Introduction

The Kidney Paired Donation (KPD) Workgroup (the Workgroup) met via teleconference on 12/13/2021 to discuss the following agenda items:

1. Call to Purpose
2. OPTN KPD 10-Year Report Highlights
3. Project Planning and Next Steps

The following is a summary of the Workgroup’s discussions.

1. Call to Purpose

The Workgroup received a presentation from the Patient Affairs Committee (PAC) representative on their family’s personal experience with kidney transplant and kidney-paired donation. The call to purpose emphasized that the Workgroup’s work should be focused on patients and donors.

Summary of discussion:

The Chair thanked the PAC representative for sharing their experience, and noted how valuable patient perspective and experience is to the work of the KPD Workgroup.

2. OPTN KPD 10-Year Report Highlights

Staff presented highlights from the draft OPTN KPDPP 10-Year Report to be released soon.

Data summary:

The OPTN KPD Pilot Project (KPDPP) became operational in 2010. Since then, 132 living donor kidney programs have entered at least one candidate/donor pair. Currently, around 50 programs participate per month. Participation increased through 2010s, peaking in 2015. There were 366 transplants from 2010 to 2020, with the number of transplants peaking in 2013 and remaining in range through 2019. In 2020, many living donor programs temporarily ceased operations due to COVID-19.

A total of 2,738 candidates and 2,995 donors were added from 2010 to 2020.

- On average, 249 candidates have been added per year
- Average number of non-directed and bridge donors spiked in 2016, 2018, and 2020
- There were 113 non-directed donors

Donor and candidate characteristics and demographics:

- Candidates:
  - 61 percent blood type O
  - 21 percent highly sensitized
Median time on deceased donor waitlist at the time of match was 308 days

- **Recipients:**
  - 42 percent blood type O
  - 6 percent highly sensitized
  - Median time on deceased donor waitlist at time of match is 434 days

- **Match run donors:**
  - 32 percent blood type O

- **Actual donors**
  - 45 percent blood type O

Match frequency in the early 2010s increased to weekly. Post pandemic frequency had reduced to every other week.

Match success rate declined from 12.3 percent in 2013 to 5.2 percent in 2015. Following a histocompatibility policy in 2016, match success rate increased to 10.7 percent and has remained in that range until 2020.

50 percent of matches were three way exchanges; 18 percent two way exchanges; and 32 percent non-directed donor initiated chains.

Graft function after transplant, 2010 to 2018:

- 2.6 percent of recipients experienced delayed graft function; on par with other paired donation (3.8 percent) and other living donor recipients (2.9 percent)
- 2-Year patient survival rate was 96.4 percent; similar to other paired donation (97.8 percent) and living donor transplant (97.9 percent)
- 2-Year graft survival rate was 93.4 percent; lower than other paired donation (95.6 percent) and other living donor (96 percent) but higher than deceased donors (90.6 percent)

**Summary of discussion:**

The Chair asked if the report mentions median time from time active in the KPD program to time of match, and staff clarified that metric was looked into only for those KPD participants who were transplanted. That metric was not examined for those candidates who were matched but did not move forward to transplant. The Chair remarked that this metric is critical. Staff shared that metric and data will be included in the report.

### 3. Project Planning and Next Steps

The Workgroup reviewed the OPTN KPD Policy Review project plan.

**Data Summary:**

The project’s main goals include reviewing existing KPD policy to ensure alignment with other OPTN policies, identify areas in need of clarification, and identify potential items for future projects.

Update OPTN KPD Policy Project will address the following policies:

- 13.1 Candidate Requirements for Participation
- 13.3 Informed Consent for KPD Candidates
- 13.3 Informed Consent for KPD Donors
- 13.5 OPTN KPD Histocompatibility Testing
- 13.7.A Blood Type
- 13.7.B Blood Type A, non-A1, and Blood Type AB, non-A1B Matching
13.7.G OPTN KPD Waiting Time Reinstatement
13.10 OPTN KPD Crossmatching Requirements
13.11 Receiving and Accepting KPD Match Offers

The Workgroup will split up into subgroups to tackle sections of KPD policy

- Group 1: Histocompatibility-Related Policies
  o Goal: Review identified policies and consult Histocompatibility Committee as needed to identify areas in need of modification and alignment

- Group 2: Informed Consent Policies
  o Goal: Review identified policies and consult Living Donor and Patient Affairs Committees as needed to identify areas in need of modification and alignment

- Group 3: Administrative Policies
  o Goal: Review identified policies and consult Transplant Coordinator and Transplant Administrator Committees as needed to identify areas in need of modification and alignment

The project will kick off in January, with sub-groups meeting to review policy, consult stakeholder committees, and check-in with the larger Workgroup. Then, the Workgroup will review sub-group recommendations, finalize recommendations, and submit a proposal draft. The project is planned to go out for public comment in August 2022.

Summary of discussion:

The Chair remarked that the subgroups were created with the skill sets of each member in mind, and will allow the Workgroup to more quickly and effectively review KPD policy and develop recommendations.

Upcoming Meeting

TBD
Attendance

- **Committee Members**
  - Peter Kennealey
  - Justine van der Pool
  - Marion Charlton
  - Sanjeev Akkina
  - Stephen Gray

- **HRSA Representatives**
  - Jim Bowman
  - Marilyn Levi

- **SRTR Staff**
  - Bryn Thompson

- **UNOS Staff**
  - Lindsay Larkin
  - Ruthanne Leishman
  - Anne McPherson
  - Jennifer Musick
  - Katrina Gauntt
  - Kerrie Masten
  - Lauren Motley
  - Megan Oley
  - Meghan McDermott
  - Ross Walton
  - Kayla Temple

- **Other Attendees**
  - Garrett Erdle