

# Continuous Distribution of Lungs

*January 2023*



# Overview

- What is continuous distribution?
- Why is the lung allocation system changing, and how will it impact patients?
- What is the new lung composite allocation score?
- How can patients learn more about continuous distribution of lungs?
- Will the lung allocation system change in the future?

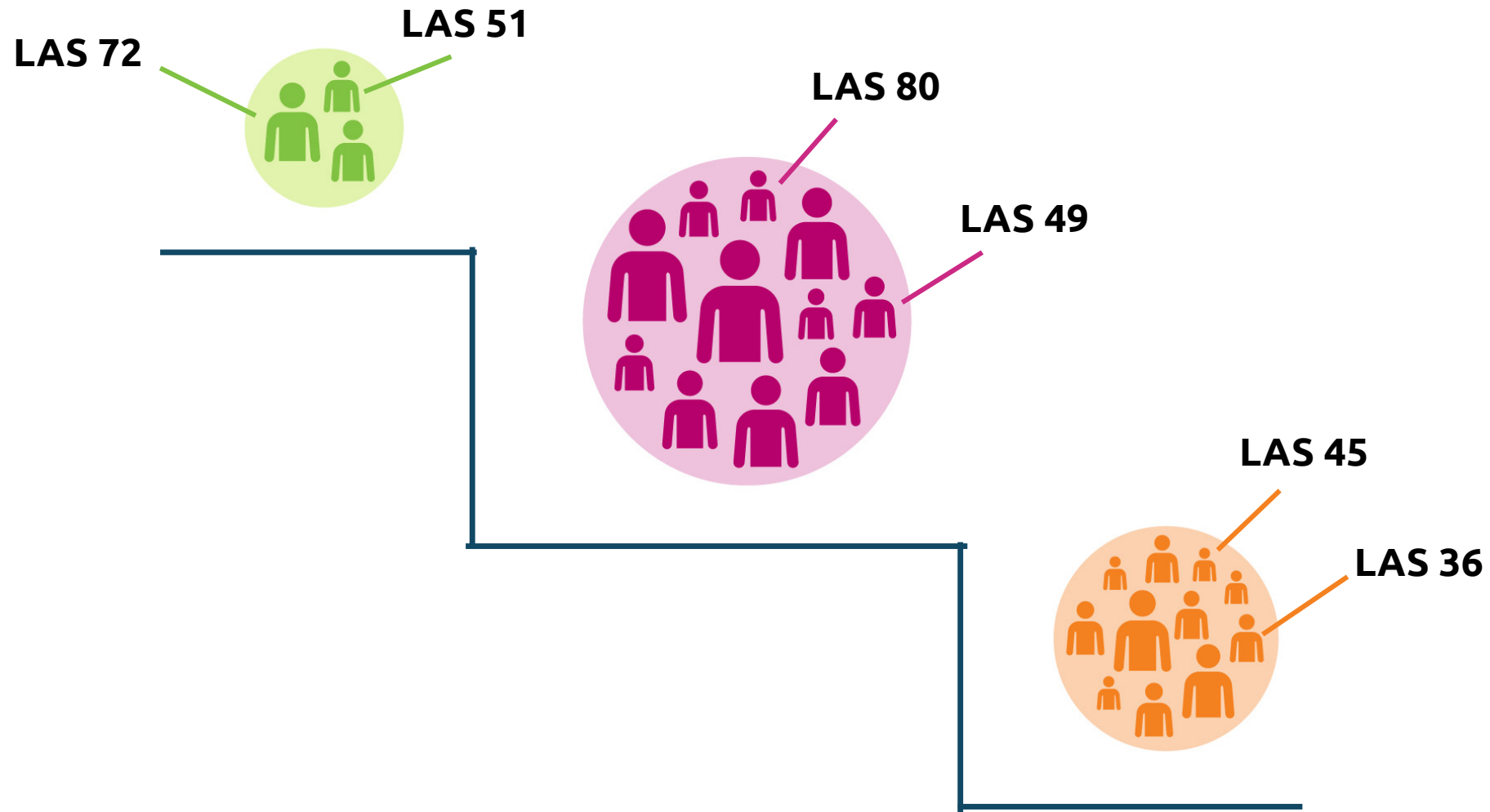
# What is continuous distribution?



