

## OPTN Liver and Intestinal Organ Transplantation Committee Meeting Summary January 5, 2024 Conference Call

## Scott Biggins, MD, Chair Shimul Shah, MD, MHCM, Vice Chair

#### Introduction

The OPTN Liver and Intestinal Organ Transplantation Committee (the Committee) met via WebEx teleconference on 01/05/2024 to discuss the following agenda items:

1. Continuous Distribution: Body Surface Area (BSA) Attribute

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

### 1. Continuous Distribution: Body Surface Area (BSA) Attribute

The Committee discussed the body surface area (BSA) attribute in liver continuous distribution and determined relevant screening rules and donor modifiers.

Summary of discussion:

Decision: The Committee has opted to incorporate a donor modifier for the BSA attribute and leave screening rules to transplant programs to decide for themselves.

The Committee discussed different options for how to incorporate a donor modifier relative to the BSA attribute within liver continuous distribution.

- Option 1: Prioritize candidates below set BSA threshold and award additional points for donors below set BSA threshold
- Option 2: Prioritize candidates below set BSA threshold and award additional points based on size match (range of historical acceptance based on BSA)

A member asked for more information on how BSA would be impacted by ascites. A member of the community with expertise in BSA stated that since weight is in the numerator, a candidate with ascites would experience an increase in BSA because their weight would increase.

A member commented that they prefer option 1, prioritizing candidates below a set BSA threshold for donors below the set BSA threshold, as they feel it is less confusing and makes more sense from a clinical perspective.

An SRTR representative noted that the offer acceptance risk adjustment models show that generally as donor and candidates sizes a mismatched, the odds of acceptance are lower. The SRTR representative suggested a new option that would size match more generally, specifically donors to similarly sized candidates. The SRTR representative explained that this would address the problem of ensuring small stature candidates receive additional priority for smaller donors while also potentially addressing efficiency concerns.

A member pointed out that there is clinical justification for this because small-statured candidates are more likely to experience waitlist mortality. The member added that they felt that having donor modifiers is important, especially from an efficiency standpoint. They continued, noting that a benefit of the donor modifier being binary is that the Committee could have the equivalent of a model for endstage liver disease (MELD) score exception option. The member explained that candidates who do not meet the binary threshold but have other anatomical reasons for needing access to a smaller liver offer, could apply for a non-standard exception to receive BSA points.

A representative from the SRTR indicated their desire to have the pediatric group represented during the BSA conversation, as pediatric candidates can be quite small. A member responded, reminding the SRTR representative that previously, the Committee had come to a consensus that pediatric candidates should have priority above adults on the match run. The Chair added that in the results of the Committee's Value Prioritization Exercise (VPE), which was out for public comment, the community agreed that pediatric candidates are a priority. The Chair continued, agreeing that while pediatric candidates are an important consideration, this discussion is focused on candidate size, and deciding extra priority for pediatric candidates will come later.

The Chair affirmed that the Committee is interested in having a donor modifier and not having a screening rule to rule out any particular donor, as that can be determined by transplant programs.

A member voiced their concern that by using a two-pronged approach like option one, there may be over-prioritization, as they feel that the Committee is trying to prioritize small donors for small candidates and give additional priority to the small candidates. A member commented that just giving a small-statured recipient more points is not going to fix the problem, which is their justification for trying to prioritize smaller donors for smaller candidates.

The Chair pointed out that giving extra points alone to candidates will not fix the access issue for small candidates, which they noted may be helped by the donor modification. They reminded the Committee that the goal of today's meeting is to decide which option they would like to move forward with.

The subject matter expert (SME) on BSA commented that in the study they performed, they showed that the smallest 25% of candidates were disadvantaged by the current allocation system. They continued, saying that the most affected population is the smallest 10%, and these candidates are less than five foot two inches and less than 59 kilograms. They suggested to the Committee that instead of opting for a binary rating scale, they create a rating scale that would be more of a gradient and have weighted bonus points for the smallest candidates.

A member recommended coupling a donor modifier with a candidate modifier, as they believe that giving priority alone to the candidate is not going to fix the problem. The Chair agreed, affirming that the Committee has settled on a donor modifier so that when the donor is small, the small candidates will get extra points. They noted that the Committee does not have to decide how many extra points there will be at this time. They indicated that in the future, they can investigate changes to the rating scale to develop a more continuous approach. They explained that the rating scale could give more points to candidates as they decrease in size.

#### Next steps:

The Committee will follow up on this discussion and will revisit the rating scale.

# **Upcoming Meetings**

• January 19, 2024, at 2 pm ET (teleconference)

#### Attendance

## • Committee Members

- o Scott Biggins
- o Shimul Shah
- o Aaron Ahearn
- o Allison Kwong
- o Cal Matsumoto
- Christine Radolovic
- o James Pomposelli
- o Jennifer Muriett
- o Joseph DiNorcia
- o Kym Watt
- o Lloyd Brown
- o Neil Shah
- o Sophoclis Alexopoulos
- o Vanessa Cowan
- o Vanessa Pucciarelli
- HRSA Representatives
  - o Jim Bowman
  - o Marilyn Levi
- SRTR Staff
  - o Jack Lake
  - o Katie Audette
  - o Nick Wood
  - o Ryo Hirose
  - o Tim Weaver
- UNOS Staff
  - o Betsy Gans
  - o Cole Fox
  - o Erin Schnellinger
  - o Joel Newman
  - o Katrina Gauntt
  - o Kayla Balfour
  - Meghan McDermott
  - o Susan Tlusty
- Other
  - Catherine Kling