

# **Meeting Summary**

OPTN Ad Hoc Disease Transmission Committee
Meeting Summary
November 7, 2023
Conference Call

Lara Danziger-Isakov, MD, MPH, Chair Stephanie Pouch, MD, MS, Vice Chair

#### Introduction

The OPTN Ad Hoc Disease Transmission Advisory Committee (the Committee) met via Webex teleconference on 11/7/2023 to discuss the following agenda items:

- 1. Vote: Standardize the Patient Safety Contact and Duplicate Reporting Policy Language
- 2. Pediatric Candidate Pre-Transplant HIV, HBV, and HCV Testing 1-Year Monitoring Report
- 3. Abstract Updates

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

# 1. Vote: Standardize the Patient Safety Contact and Duplicate Reporting Policy Language

The Committee reviewed and voted on the proposed policy language for the Patient Safety Contact and Duplicate Reporting proposal. The proposed language aims to modify OPTN Policy 15.1: Patient Safet Contact. The Patient Safety Contact (PSC) requires each OPO and transplant program to identify a patient safety contact and develop and comply with a written protocol for the patient safety contact to fulfill all the following responsibilities. However, protocols are inconsistent across OPOs and transplant programs, which can lead to difficulty and increased time spent contacting the PSC or receiving confirmation of successful notification. Additionally, OPTN Policies 15.4.B and 15.5.B require both OPOs and transplant programs to report recipient diseases or malignancies to the OPTN; this results in duplicate reporting and causes an increased burden on the system.

The Committee was asked the following:

Does the Disease Transmission Advisory Committee support sending the proposal to the January 2024 public comment?

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

**Decision#1**: There was consensus among the Committee to send the Patient Safety Contact proposal to the January 2024 public comment cycle.

There was no further discussion.

Vote: Support:14 Abstain: 0 Oppose: 0

# Next steps:

The proposal will go to the OPTN Board of Directors in December 2023 for approval for January 2024 public comment.

#### 2. Pediatric Candidate Pre-Transplant HIV, HBV, and HCV Testing 1-Year Monitoring Report

The Committee heard a presentation on the Pediatric Candidate Pre-Transplant HIV, HBV, and HCV Testing 1-Year Monitoring Report.

- In December 2020, the OPTN Board of Directors approved modifications that aligned OPTN policy with the 2020 U.S. PHS Guidelines issued by the CDC.
- One change included requiring all HIV, HBV, and HCV testing to occur during hospitalization for transplant.
- The OPTN received a letter expressing concern for potential negative impacts to pediatric candidates from pre-transplant blood draws.
- DTAC and the Pediatric Transplantation Committee collaborated with members from the CDC to consider potential policy modifications and determined the timing requirement for pediatric candidates was not necessary from a patient safety perspective.

This policy change removed a requirement for pediatric candidates less than 12 years old to receive human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV) testing during hospital admission for transplantation. Testing for candidates who are less than 12 years of age can be done any time prior to transplant.

#### Summary of discussion:

This was not an agenda item that required a decision; there were no decisions made by the Committee.

Regarding the data presented, the Chair asked if these were candidates who never had HIV testing before they received their organ. The presenter replied that these candidates had their test results reported as not done on their transplant recipient registration (TRR) form. A CDC staff member commented that the policy change would mean they would not need to get testing done during hospitalization for transplant. He asked if programs were testing for HIV, HBV, and HCV at all or not testing for these viruses during the hospitalization for transplant. The presenter responded that it was reported that they were not tested on their transplant recipient form. The chair asked what the consequences of the program reporting that the candidate was not tested, since that is in conflict directly with the policy that everyone is tested for HIV, HBV, and HCV. Staff replied that they would follow up with the site survey team regarding how they are monitoring the compliance of this policy. The Chair expressed concerns that for HIV testing, 43 pediatric recipients did not undergo HIV screening in the pre-policy era, and 86 pediatric recipients did not undergo HIV screening post-policy era in children under and older than 12 years of age; this is of concern because OPTN Policy 15.2 states that testing needs to occur prior to their transplant.

Besides looking at the TRR, a member asked if there was an opportunity to look at data about whether the patients had not had testing done at all. The presenter replied that there may be data on if a result was reported during their time on the waiting list. Staff further explained that the number of reported cases of testing not being done may be due to a timing issue or a misinterpretation of the policy.

## Next steps:

The Committee will continue to discuss and review compliance data on OPTN Policy 15.2.

#### 3. Abstract Updates

The Committee heard abstract updates on Coccidioidomycosis Transmission Through Organ Transplantation and HBV Reactivation in Recipients of HCV that will be submitted to the American

Transplant Congress (ATC) in 2024. The purpose of the Coccidioidomycosis Transmission Through Organ Transplantation abstract is to describe the donor-related risk factors, transmission penetration rate, clinical manifestations, and outcomes associated with the transmission of Coccidioidomycosis through solid organ transplantation from 2013 to 2022. The purpose of the HBV Reactivation in Recipients of HCV Organs abstract is to determine the risk of HBV reactivation or transmission in recipients of HCV-positive organs.

#### Summary of discussion:

This was not an agenda item that required a decision; there were no decisions made by the Committee.

There were no further discussions.

#### Next steps:

The Committee will review the abstracts prior to submission to ATC.

# **Upcoming Meeting**

• November 27, 2023

#### **Attendance**

# • Committee Members

- o Lara Danziger-Isakov
- o Stephanie Pouch
- o R. Patrick Wood
- o Anna Hughart-Smith
- o Dong Lee
- Marty Sellers
- o Anil Trindade
- o Tanvi Sharma
- o Cindy Fisher
- o Gerald Berry
- o Riki Graves
- o Helen Tee
- o Michelle Kittleson
- o Maheen Abidi

#### • HRSA Representatives

- o Marilyn Levi
- SRTR Staff
- CDC Staff
  - o Sridhar Basavaraju
  - o Isabel Griffin
  - o Pallavi Annambhotla

#### FDA Staff

- o Brychan Clark
- Scott Brubaker

#### UNOS Staff

- o Taylor Livelli
- Tamika Watkins
- o Dzhuilyana Handarova
- o Logan Saxer
- o Kayla Balfour
- o Sandy Bartal
- o Laura Schmitt
- o Sara Langham
- o Susan Tlusty
- o Leah Nunez
- Other Attendees