# What is continuous distribution?

- Continuous distribution changes organ allocation from a **classification-based system** to a **points-based system**
- Allocation is the process for matching a donor organ with a transplant candidate

# The current system groups patients

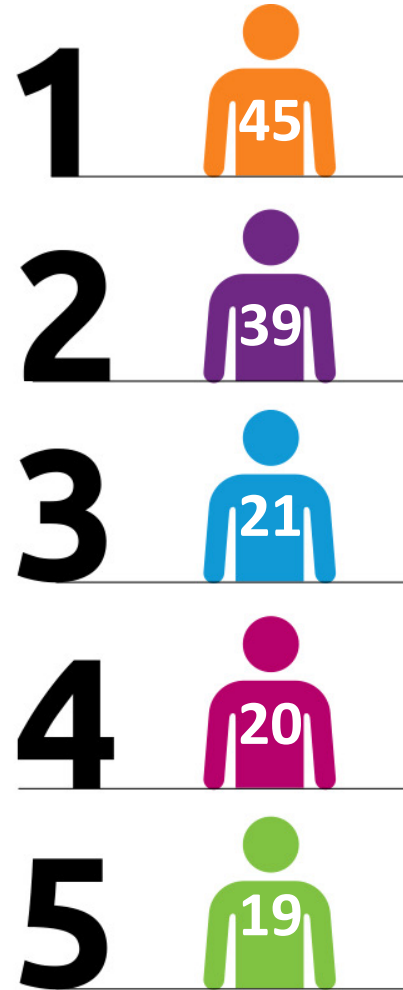


# The new system is continuous distribution

## Future state of organ allocation



# Candidates ranked by overall score



# Why is the lung allocation system changing, and how will it impact patients?





# Why continuous distribution?

- Broadly, continuous distribution aims to promote:
  - A more **fair and flexible** way to allocate deceased donor organs
  - A **patient-centric** framework that considers all candidates at the same time, with no need for classifications
  - A system that ranks candidates by their **composite allocation scores**
- This points-based system will consider various candidate factors all at once, rather than grouping candidates into classifications

# Benefits of continuous distribution of lungs

- Reduce the number of candidates dying while waiting for lung transplant
- Increase access to transplant for candidates who are:
  - The most medically urgent
  - Pediatric
  - Prior living donors
  - Highly sensitized
  - Short statured
  - Expected to live longer after transplant

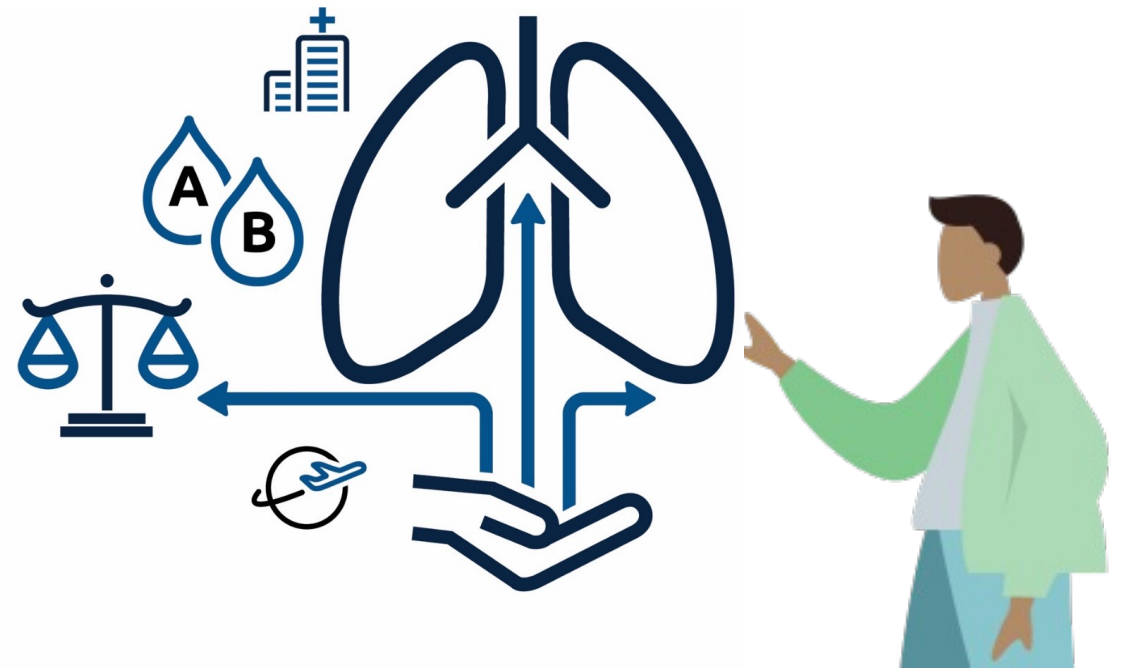
# Do patients need to do anything to prepare?

