

*The National Academies of*  
**SCIENCES • ENGINEERING • MEDICINE**

HEALTH AND MEDICINE DIVISION

Board on Health Sciences Policy

Board on Health Care Services

**The Committee on A Fairer and More Equitable,  
Cost-Effective, and Transparent System of Donor Organ  
Procurement, Allocation, and Distribution**

**April 16, 2021**

11:00 AM – 3:45 PM ET

Virtual Public Webinar

11:00 a.m.    **Welcome and Introduction**

KENNETH W. KIZER, *Committee Chair*  
Chief Healthcare Transformation Officer  
Senior Executive Vice President  
Atlas Research

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**SESSION I: INTERNATIONAL EXAMPLES OF ORGAN PROCUREMENT, ALLOCATION, & DISTRIBUTION**

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Session objectives:

- Discuss lessons the U.S. can learn from global transplant leaders about more efficient distribution, increased utilization, and more equitable allocation of deceased donor organs.
- Identify specific policies, practices, and incentives used successfully by other countries that could potentially be adapted to improve the U.S. organ transplant system.

Questions for Speakers:

- *Policy making:* Who is responsible for policy-making around deceased donor organ procurement, allocation, and distribution in your country? How are policies developed and any disagreements among stakeholders addressed?
- *Increasing transplants:* How has your country responded to the challenge of increasing the number of organs available for transplant?
- *Allocation:* How are deceased donor organs allocated among individuals on the waitlist in your country? How is equity considered in allocation schemes?
- *Utilization:* How are deceased donor organs determined as acceptable to use in your country? Do individual physicians and hospitals consider organ offers individually for each patient?
- *Implementation:* What were the barriers to implementing organ allocation policies in your country? What implementation barriers would you see in the United States?

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## ***SESSION I – CONTINUED***

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*Moderator: Kenneth W. Kizer*

**11:10 a.m.      Lessons from Canada**

JOHN GILL  
Professor of Medicine  
University of British Columbia  
President-Elect, American Society of Transplantation

**11:25 a.m.      Lessons from Israel**

JACOB LAVEE  
Director, Heart Transplant Unit  
Sheba Medical Center  
Professor of Surgery  
Tel Aviv University

**11:40 a.m.      Discussion with Committee (20 minutes)**

**12:00 p.m.      Lessons from the UK**

GABRIEL ONISCU  
Director, Edinburgh Transplant Centre  
Consultant Transplant Surgeon and Honorary Reader in Transplantation  
Royal Infirmary of Edinburgh

**12:15 p.m.      Lessons from Eurotransplant**

AXEL RAHMEL  
Medical director  
Deutsche Stiftung Organtransplantation

**12:30 p.m.      Lessons from Spain**

BEATRIZ DOMINGUEZ-GIL  
Director General  
Organización Nacional de Trasplantes

**12:45 pm.      Discussion with Committee Members (20 minutes)**

1:05 p.m.      **Session Wrap-Up**

KENNETH W. KIZER, *Committee Chair*  
Chief Healthcare Transformation Officer  
Senior Executive Vice President  
Atlas Research

1:10 p.m.      **Break (40 minutes)**

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## **SESSION II: EXPLORING DISPARITIES AND INEQUITIES IN PATIENT REFERRAL, EVALUATION, & WAITLIST MANAGEMENT PRACTICES**

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### Session Objectives:

- Examine how patients get referred to organ transplant specialists, evaluated by specialists, and placed on a waitlist for a deceased donor organ.
- Explore the areas along this clinical pathway where barriers and biases exist and discuss possible solutions to making the process more equitable.

### Questions for Speakers:

- Is the process of patient referral for organ transplant equitable, and if not, which populations experience adverse disparities? Where exactly in the process are patients from these populations not referred for transplants and why? What system-level actions could be taken to prevent disparities in referrals and mitigate inequitable outcomes?
- Once patients have been referred to a transplant program, do similar problems occur in the process of evaluating and listing them as candidates for transplantation?
- Are any of the disparities and inequities in patient referral and evaluation for a transplant organ-specific?
- What role does implicit bias play in patients having trouble gaining access to an organ transplant waitlist and actually receiving a transplant? How can such biases be addressed?
- How does waitlist management by transplant centers and referring hospitals/physicians affect underrepresented groups' access to transplantation? Could particular policies and practices be adopted to manage waitlists more efficiently and effectively and also contribute to alleviating disparities in access to organ transplant?

*Moderator: Kenneth W. Kizer*

1:50 p.m.      **Working Toward a More Equitable Patient Referral and Waitlist System for Kidney Transplantation**

AMY WATERMAN  
Professor in Residence, Division of Nephrology  
UCLA Health

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## ***SESSION II - CONTINUED***

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2:05 p.m.      **Working Toward a More Equitable Patient Referral and Waitlist System for Liver Transplantation**

MALAY SHAH  
Surgical Director, Liver Transplant Program  
University of Kentucky, School of Medicine

2:20 p.m.      **Bias Associated with Allocation of Heart Transplant and Other Advanced Heart Failure Therapies**

KHADIJAH BREATHETT  
Assistant Professor  
University of Arizona, School of Medicine

2:35 p.m.      **Discussion with Committee Members** *(20 minutes)*

2:55 p.m.      **Waitlist Management Techniques – Experience from the COIN Project and Beyond**

ANDREA TIETJEN  
AVP, Transplant Administrative Services  
Saint Barnabas Medical Center

3:10 p.m.      **Addressing Inequities through Improved Waitlist Management**

GISELLE GUERRA  
Medical Director, Kidney Transplant Program  
Miami Transplant Institute

3:25 p.m.      **Discussion with Committee Members** *(20 minutes)*

3:45 p.m.      **Session Wrap-Up and Adjourn**

KENNETH W. KIZER, *Committee Chair*  
Chief Healthcare Transformation Officer  
Senior Executive Vice President  
Atlas Research