

Review of National Liver Review Board (NLRB) Diagnoses and Update to Alcohol-Associated Diagnoses

OPTN Liver and Intestinal Organ Transplantation Committee

Purpose of Proposal

- **NLRB Diagnoses:**
 - Ensure guidance and policy remain clear and aligned with current research so that the appropriate candidates receive MELD or PELD exceptions
- **Alcohol-Associated Diagnoses:**
 - Allow for more accurate and complete data collection on candidates with alcohol-associated liver disease (ALD)

Proposal: NLRB Diagnoses

- **HCC Guidance:**
 - Add guidance stating that the use of immunotherapy should not preclude HCC candidate from being considered for a MELD exception
 - Add language that makes it clear that candidates with a history of HCC more than two years ago that was resected and recurs do not need to wait six months to receive MMaT-3
- **Hepatic Encephalopathy Guidance:**
 - Non-substantive change to update references and provide clearer guidance
- **HCC Policy:**
 - Update language to make it clear that a chest CT is only required prior to the initial exception

Proposal: Alcohol-Associated Diagnoses

- ALDs are the leading indication for liver transplant
- Ongoing dialogue in liver transplant community regarding need for six-month, pre-transplant abstinence period
- Current diagnoses for ALD on transplant candidate registration (TCR) and transplant recipient registration (TRR) forms are outdated and confusing, prohibiting accurate data collection on candidates with ALD

Current Diagnosis	New Diagnosis
Alcoholic Cirrhosis	Alcohol-associated cirrhosis without acute alcohol-associated hepatitis
Alcoholic Cirrhosis with Hepatitis C	N/A: diagnosis will be inactivated
Acute Alcoholic Hepatitis	Acute alcohol-associated hepatitis with or without cirrhosis

Rationale

- **NLRB Diagnoses:**
 - Feedback from transplant community and committee members
 - Published research on HCC recipients treated with immunotherapy
- **Alcohol-associated diagnoses:**
 - Published research and clinical opinion of committee members

Member Actions

- Transplant programs and NLRB reviewers will need to be familiar with NLRB guidance and policy
- Transplant programs will need to be familiar with updated diagnoses for candidates with ALD
 - Transplant programs will not need to make any changes to historical data

What do you think?

- Do you agree with proposed changes to NLRB guidance?
- Do you have any feedback on proposed updates to diagnoses for candidates with ALD?