- New system will go into effect on March 2, 2023
- It may help you to learn about the new system and what it means for you
- Your transplant program should be able to tell you what your score would be in the new system
- In general, your medical information will be updated at least every 6 months
- Hospitalized candidates may have some lab values updated every 28 days

# What about multi-organ candidates?

- Candidates registered for other organs in addition to lungs are expected to have similar priority for transplant in the new system
- Multi-organ allocation rules were updated to use the composite allocation score
- Ask your transplant center for more information

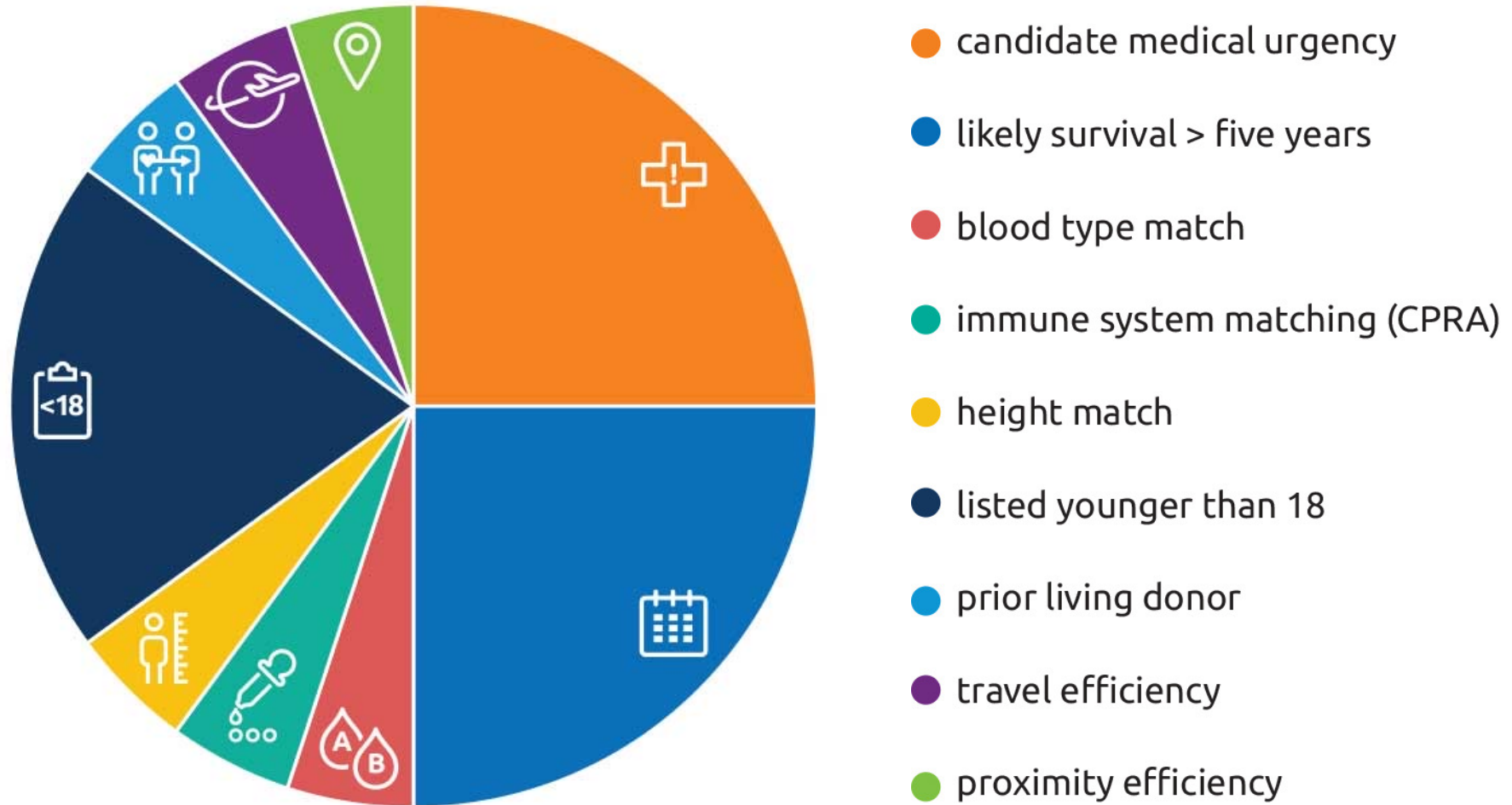
# What is the new lung composite allocation score?



