

Meeting Summary

OPTN Liver and Intestinal Organ Transplantation Committee Meeting Summary May 19, 2023 Conference Call

James Pomposelli, MD, PhD, Chair Scott Biggins, MD, Vice Chair

Introduction

The OPTN Liver and Intestinal Organ Transplantation Committee (the Committee) met via Citrix GoToMeeting teleconference on 05/19/2023 to discuss the following agenda items:

- 1. Background: Next Steps in Continuous Distribution
- 2. Presentation: Values Prioritization Exercise Results
- 3. Discussion: Allocation System Priorities

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

1. Background: Next Steps in Continuous Distribution

The Committee reviewed the project plan for the development of the continuous distribution of livers and intestines.

Next steps:

The Committee will utilize the results from the values prioritization exercise and revealed preference analysis reports to continue to develop the continuous distribution project.

2. Presentation: Values Prioritization Exercise Results

The Committee reviewed results from the values prioritization exercise (VPE). ¹ The VPE was open for public participation during the 2023 winter public comment period.

Data summary:

Next steps:

1

Summary of discussion:

A member asked whether it is appropriate to consider the results of the VPE given the much larger population that is involved in transplant than the 1,033 that participated. The member asked if the pediatric population and intestine population were well represented and appropriately weighted in the results. The Vice Chair responded that it is the Committee's responsibility to assimilate the results from the VPE into the Committee's preferences.

Another member emphasized the importance of ensuring multivisceral transplant candidates receive priority in the continuous distribution framework.

The Committee will consider the results from the VPE analysis while they work to determine the weights of the various attributes.

3. Discussion: Allocation System Priorities

The Committee discussed the areas of high priority in an effort to order the future work.

Summary of discussion:

A member stated the most important attribute is medical urgency to ensure that there should be no increase in waitlist mortality with the new system. Members agreed.

Another member stated that travel efficiency could be considered a constraint, meaning that it should not get any worse. A member responded that currently travel efficiency is an issue and there may be opportunities to improve it. The member noted that lung continuous distribution has increased travel and cost and emphasized that liver and intestine continuous distribution should perhaps value proximity more than the current system. Another member agreed. A member advocated that travel efficiency should be a primary priority.

A member stated that the goal is to have more livers allocated in the very close proximity so that travel time is short and cost related to travel is reduced. The member stated that it could be measured by determining the percentage of organs that are allocated within driving distance.

Members agreed that addressing access for shorter stature candidates should be a primary priority.

Another member stated that pediatric priority should be a primary priority. The member noted this aligns with the community's preferences indicated in the VPE results. A member stated that the current pediatric priority is effective and valued highly in the current system so perhaps that attribute could be a constraint to ensure it stays the same and does not worsen. Another member agreed that the current system prioritizes pediatric candidates quite well. The Vice Chair stated that the pediatric stakeholder group would likely disagree. The Chair of the OPTN Pediatric Transplantation Committee stated that one in twenty children die on the waitlist. The Vice Chair suggested the Committee consider the possibility to have pediatric priority very high given it is a small population. A member opined that waitlist mortality for the pediatric population is related to transplant program behavior, not allocation. The member added that transplant program behavior cannot be fixed by allocation policies. The past Chair of the OPTN Pediatric Transplantation Committee behavior stated they could share literature on pediatric waitlist mortality as some pediatric candidates die on the waitlist without receiving offers which indicates that transplant program behavior is not the only problem.

The Vice Chair stated that split livers may be a secondary priority because it should be more encouraged in the future system.

A member stated concern about the notion to shift the focus from broader sharing due to concerns about travel efficiency.

A member stated that the geographic equity should not become worse in the new continuous distribution system. Another member stated that geographic equity and distance should be weighted the same. A member of the community noted that waitlist mortality can be impacted when broader sharing is increased which would also increase travel efficiency. Other members advocated for geographic equity to be a secondary priority.

The Vice Chair stated that variation in access between blood types may be a secondary priority. The Vice Chair stated there may be opportunities in continuous distribution to address this variation. A member agreed.

Another member advocated that access for liver-intestine candidates should be a primary priority.

A member noted that prior living donors do not have priority in the current liver allocation, as such incorporating it as an attribute will only improve access.

Next steps:

This Committee will continue discussions.

Upcoming Meeting

• June 2, 2023 @ 3:00 PM ET (teleconference)

Attendance

Committee Members

- o Aaron Ahearn
- o Alan Gunderson
- Allison Kwong
- o Bailey Heiting
- o Christopher Sonnenday
- o Colleen Reed
- o Erin Maynard
- o Greg McKenna
- o Jennifer Muriett
- o James Trotter
- o Joseph DiNorcia
- o Kym Watt
- o Neil Shah
- Scott Biggins
- o Shunji Nagai
- o Sophoclis Alexopoulos
- o Peter Abt
- o Vanessa Pucciarelli

HRSA Representatives

o Jim Bowman

SRTR Staff

- o Jack Lake
- o Katie Audette
- Nick Wood
- o Ryo Hirose

UNOS Staff

- o Betsy Gans
- o Brendon Cummiskey
- o Dzhuliyana Handarova
- o Erin Schnellinger
- o James Alcorn
- o Joel Newman
- o Julia Foutz
- o Katrina Gauntt
- o Laura Schmitt
- o Matt Cafarella
- o Meghan McDermott
- o Rob McTier
- Susan Tlusty