

**OPTN Pancreas Transplant Committee  
Meeting Summary  
February 24, 2023  
Conference Call**

**Rachel Forbes, MD, Chair  
Oyedolamu K Olaitan, MD, Vice Chair**

## Introduction

OPTN Pancreas Transplant Committee (the Committee) met via Citrix GoToMeeting teleconference on 02/24/2023 to discuss the following agenda items:

1. Overview and Discussion: Scenarios and Weight Recommendations for Organ Allocation Simulator (OASIM) #2
2. Closing Remarks

### 1. Overview and Discussion: Scenarios and Weight Recommendations for OASIM #2

Staff begins a recap of what was discussed in the prior Committee meeting and presenting edits made to the existing scenarios. These revisions can be seen in the table below.

	All Donor Efficiency (Rounded)	Scenarios and Weights for OASIM #2 (Revised)			
		New All Donor Efficiency	Preserved Placement Efficiency	High Priority for Pediatrics and Prior Living Donor	Revised High CPRA
Blood Type	11.67%	0%	0%	0%	0%
CPRA	11.67%	10%	15%	10%	20%
Prior Living Donor	15.56%	20%	17.5%	22.5%	20%
Pediatric	15.56%	20%	17.5%	22.5%	20%
Qualifying Time	7.78%	10%	15%	10%	10%
Placement Efficiency	30%	30%	25%	25%	20%
Organ Registration	7.78%	10%	10%	10%	10%

### Scenarios and Weights for OASIM #2

#### Scenario 1 (All Donor Efficiency)

- CPRA
- Prior Living Donor
- Pediatric
- Qualifying Time
- Placement Efficiency
- Organ Registration

#### Scenario 2 (Preserved Placement Efficiency)

- CPRA
- Prior Living Donor
- Pediatric
- Qualifying Time
- Placement Efficiency
- Organ Registration

#### Scenario 1 (All Donor Efficiency)

- CPRA
- Prior Living Donor
- Pediatric
- Qualifying Time
- Placement Efficiency
- Organ Registration

#### Scenario 1 (All Donor Efficiency)

- CPRA
- Prior Living Donor
- Pediatric
- Qualifying Time
- Placement Efficiency
- Organ Registration

#### Summary of Discussion

##### *Pediatrics and Prior Living Donor*

Committee members voiced concern over the high priority weight given to pediatric and prior living donors in comparison to the qualifying time attribute. Members observed the weight assigned to this qualifying time is significantly less compared to both prior living donor and pediatrics and felt this was undervaluing the attribute. A Scientific Registry of Transplant Recipients (SRTR) representative commented that wait time is different from pancreas alone candidates compared to kidney-pancreas (KP) candidates. The wait times for (KP) are significantly lower compared to pancreas alone because KP patients receive wait time from dialysis, meanwhile pancreas alone patients only receive wait time by actually spending time on the list. The SRTR representative mentions that this has been discussed among the Committee previously, which is why they decided to prioritize other attributes over qualifying time and by granting more value to the qualifying time attribute could create an unintended outcome where KP is more favored for transplant compared to pancreas alone.

##### *Placement Efficiency*

The Committee Chair mentioned the concern previously raised by the Committee of decreasing the weight of placement efficiency to 20% or lower. The Committee supported the revised weight for the weight of placement efficiency increasing to at least 20% or greater across all scenarios. The Committee Chair inquired if the CPRA and qualifying time attributes should be weighted in the same manner.

##### *Two Candidate Comparison: Pediatrics*

The Committee reviewed hypothetical scenarios comparing two candidates with certain characteristics and were asked to identify which one of the hypothetical candidates should be prioritized. Below is the first candidate graphic presented to the Committee.

Candidate Characteristic	Candidate 1	Candidate 2
Organ Registration	Pancreas	Pancreas
Qualifying Time	365 days	365 days
Distance from Donor Hospital	<b>250 NM</b>	<b>0 NM</b>
CPRA	0%	0%
Age	<b>Pediatric</b>	<b>Adult</b>
Prior Living Donor?	No	No

The Committee voiced support for Candidate 1 receiving prioritization. The Committee viewed how these candidates compared on the Tableau sensitivity tool which revealed that under the New All Donor Efficiency Scenario and Preserved Placement Efficiency Scenario, Candidate 2 receives priority and under the Revised High Peds/Prior Living Donor Scenario and Revised High CPRA Scenario, Candidate 1 receives higher priority. The Committee agreed that the Revised High Peds/Prior Living Donor Scenario seems to be the most appropriate.

#### *Two Candidate Comparison: CPRA*

The Committee reviewed the below two candidate comparison focused on CPRA.