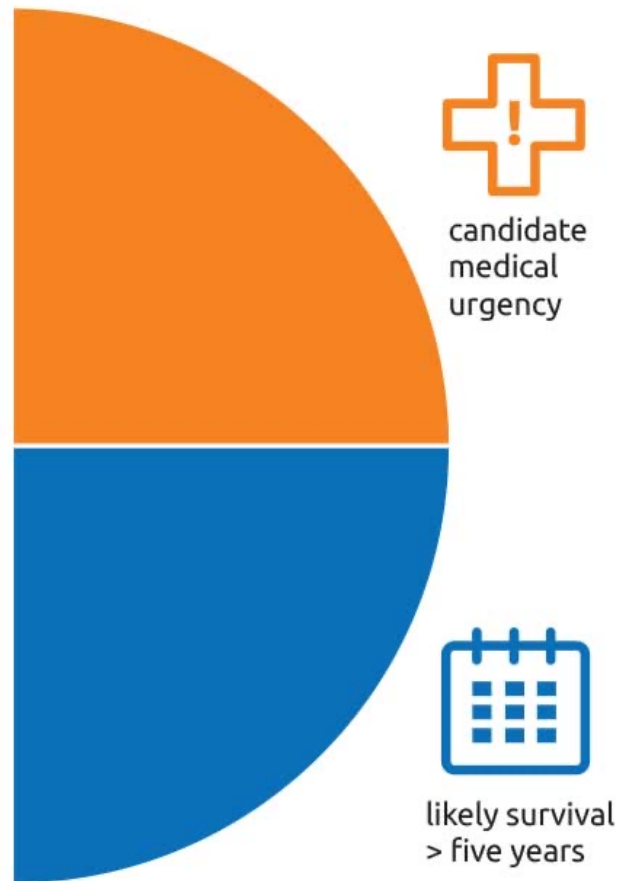
# Lung Composite Allocation Score (CAS)

- The Lung Allocation Score (LAS) is going away
- Continuous distribution will use a Lung Composite Allocation Score (CAS)
- CAS is based on medical information about your needs and medical condition
- CAS also uses facts about potential organ donors that may be a match

