

Meeting Summary

OPTN Kidney Transplantation Committee
Meeting Summary
September 18, 2023
Teleconference

Jim Kim, MD, Chair Arpita Basu, MD, Vice Chair

Introduction

The Kidney Transplantation Committee (the Committee) met via teleconference on 9/18/2023 to discuss the following agenda items:

- 1. OPTN Task Force on Efficiency Update
- 2. Estimated Glomerular Filtration Rate (eGFR) Wait Time Modification Implementation Update

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

1. OPTN Task Force on Efficiency Update

The OPTN Vice President and staff provided an update to the Committee on the creation of a new task force to address efficiency of allocation. The Committee also received an update on the impact to the Kidney and Pancreas Continuous Distribution projects.

Presentation summary:

The OPTN Board of Directors (the Board) has approved the creation of a task force to study and improve the efficiency of organ usage and placement. The task force's key responsibilities will include evaluating existing data and recommendations regarding system challenges and improvements, as well as engaging directly and frequently with the community to obtain data, feedback, and suggestions. The task force will also prioritize issues to address, by recommending both short-term improvements and long-term strategies to address larger challenges. The task force will frequently update the OPTN Executive Committee and the Board on their efforts.

The OPTN President and Vice President held conversations with OPTN Policy Oversight Committee, Kidney Committee, and Pancreas Committee leadership about the status of the continuous distribution proposals expected to be released in January 2024. Through these conversations, leadership came to an agreement that the proposals would not be ready for the next public comment cycle and the Board advised the Committees they should not plan to distribute a proposal until the proposal evaluates the potential impact on non-use and allocations out of sequence, and incorporates an expedited allocation pathway.

The Board voted on the following resolution on September 5, 2023:

"WHEREAS, the OPTN Board of Directors supports the Kidney and Pancreas Transplantation Committees as they continue to move toward an equitable Continuous Distribution allocation framework and appreciates the work done to date to customize the framework to the clinical needs specific to those in need of kidney and pancreas transplants; and

WHEREAS, in recognition of the impact the ultimate adoption of the Continuous Distribution of Kidneys and Pancreata will have on the transplant community, and the opportunity presented to have this policy address significant issues related to non-use/non-utilization and out of sequence allocation; Now, therefore be it,

RESOLVED, that the OPTN Board of Directors directs the Kidney and Pancreas Transplantation Committees to ensure that any future proposal for Continuous Distribution of Kidneys and Pancreata considers how the framework will impact the following goals:

- Decreased non-use/non-utilization of kidneys and pancreata
- Decreased out of sequence allocation of kidneys
- Consideration of expedited placement pathways for kidneys at a high risk of non-use;
 and

FURTHER RESOLVED, that the Kidney and Pancreas Transplantation Committees are asked to report back to the OPTN Executive Committee on the incorporation of these goals prior to the approval of any future public comment cycles related to an aspect of the Continuous Distribution framework; and

FURTHER RESOLVED, that the Kidney and Pancreas Transplantation Committees are relieved of their previous commitment to submitting a proposal for consideration of the OPTN Board of Directors at their June 2024 meeting and shall pursue a timeline for the adoption of the proposal that aligns with the work outlined in this directive."

Summary of discussion:

The Chair emphasized the Committee's work on continuous distribution will still proceed on a slower timeline to allow more time to analyze data and develop solutions related to efficiency. A member commented with the Board's directive in mind, the Committee should spend more time on organ offer filters and work to consolidate them with other tools such as kidney minimum acceptance criteria. The Chair agreed and further commented there are other ongoing projects that should be considered as well as attributes included in the composite allocation score. Members commented it will be important for the task force to seek input from all community stakeholders and areas of the country as they have unique challenges.

Staff commented the Committee can also revisit prior discussions and data that were part of the development of continuous distribution and may have been tabled as a future enhancement. The Committee could revisit these ideas to develop further. Another member agreed.

Another member commented every OPTN committee is likely to have project ideas and the task force should focus on gathering input as well as timeliness of implementation. The Chair agreed and commented with committees working on different components of the allocation process, there will need to be a cohesive plan.

Next Steps:

The Kidney and Pancreas Committees will continue their development of their continuous distribution projects and identify enhancements that be included to address efficiency concerns. Additionally, the Committees will discuss ideas to impact efficiency specific to the three areas included in the Board resolution.

2. Estimated Glomerular Filtration Rate (eGFR) Wait Time Modification Implementation Update

A Committee member presented a six-month implementation update for the *Modify Waiting Time for Candidates Affected by Race-Inclusive eGFR Calculations* proposal.

Presentation summary:

The Modify Waiting Time for Candidates Affected by Race-Inclusive eGFR Calculations proposal was implemented January 5, 2023. Various implementation resources have been provided to the community to assist with their reviews. Two webinars were held in March and July to provide step by step instructions on the notification and modification process as well as effective practices. An educational offering is also available with sample notification letters and attestations.

As of September 5, 2023, there have been 9,875 modifications processed from 135 transplant programs. Additionally, 25 programs have submitted attestations.

Summary of Discussion:

A member recommended sharing the patient frequently asked questions (FAQs) with end stage renal disease (ESRD) patient networks. The member further commented this could be an opportunity for the patient community to learn more about the transplant system and the OPTN. Other members agreed, and encouraged more direct patient education from the OPTN.

Next Steps:

The Committee will continue to monitor data on modifications as it is available. The six-month monitoring report will be made available later this year.

Upcoming Meetings

October 11, 2023 – Detroit, MI

Attendance

• Committee Members

- o Jim Kim
- o Carrie Jadlowiec
- Jason Rolls
- o Marian Charlton
- o Patrick Gee
- Stephen Almond
- o Reza Saidi
- Curtis Warfield
- o Eloise Salmon
- o Jesse Cox
- o John Lunz
- o Leigh Ann Burgess
- o Sanjeev Akkina
- George Surratt
- o Chandrasekar Santhanakrishnan
- o Charles Strom
- Martha Pavlakis
- o Tania Houle
- o Aparna Sharma

HRSA Representatives

o Jim Bowman

SRTR Staff

- o Bryn Thompson
- Grace Lyden
- o Jon Miller
- o Peter Stock
- Sommer Gentry

UNOS Staff

- o Lindsay Larkin
- Carlos Martinez
- o Thomas Dolan
- o Keighly Bradbrook
- o Kieran McMahon
- o Kayla Temple
- o Joann White
- o Lauren Motley
- o Ross Walton
- o James Alcorn
- o Kaitlin Swanner
- o Rebecca Fitz Marino
- o Ann-Marie Leary
- o Ben Wolford
- o Kelley Poff
- o Krissy Laurie

Other

- o Richard Formica
- o Rachel Engen
- o Caitlin Peterson
- o Namrata Jain