

OPTN Vascularized Composite Allograft Transplantation Committee

Meeting Summary

October 25, 2023

Conference Call

Sandra Amaral, MD, MHS, Chair
Vijay Gorantla, MD, PhD, Vice Chair

Introduction

The OPTN Vascularized Composite Allograft Transplantation Committee (the Committee) met via Cisco WebEx teleconference on 10/25/2023 to discuss the following agenda items:

1. *Update Guidance on Optimizing VCA Recovery: Language Review and Vote*
2. *Eliminate Use of Regions from VCA Allocation: 3-year monitoring report*
3. Open discussion

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

1. *Update Guidance on Optimizing VCA Recovery: Language Review and Vote*

The Committee discussed the finalized draft of their guidance document and voted on the changes.

Summary of discussion:

The Committee voted to revise the guidance document language to state "a waiting period after transplant" instead of specifying a timeline for sharing experiences publicly. Additionally, they agreed to change "success stories" to the broader phrase "their experiences" to avoid implying outcomes must meet a particular definition of success.

There was a unanimous vote of 13 for, 0 against, and 0 abstain for this final version of the paper.

The Committee discussed feedback received during public comment on the proposed guidance document. Specific items addressed included clarifying language around sharing recipient success stories and recovery timelines.

Committee members discussed revising the language to avoid specifying a definite timeline for when a patient can be approached regarding VCA advocacy work, given the differences in recovery across the various VCA procedures.

Some members raised considerations around protecting patient privacy, managing expectations, and allowing sufficient physical and emotional recovery before engaging in public advocacy or media interviews. Others emphasized the need to avoid being overly prescriptive in guidance meant for a diverse range of VCA procedures.

Ultimately, there was agreement to indicate "a waiting period" instead of prescribing a particular duration and the Committee voted to revise the document to state "a waiting period after transplant". Additionally, members suggested changing the phrase "sharing their success stories" to focus more broadly on sharing "experiences", without implying that outcomes need to meet a specific definition of success. The intention behind these edits was to avoid confusion while still respecting variability across VCA transplants.

Committee Vote:

Support: 13

Oppose: 0

Abstain: 0

Next steps:

The document will be presented at the Board of Directors meeting in December 2023 for final vote and approval.

2. *Eliminate Use of Regions from VCA Allocation: 3-year monitoring report*

There were no decisions made.

No discussion was had.

3. Open discussion

The Committee recommended allowing flexibility to accept multiple upper limbs or musculoskeletal organs from a single donor for different recipients. However, they advised against separating uterus, cervix and vagina options since these structures are transplanted as a unit.

The Committee engaged in an open discussion around programming considerations for VCA in UNet. Specifically, whether it would be possible to accept multiple musculoskeletal organs from the same donor for different recipients.

Members weighed the hypothetical option of procuring multiple upper limbs from a single deceased donor. Some felt that while clinically uncommon currently, building system capabilities now would allow flexibility for potential future scenarios. However, others pointed out that leftover anatomy after a unilateral hand or arm procurement would likely be insufficient for transplantation into another patient.

When discussing reproductive organs, members agreed that uterus, cervix and vagina should remain packaged together in UNet. Separating them could introduce confusion since they are transplanted as a single unit. Certain clinicians emphasized that these structures are interdependent and should not be considered as distinct donation opportunities.

Overall, the Committee recommended forward-thinking programming for upper limb and musculoskeletal combinations, but not for uterus and other lower body parts at this time. Members asked IT staff to consider this feedback in developing UNet's VCA functionality. The goal is to balance current clinical practice with longer-term possibilities in this rapidly evolving field.

Next steps:

The Committee will continue to discuss questions from IT staff to improve the functionality of UNet.

Upcoming Meetings

- November 15th, 2023

Attendance

- **Committee Members**
 - Sandra Amaral
 - Vijay Gorantla
 - Max Hendrix
 - Elliot Richards
 - Paige Porrett
 - Amanda Gruendell
 - Alexa Blood
 - Avery Cook
 - Todd Levy
 - Brian Berthiaume
 - Gregory McKenna
 - Scott Winder
 - Charlie Thomas
 - Christina Kaufman
- **HRSA Representatives**
 - Jim Bowman
- **UNOS Staff**
 - Kelley Poff
 - Catherine Parton
 - Kristina Hogan
 - Leah Nunez
 - Jesse Howell
 - Susan Tlusty
 - Asma Ali
 - Kaitlin Swanner
 - Stryker-Ann Vosteen
 - Houlder Hudgins
 - MiYoung Kwon