since then 100% lungs tested; some data in donor highlights.
Feedback on the potential permanence of the policy