

**OPTN Pediatric Transplantation Committee
Meeting Summary
July 21, 2021
Conference Call**

**Evelyn Hsu, MD, Chair
Emily Perito, MD, Vice Chair**

Introduction

The OPTN Pediatric Transplantation Committee (the Committee) met via Citrix GoToMeeting teleconference on 7/21/2021 to discuss the following agenda items:

1. Welcome to New Committee Members/Orientation
2. Kidney & Pancreas Continuous Distribution Update
3. Needs Assessment: Ethical Principles of Pediatric Prioritization
4. Wrap-Up & Next Steps

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

1. Welcome to New Committee Members/Orientation

The Committee welcomed new members and reviewed a committee member orientation presentation.

Summary of discussion:

There was no discussion.

2. Kidney & Pancreas Continuous Distribution Update

The Committee was provided the following update on the Kidney & Pancreas Continuous Distribution project:

Pediatric Data Request Results

- Pediatric transplant volume has been stable post-kidney allocation system (KAS), while adult transplant volume has increased
- Pediatric kidney recipients tend to be older than pediatric kidney-pancreas and pancreas recipients
- Few pediatric patients need a kidney-pancreas or pancreas transplant, and many need additional organs
- Pediatric kidney patients under 6 have longer waiting times, potentially due to challenges with size matching

Rating Scale Recommendation

- Recommendation for Pancreas: Binary (yes/no) scale
- Recommendation for Kidney: Binary (yes/no) scale conditional on donor factors

Summary of discussion:

The vice-chair inquired if the Kidney & Pancreas Continuous Distribution Workgroup has had discussions about the importance of defining candidates as pediatric when they are listed instead of at the time of

the match run. A member explained that that has been discussed and the Kidney & Pancreas Continuous Distribution Workgroup supports that pediatric definition. The member noted that the current kidney system is odd because recipients retain pediatric priority after they turn 18; however, there are also additional points that are allocated at the time of the match run based on the age of the recipient.

The vice-chair emphasized that it's also important to consider the priority of candidates ahead of pediatric candidates, since the small group of kidney-pancreas adult candidates may outnumber the kidney-pancreas pediatric candidates.

3. Needs Assessment: Ethical Principles of Pediatric Prioritization

The Committee reviewed the goal of this discussion, which will occur during the Committee's meeting in September.

Summary of discussion:

The Chair inquired how pediatric candidates are fitting into the lung continuous distribution project. A member stated that one of their concerns is that adolescent candidates find themselves with a lung allocation score and they are too small to receive adult lungs.

4. Wrap-Up & Next Steps

Committee members were asked to start thinking about the pre-work for the Needs Assessment discussion.

Pre-Work

- This is a crucial moment in history for pediatric allocation
- The Committee needs to address current gaps in pediatric prioritization and the impact of all changes upon children
- This will be the focus of the 9/23 In-Person meeting
- Members will be contacted to lead and participate in these discussions

Upcoming Meetings.

- August 18, 2021 (Teleconference)
- September 23, 2021

Attendance

- **Committee Members**
 - Evelyn Hsu
 - Emily Perito
 - Abigail Martin
 - Brian Feingold
 - Caitlin Peterson
 - Caitlin Shearer
 - Dan Carratturo
 - Douglas Mogul
 - Geoffrey Kurland
 - Jennifer Lau
 - Kara Ventura
 - Rachel Engen
 - Shellie Mason
 - Warren Zuckerman
 - William Dreyer
- **HRSA Representatives**
 - Marilyn Levi
- **SRTR Staff**
 - Chris Folken
- **UNOS Staff**
 - Rebecca Brookman
 - Matt Cafarella
 - Betsy Gans
 - Katrina Gauntt