# Lung composite allocation score overview

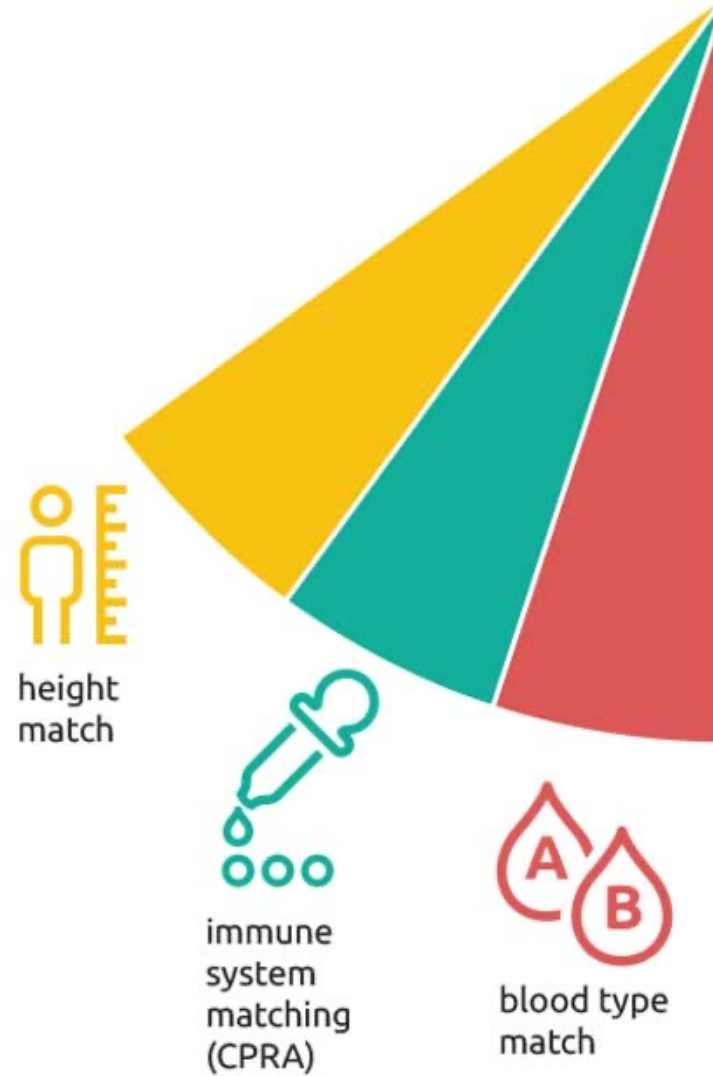


# Medical urgency and post-transplant survival

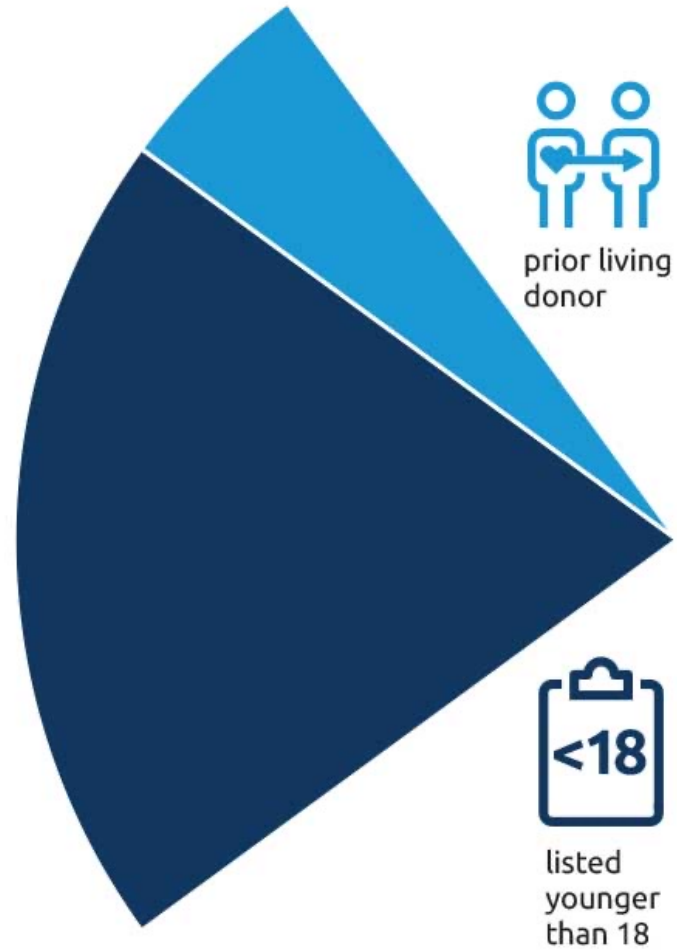




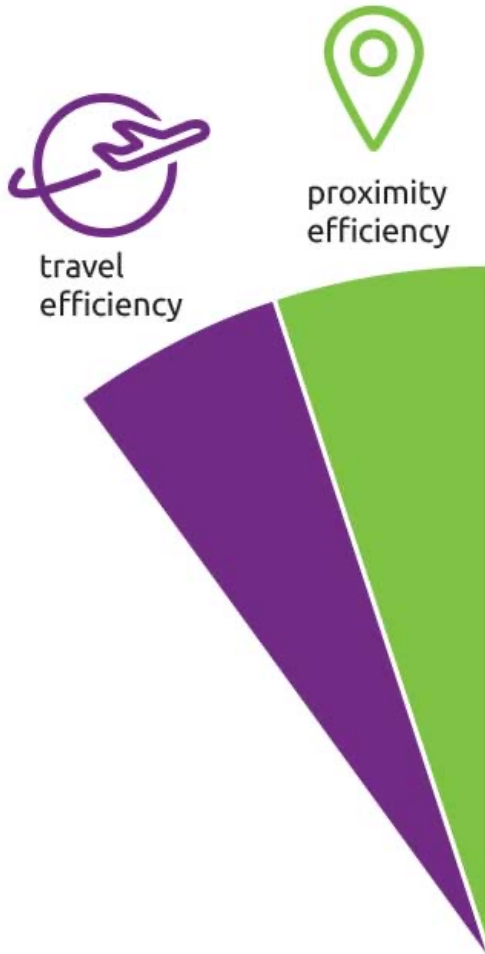
# Candidate biology



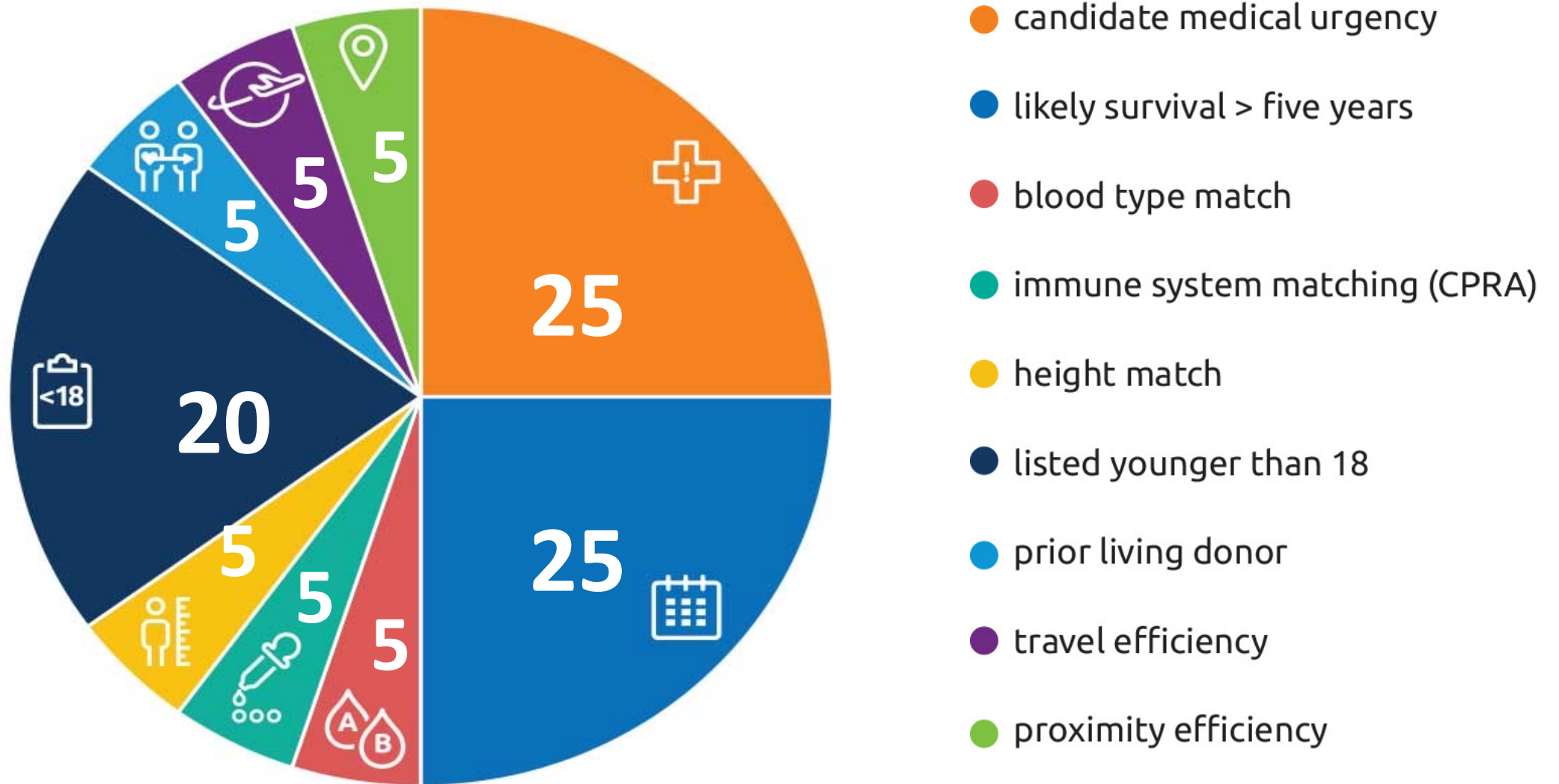
# Patient access



# Placement efficiency



# Lung composite allocation score points



# Lung composite allocation score points

CAS Scoring	Maximum Points
Candidate Medical Urgency	25
Likely Survival >5 years	25
Blood Type Match	5
Immune System Match	5
Height Match	5
Listed Younger Than 18	20
Prior Living Donor	5
<b>CAS Subscore</b>	<b>90</b>
Travel Efficiency	5
Proximity Efficiency	5
<b>CAS Total Score</b>	<b>100</b>

Points change at  
time of match run  
based on location

# LAS cannot be compared directly to CAS

- There is not a direct way to compare your current LAS to your new CAS based on changes in how the scores are calculated
- Scores will often appear lower in the new system but that may not mean your priority is lower
- Most candidates currently have an LAS between 33 – 41
- Most candidates will have a CAS subscore between 20 – 22
  - Subscore includes all parts of your score except placement efficiency points
- It will be rare for a candidate to have a CAS subscore higher than 45

# Example: Patient profile

- Very urgent adult candidate with COVID-19 acute respiratory distress syndrome
- Blood type A
- Height 5'6"
- Immune system match (CPRA) of 67%
- LAS of 94.0072

Points change at time of match run based on location

CAS Scoring	Maximum Points
Candidate Medical Urgency	21.7725
Likely Survival >5 years	15.2525
Blood Type Match	0.0455
Immune System Match	1.0544
Height Match	0.0400
Listed Younger Than 18	0
Prior Living Donor	0
<b>CAS Subscore</b>	<b>38.1649 out of 90</b>
Travel Efficiency	Up to 5
Proximity Efficiency	Up to 5
<b>Possible CAS Range</b>	<b>38.1649 – 48.1649 out of 100</b>

How can patients learn more about  
continuous distribution of lungs?



