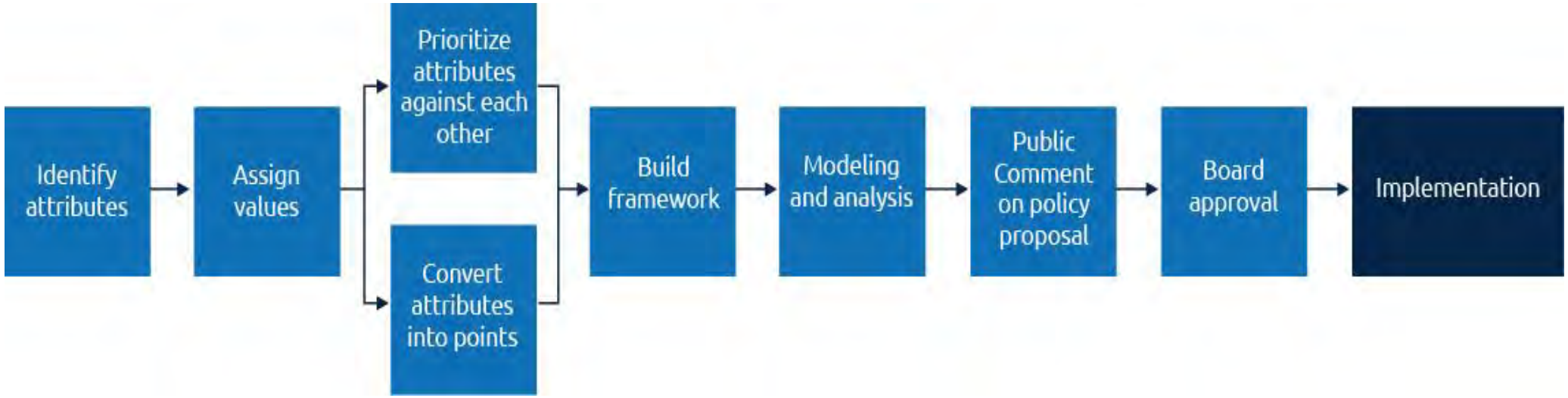
Continuous Distribution of Kidneys and Pancreata Concept Paper

OPTN Kidney & Pancreas Transplantation Committees

Purpose of Concept Paper

- Introduce the kidney and pancreas communities to the project
- Update the community on the progress to date
- Seek community feedback to help inform the new allocation framework



Concept Paper

- Provides overview of Continuous Distribution and the policy development approach
- Summarizes the attributes considered by the Kidney and Pancreas Committees
- Outlines how these attributes align with NOTA and the Final Rule
- Seeks community feedback

Overview of Continuous Distribution Project

- Continuous distribution will replace the current classification-based allocation system with a points-based allocation system
- Continuous distribution will rank waiting list candidates in a points-based framework based on various attributes

Rationale

- Provide a more equitable approach to matching kidney and pancreas candidates and donors
- Remove hard boundaries that prevent kidney and pancreas candidates from being prioritized further on the match run
- Consider multiple patient attributes all at once through a composite allocation score instead of within categories by sequence
- Establish a system that is flexible enough to work for each organ type
- Having a uniform system will make future policy changes faster

