Ethical Considerations of Continuous Distribution in Organ Allocation

OPTN Ethics Committee
Purpose and Proposal

- Paper considers whether the continuous distribution framework is supported by ethical principles guiding organ allocation, and identifies key questions, metrics, and opportunities for organ committees to consider when developing and implementing the new allocation framework

- Proposal
  - Performs ethical analysis of classification-based and continuous distribution systems of organ allocation
  - Advises OPTN organ-specific committees about ethical benefits and challenges associated with moving to continuous distribution framework
  - Reinforces idea that allocation changes should not negatively impact vulnerable/disadvantaged groups
Current allocation system creates edge cases, whereby some candidates may not be treated similarly because they fall into different classifications.

- Examples of classification criteria include: Compatible vs. identical blood types; Donor less than 18 years old vs. at least 18; and Inside a circle vs. outside.
- Classifications result in hard boundaries making it harder for candidates to move across them.

Continuous distribution attempts to compare “like with like”- meaning two candidates with similar characteristics will be treated similarly.

Change requires examination of extent to which ethical principles are addressed as part of continuous distribution frameworks being developed by OPTN’s organ-specific committees.
Utility

- Does continuous distribution achieve the greatest good while reducing waste and promoting placement efficiency?

- Advantages
  - Candidate-specific scores allow for simultaneous comparison of relevant patient medical attributes
  - Decision-makers can optimize use of criteria by identifying desired outcomes at start of process
  - Weighting assigned to criteria can be continuously refined using information learned during allocation

- Challenges
  - Does continuous distribution improve upon the balance of positive and negative consequences for organ recipients overall?
  - What long-term impacts could transplant programs and allocation system experience if only incremental changes are made?
Equity

- Does continuous distribution achieve the most sustainable equitable allocation, and not further disadvantage vulnerable candidates?

Advantages
- Removal of distinct boundaries supports equity by eliminating benefits associated with a classification
- Accounts for each potential recipient’s needs rather than assessing eligibility on singular group characteristic
- Composite allocation score has potential to serve as comprehensive and precise allocation instrument

Challenges
- Could path dependency lead to adopting existing biases in new allocation system?
- Is composite allocation score sensitive enough to protect disadvantaged groups? If not, can it be improved?
- To what extent will equity gains be reduced if no mechanism exists to proactively correct disparities?
Transparency and Autonomy

- Is continuous distribution easily understandable, and promote participation in shared decision-making?

- Advantages
  - May reduce subjectivity of listing criteria and inconsistent application
  - Opportunity for candidate input at various stages in composite score development and weighting

- Challenges
  - Will changes increase candidates’ opportunities to participate in describing their medical profiles?
  - What checks are in place to ensure interests of whole community are reflected throughout system?
  - What is the best mechanism for soliciting candidate input when recalibrating scoring process?
  - Could “gaming” occur as candidates search for ways to present condition in most favorable light?
What do you think?

- Are there ethical principles that should be addressed but were not?
- Should any ethical challenges described in the white paper be removed?
- What role can data collection and analysis have in addressing ethical concerns associated with move to continuous distribution allocation?