# Patient FAQ

<https://optn.transplant.hrsa.gov/patients/by-organ/lung/>

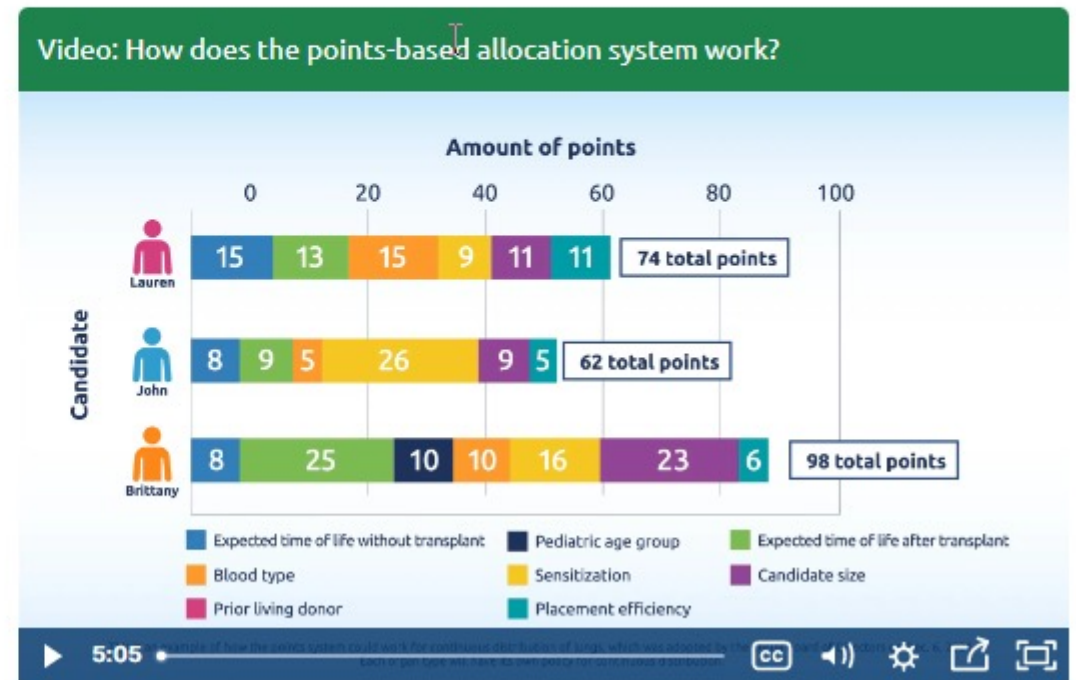
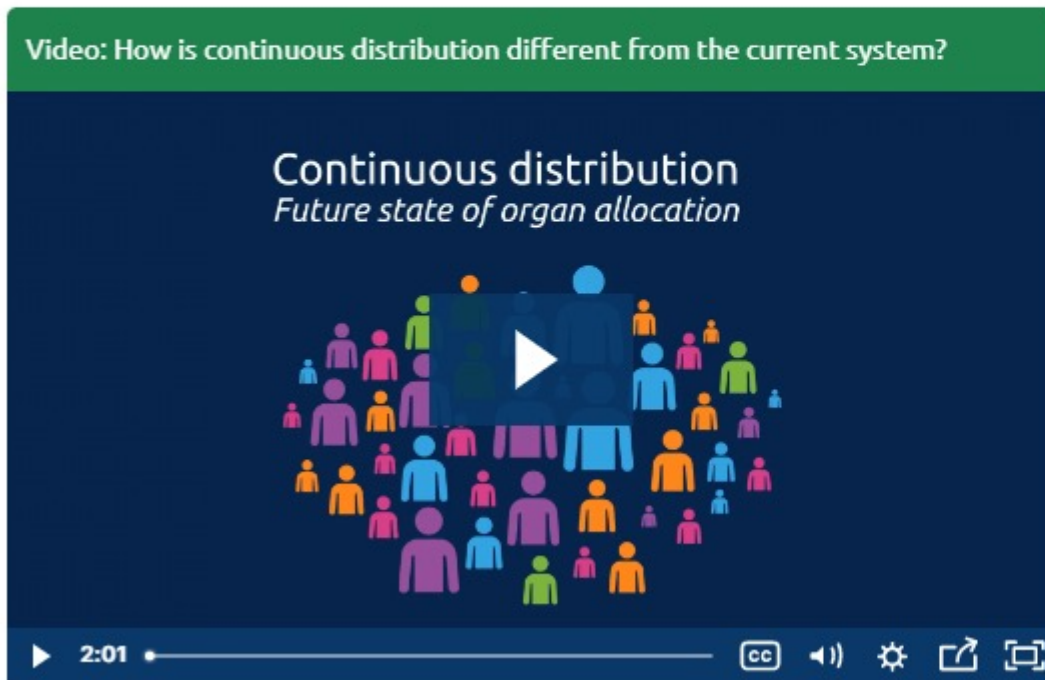
## Lung allocation based on the Composite Allocation Score (CAS): Questions and answers for patients and caregivers