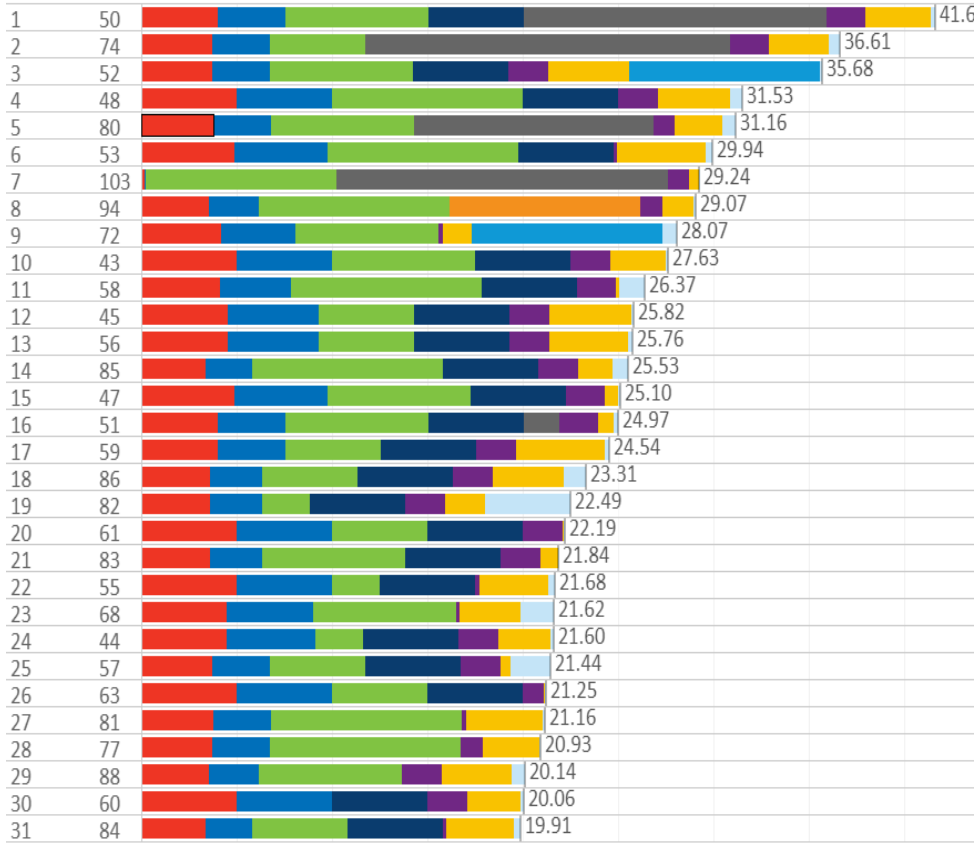
Current State vs. Future State

Classification Based System

Table 8-8: Allocation of Kidneys from Deceased Donors with KDPI Scores Greater Than 20% but Less Than 35%

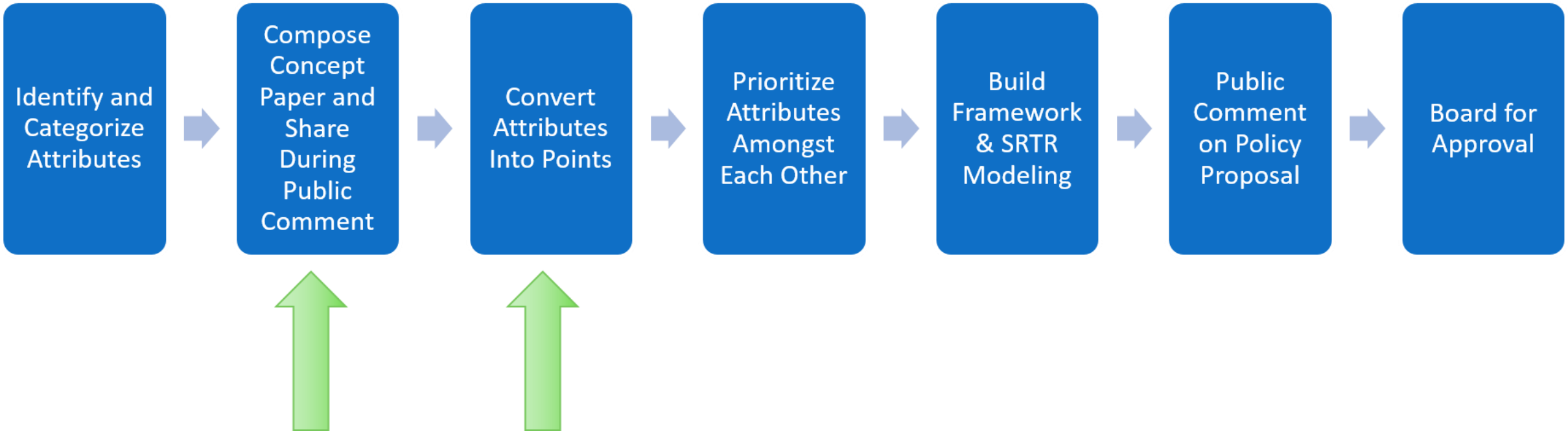
Classification	Candidates that are	And registered at a transplant hospital that is at or within this distance from the hospital that distribution will be based upon	With this donor blood type:
1	0-ABDR mismatch, CPRA equal to 100%, blood type identical or permissible	250NM	Any
2	CPRA equal to 100%, blood type identical or permissible	250NM	Any
3	0-ABDR mismatch, CPRA equal to 100%, blood type identical or permissible	Nation	Any
4	CPRA equal to 100%, blood type identical or permissible	Nation	Any
5	Prior living donor, blood type identical or permissible	250NM	Any
6	Registered prior to 18 years old, blood type identical or permissible	250NM	Any
7	Medically Urgent	250NM	Any
8	0-ABDR mismatch, CPRA equal to 99%, blood type identical or permissible	250NM	Any
9	CPRA equal to 99%, blood type identical or permissible	250NM	Any

