

The American Society of Transplantation (AST) responded to the OPTN bylaws proposal, “Update Criteria for Post-Transplant Graft Survival Metrics,” released during a special public comment period and open for comment from September 17 – October 16, 2024. The AST submitted the following response through the OPTN website on October 10, 2024, after receiving input from the AST’s communities of practice, OPTN Policy Committee, and Board of Directors.

The American Society of Transplantation (AST) supports the proposal, “Update Criteria for Post-Transplant Graft Survival Metrics” released during a special public comment period. The AST supports the proposed flagging threshold change to 2.25 for 90-day and 1-year conditional on 90-day graft survival as this change is anticipated to increase transplant programs’ willingness to accept more complex donor organs and perform more complex transplants, while also providing a secondary benefit of streamlining the MPSC’s work. The AST supports the goal of this proposal and encourages the OPTN to pursue other considerations that will likely have a more significant impact on which organs will be accepted by transplant programs. Specifically, the SRTR five-tier rating system needs to be better aligned with the OPTN bylaws outcomes thresholds, as it is used by payors and hospital administrators and ultimately has greater influence over transplant programs’ decisions. Additionally, better risk adjustment for recipient factors is needed; similar to donors, transplant recipients are also becoming more “complex.” Without working to address these two important considerations, the AST expects the proposed OPTN bylaws change to have a minimal impact on transplant program acceptance behavior.

The AST agrees with applying this change only to adult transplants at this time. The AST requests that the OPTN perform similar analyses of flagged pediatric transplant programs. It would be useful to determine if pediatric transplant programs might also benefit from an increased threshold for outcome reviews in order to reduce the number of reviews resulting from “false positives” and the associated administrative burden.

The AST is supportive of the OPTN exploring an increase to the organ offer acceptance rate ratio only after multi-criteria offer filters are implemented for each organ, programs have been allowed sufficient time to understand and optimize offer filters for their patients, and there is convincing data that supports increasing the organ offer acceptance rate threshold will yield increased utilization of organs for transplant.

Finally, the AST remains concerned about the OPTN’s usage of special public comment periods. There is value in having robust community discussions about changes to OPTN policies and bylaws, especially those held at the OPTN regional meetings. The AST is concerned that truncating the public comment process without any prior announcement or awareness of these special comment periods limits the discussion of these proposed changes and increases the likelihood of unintentional consequences.