Welcome to our question-and-answer page for the new lung allocation policy that will take effect in early 2023. This policy will use an updated approach known as [continuous distribution](#). Continuous distribution will improve the organ matching process by considering all factors about each transplant candidate in a single score.

# Learn more about continuous distribution

<https://optn.transplant.hrsa.gov/policies-bylaws/a-closer-look/continuous-distribution/>

## Creating a more fair and patient-focused system for organ allocation



# Talk to your transplant center

- Your transplant center can tell you:
  - What your CAS subscore will be in the new system
  - How often your tests will need to be updated
  - More information about lung allocation and continuous distribution

# Will the lung allocation system change in the future?



# Possible future changes

- The system will continue to be studied for further improvement
- The new system is designed to allow faster improvements
- Your transplant team will keep you informed of changes to the system
- If you have additional questions, contact OPTN Patient Services:
  - Toll-free: 1-888-894-6361
  - [Patient.Services@unos.org](mailto:Patient.Services@unos.org)
- Get involved with OPTN policy development:  
<https://optn.transplant.hrsa.gov/about/how-to-get-involved/>

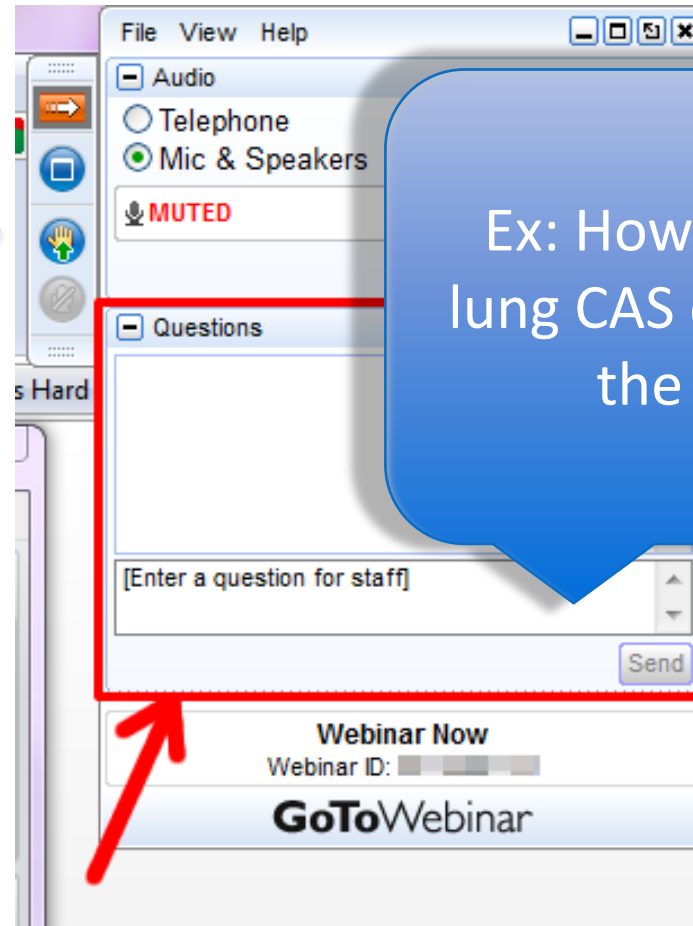
# Questions?

**Raise your hand, you  
will be unmuted to speak**



**or**

**Type your question or comment  
to be read aloud**



Ex: How does the  
lung CAS differ from  
the LAS?

**Phone callers  
must enter audio  
PIN to speak**

Thank you!