Points Based System



Workgroup's Progress

- Project Goal: Change allocation from a **classification-based system** to a **points-based system**



Kidney and Pancreas Specific Goals

	Medical Urgency	Post-Transplant Survival	Candidate Biology	Patient Access	Placement Efficiency
Kidney Goals	Prioritize those with high mortality due to imminent loss of dialysis	Increasing graft/longevity matching	Increase transplant opportunities for patients who are medically harder to match	Appropriate transplant access	Consider resource requirements required to match, transport, and transplant an organ
Pancreas Goals	Prioritize sickest candidates first to reduce waiting list mortality	Prioritize candidates who are expected to survive for at least one year after receiving a transplant	Increase transplant opportunities for patients who are medically harder to match	Increase transplant access for patients under the age of 18 and patients who previously donated an organ or part of an organ	Consider resource requirements required to match, transport, & transplant an organ

Identified Attributes

	Medical Urgency	Post-Transplant Survival	Candidate Biology	Patient Access	Placement Efficiency
Kidney	• Medical Urgency Definition	• HLA Matching • EPTS • Ischemic Time	• Blood Type* • CPRA*	• Prior Living Donors* • Pediatrics* • SLK Safety Net • Waiting Time*	• Travel Efficiency • Proximity Efficiency • Dual vs. Single • En Bloc
Pancreas	• KP vs. Pancreas vs. Islets	• HLA Matching • Ischemic Time	• Blood Type* • CPRA*	• Prior Living Donors* • Pediatrics* • PAK • Waiting Time*	• Travel Efficiency • Proximity Efficiency

*Also identified as a kidney-pancreas attribute

**Islets and Facilitated Pancreas were also identified as attributes of non-utilization

Next Phase of the Project

- For each attribute, the Workgroup will develop rating scales and weights to build a draft framework

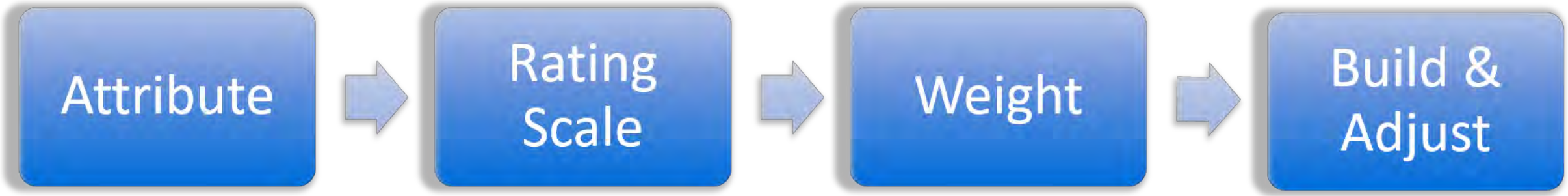
Rating Scale

- A rating scale describes how much preference is provided to candidates within each attribute
- Rating scales are derived from clinical and operational data or value judgements

Weights

- Weights reflect the relative importance or priority of each attribute toward our overall goal of organ allocation.
- Combined with the rating scale and each candidate's information, this results in an overall composite score for prioritizing candidates. Weights are derived from value-based decisions

Building the Framework



Discuss each attribute individually

Determine rating scale for each attribute

Determine weight for each attribute compared to other attributes

Use Workgroup's decisions to build draft framework and adjust as needed

Milestones: Continuous Distribution of Kidneys and Pancreata

2020	Began work	August
2021	Concept Paper	August - October
2022	Progress Update Paper	January - March
	Policy Proposal: Public Comment	August - October
	OPTN Board of Directors	December
2023	Implementation	

What do you think?

- The Workgroup requests feedback from the community on:
  - Additional attributes to be considered
  - Thoughts on rating scales and weights for attributes
- Additionally, the concept paper contains specific questions on:
  - Measures of efficient management for organ placement
  - Importance of waiting time and waiting time inversion
  - Pediatric priority points
  - Longevity matching
  - How to factor in “hard-to-place” kidneys
  - How dual and en bloc kidney allocation should be operationalized

Next Steps

- Review community feedback
- The Workgroup will:
  - Discuss each attribute individually
  - Determine rating scale for each attribute
  - Determine weight for each attribute compared to other attributes
  - Use Workgroup's decisions to build draft framework
  - Continuously update community on Workgroup's progress