

Meeting Summary

OPTN Liver and Intestinal Organ Transplantation Committee OPTN National Liver Review Board (NLRB) Subcommittee Meeting Summary August 12, 2021 2:30 PM ET Conference Call

James Trotter, MD, NLRB Chair

Introduction

The OPTN National Liver Review Board Subcommittee (the Subcommittee) met via Citrix GoToMeeting teleconference on 08/12/2021 to discuss the following agenda items:

- 1. Review Ischemic Cholangiopathy
- 2. HCC Candidates Treated and Recur
- 3. Data Request: Candidates Beyond Down- Staging
- 4. LI-RADS

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

1. Review Ischemic Cholangiopathy

The Subcommittee heard a data presentation from UNOS research and discussed updating Ischemic Cholangiopathy policy/guidance.

Summary of discussion:

A member commented on the low number of candidates ever requesting a Model For End-Stage Liver Disease (MELD) or Pediatric End-Stage Liver Disease (PELD) score exception for Ischemic Cholangiopathy from 2015 to 2020. Another member responded that programs may not request exceptions for Ischemic Cholangiopathy often because of the diagnosis' low approval rate. A member reported that although these numbers are small, they still deter some programs from using livers from donors after cardiac death (DCDs). A member favored keeping Ischemic Cholangiopathy within guidance, but suggested that the guidance should include a recommendation for these candidates to receive a score that will allow them to be transplanted in a timely manner. The Subcommittee agreed that Ischemic Cholangiopathy would remain in guidance, but language should be added to give these patients a slightly higher score when compared to other patients that will require re-transplant.

Next steps:

Ischemic Cholangiopathy, along with other diagnoses in this round of review will go before the Policy Oversight Committee in October, 2021.

2. HCC Candidates Treated and Recur

The Subcommittee continued to discuss guidance for Hepatocellular carcinoma (HCC) candidates who are treated and recur.

Summary of discussion:

Members agreed that language in section 1 of the current HCC guidance should be reworded for clarity. A member commented that section 1 and section 5 of HCC guidance should be aligned so that candidates with resected and unresected HCC would not need to wait six months. A member responded that perhaps there should be a timeframe surrounding if a candidate will need to wait 6 months after the recurrence of HCC as the waiting period has to do with the biology of the tumor. A member asked the Subcommittee to consider if or what timeframe is most appropriate when a patient experiences recurrence of a tumor.

Next steps:

The Subcommittee will continue this discussion during a future meeting.

3. Data Request: Candidates Beyond Down- Staging

The Subcommittee discussed developing a data request for outcomes of liver recipients with HCC beyond down- staging.

Summary of discussion:

The Subcommittee determined that they will first complete a review of current literature on the topic.

Next steps:

The Subcommittee will discuss any publications on HCC candidates beyond down-staging during a future meeting.

4. LI-RADS

The Subcommittee discussed aligning Liver Imaging Reporting and Data Systems (LI-RADS) and OPTN HCC classifications.

Summary of discussion:

Subcommittee members reported that their transplant programs' radiologists use LI-RADS.

Next steps:

UNOS staff will work towards aligning LI-RADS and OPTN HCC classifications.

Upcoming Meeting

• September 9, 2021

Attendance

• Subcommittee Members

- o Sophoclis Alexopoulos
- o Kimberly Brown
- o James Eason
- Jennifer Kerney
- o Allison Kwong
- o James Pomposelli
- o Jorge Reyes
- James TrotterKym Watt
- **HRSA Representatives**
 - o Jim Bowman

SRTR Staff

- o Katie Audette
- o John Lake
- o Andrew Wey

UNOS Staff

- o Nicole Benjamin
- o Matt Cafarella
- o Julia Foutz
- Jennifer Musick
- o Megan Oley
- o Kelley Poff
- o Scott Pierce
- o Leah Slife
- o Niyati Upadhyay