

## **OPTN Ad Hoc International Relations Committee**

### **Meeting Summary**

**October 25, 2022**

**Conference Call**

**Pramod Bonde, MD, Chair**

**Peter Stock, MD, Vice Chair**

### **Introduction**

The OPTN Ad Hoc International Relations Committee (the Committee) met via Citrix GoToMeeting teleconference on 10/25/2022 to discuss the following agenda items:

1. Finalize Project Idea: *Guidance on Evaluation, Acceptance, and Follow-up of international Living Donors*

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

### **1. Finalize Project Idea: Guidance on Evaluation, Acceptance, and Follow-up of International Living Donors**

The Committee finalized sections of the project form for Guidance on the Evaluation, Acceptance, and Follow-up of International Living Donors.

#### Summary of discussion:

##### *Background*

The presenter asked how the evaluation, acceptance, and follow-up of international living donors process differs from domestic living donors. A member replied that programs are more likely to lose follow-up with international living donors after six months to one year compared to U.S living donors.

##### *Impact on vulnerable population*

The presenter asked who is considered part of the vulnerable population for accepting, evaluating, and following up on international living donors. The Chair replied that the vulnerable populations within this project are recipients, donors, and transplant programs. The Chair explained that recipients are part of the vulnerable population because of the complexity of arranging for an international living donor to have a transplant. There are multiple unknowns when arranging for an international living donor transplant, which increases the vulnerability of the recipient. The donor is also part of the vulnerable population because international living donor follow-up rates are lower than U.S living donors. Transplant centers are included in vulnerable populations because if centers do not have appropriate guidelines, they may not know how to accurately accept, evaluate, and follow up on international living donors.

The presenter asked if most U.S transplant programs have experience with the acceptance, evaluation, and follow-up of international living donors. The Chair replied that most of the programs in the U.S do not know how to accept, evaluate, or follow up on international living donors. However, there are a few transplant centers that are familiar with the immigrant population and are more versed in accepting, evaluating, and following up with international living donors and know the specific limitations. The Chair stated that approximately 80% or more of transplant programs could benefit from the guidance

document. A member shared their anecdotal experience and said that their transplant program has experience with accepting, evaluating, and following up with international living donors. Although there are opportunities for improvement within their processes, their center would benefit from having a guidance document because it would help bridge the knowledge gap and increase the number of donors that are accepted.

Another member noted that for some programs that are not international destinations, there might not be a need for the guidance document because they do not have many international patients. However, a guidance document might be beneficial for those programs if an international patient seeks transplant services at the program.

A member stated that the location of international patients might not be a barrier for transplant programs; instead, the lack of education is the barrier. The member suggested creating a white paper to help educate the transplant community. The Chair replied that a white paper might not be the best option since the proposed project's purpose is to provide transplant centers with information on how to accept, evaluate, and follow up with international living donors. Therefore, a guidance document may be the best option.

### *Strategic Goals*

A member stated that the proposed project could increase equity and access to transplants, given that it could increase the patient population and the center's ability to accept and evaluate potential living donors. The member further explained that their transplant center has many patients who come to their center from Mexico. If the international patients have family currently living in the U.S or if the patient can come to the U.S, it increases their ability to get a transplant. Additionally, international patients who come to the U.S for transplantation broaden the potential donor pool for a specific recipient.

The Chair noted that since donors may experience exploitation, the guidance document should distinguish between transplant tourism and international living donors willing to be donors to a recipient.

A member asked when project forms are due for the next Policy Oversight Committee (POC). The presenter replied that the project forms would go to POC prior to the December 2022 meeting.

### Next steps:

The project idea will be presented to the Policy Oversight Committee for project approval in December 2022.

### **Upcoming Meeting**

- November 22, 2022

## Attendance

- **Committee Members**
  - Pramod Bonde
  - Peter Stock
  - Abby Ruiz
  - Barry Friedman
  - Eliana Agudelo
  - Nancy long
  - Scott Sanoff
  - Sylvia Villalon
- **HRSA Representatives**
  - Jim Bowman
  - Shannon Dunne
- **SRTR Staff**
  - Bryn Thompson
- **UNOS Staff**
  - Tamika Watkins
  - Robert Hunter
  - Tina Rhoades