Candidate Characteristic	Candidate 1	Candidate 2
Organ Registration	Pancreas	Pancreas
Qualifying Time	365 days	365 days
Distance from Donor Hospital	<b>500 NM</b>	<b>100 NM</b>
CPRA	<b>100%</b>	<b>0%</b>
Age	Adult	Adult
Prior Living Donor?	No	No

The Committee voiced support for Candidate 1 receiving prioritization. The Committee viewed how these candidates compared on the Tableau sensitivity tool which revealed that under the New All Donor Efficiency Scenario and the Revised High Peds/Prior Living Donor Scenario, Candidate 2 is prioritized and under the Preserved Placement Efficiency Scenario and Revised High CPRA Scenario, Candidate 1 is more prioritized. Committee members observed that among the four scenarios, only one scenario presented the desired outcomes the Committee discussed.. The Committee agreed that CPRA needs to be more prioritized in the New All Donor Efficiency Scenario and the Revised High/Peds and Prior Living Donor Scenario. The Committee also noted that the results for the Preserved Placement Efficiency Scenario are very close between the two hypothetical candidates and if the CPRA was slightly less for candidate 1 then the results may have been different.

#### *Two Candidate Comparison: Qualifying Time*

The Committee reviewed the below two candidate comparison focused on qualifying time.

Candidate Characteristic	Candidate 1	Candidate 2
Organ Registration	Pancreas	Pancreas
Qualifying Time	<b>1095 days</b>	<b>1 days</b>
Distance from Donor Hospital	<b>250 NM</b>	<b>100 NM</b>
CPRA	0%	0%
Age	Adult	Adult
Prior Living Donor?	No	No

The Committee voiced support for Candidate 1 receiving prioritization. The Committee viewed how these candidates compared on the Tableau sensitivity tool which revealed that under all four scenarios, Candidate 2 receives priority. The Committee stated that placement efficiency should be prioritized to align with the Committee's established modeling goals of increasing the utilization of pancreata. The Committee did acknowledge that this could present unintended consequences, such as potentially disadvantaging candidates who live further away from a donor hospital.

Some Committee members stated that qualifying time should receive more priority compared to placement efficiency and decreasing the weight from placement efficiency and distributing that weight to qualifying time.

The Committee observed the Revised High CPRA scenario presenting the most desirable outcomes. To address the concerns of prioritization for qualifying time, the Committee suggested decreasing the weight from CPRA attribute and distributing that weight to qualifying time. An SRTR representative cautioned the Committee of unintended consequences for high CPRA patients. The SRTR representative suggested decreasing weight from placement efficiency to supplement qualifying time. Focusing on the Revised High CPRA Scenario, the Committee recommends decreasing the pediatric and prior living donor to 17.5 percent and adding the available 5 percent weight to the qualifying time.

A Health Resources and Services Administration (HRSA) representative voiced concern that the outcomes for these scenarios will not match the desired outcomes of the Committee. The HRSA representative mentioned if the Committee wanted to prioritize the rare cases of high CPRA, pediatrics, and prior living donor, the Committee should not be lower than placement efficiency. The Committee members agreed with this observation and that there should be caution when lowering the weight of placement efficiency so that utilization rates and improved outcomes are not impacted negatively.

The Committee reviewed the scenarios presented and provided the following revisions:

- **New All Donor Efficiency Scenario:** The Committee suggested decreasing placement efficiency to 25 percent and increase qualifying time to 15 percent. **Revised High CPRA Scenario:** The Committee suggested decreasing placement efficiency to 15 percent and increasing qualifying time to 15percent.

The Committee inquired about the unintended consequences that may arise by decreasing the weight for organ registration attribute. An SRTR representative commented that decreasing the weight for organ registration could negatively impact pancreas islet candidates.

### Next Steps

The Committee requested more in-depth modeling and candidate comparisons through the Tableau sensitivity and MIT dashboard tools before finalizing the OASIM modeling request.

UNOS staff will make revisions to the scenarios and weights for further review and feedback.

**Upcoming Meeting**

- March 6, 2023 (teleconference)

## Attendance

- **Committee Members**
  - Colleen Jay
  - Dean Kim
  - Dolamu Olaitan
  - Jessica Yokubeak
  - Randeep Kashyap
  - Mallory Boomsma
  - Muhammad Yaqub
  - Rachel Forbes
  - Rupi Sodhi
  - Ty Dunn
  - William Asch
  - Todd Pesavento
- **HRSA Representatives**
  - Jim Bowman
  - Marilyn Levi
- **SRTR Staff**
  - Bryn Thompson
  - Raja Kandaswamy
- **UNOS Staff**
  - Austin Chapple
  - Carol Covington
  - James Alcorn
  - Joann White
  - Lauren Motley
  - Sarah Booker
- **Other Attendees**
  - Dave Weimer