



TO: National Academies of Science, Engineering, and Medicine Committee on A Fairer and More Equitable, Cost-Effective, and Transparent System of Donor Organ Procurement, Allocation, and Distribution

FROM: Dr. John Gill, President
(and to be presented by Dr. Richard Formica during the July 15, 2021 Virtual Public Listening Session)

RE: AST Comments on Maximizing Public and Professional Trust

DATE: July 13, 2021

The American Society of Transplantation represents the majority of the nation's professionals engaged in the field of solid organ transplantation. With over 4,000 professional members of the organ donation and transplantation profession and representation from the transplant community through our Power2Save patient education efforts, we appreciate this opportunity to address the National Academies and participate in this public listening session. The following are the considered recommendations of the AST.

Recommendation #1 - Demonstrating respect for deceased donor families.

The AST believes words matter and the recent national debates around organ donation, donor potential, organ yield etc. presents the deceased donor as a supply to be maximized. When, in reality, organ donation is a resource – a gift to benefit society at large that is the result of the altruism of members of the same society. Deceased organ donation requires complex and sensitive human interactions. OPO staff must have difficult conversations with the families of potential deceased donors at a time of intense emotional stress. These discussions will be easier and are more likely to result in donation if the public at large has a favorable view of organ donation and the system responsible for coordinating it. Therefore, the AST recommends that messaging regarding organ donation, OPOs, and the construction of policy regarding organ donation be done in a sensitive, culturally focused manner and that avoids terminology that dehumanizes deceased organ donors, commodifies donated organs or degrades trust in the system responsible for coordinating it.

Recommendation #2 - Alignment of donor hospital incentives with those of society.

The AST believes that the success of organ donation requires active engagement by donor hospitals. The AST believes that this process is most successful when donor hospital leadership and the hospital care team champion the mission of deceased organ donation as part of the continuum of care of a patient and when there is an alignment of incentives. The process of successfully recovering donor organs requires donor hospitals to devote resources to identify, obtain consent, and medically manage deceased organ donors. Therefore, the AST believes that reimbursement policies should be aligned with the goal of maximizing donation by compensating donor hospitals for efforts to recover organs from a potential donor regardless of the final disposition, such as a donor not progressing to donation, or the organs not ultimately being utilized for transplantation.

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Recommendation #3 - Development of valid metrics to inform the quality of deceased donor services.

The AST understands the need to advance the development of new metrics to help improve deceased donor services provided by OPOs. However, the AST does not endorse a disruptive approach that has the potential to destabilize our already high performing system at large and that does not comprehensively assess factors that limit the availability of organs for transplantation. Increasing organ transplantation requires a comprehensive systemwide strategy, inclusive of improved OPO performance metrics that can produce reliable benchmarks. Therefore, the AST recommends a consensus-based process, that involves all stakeholders, to develop objective and reliable metrics of the quality of deceased donor services. These metrics should be used to improve the practices of all OPOs and be in alignment with other systemwide metrics with the goal of delivering better access to transplantation for patients with end organ failure.

Recommendation #4 - Alignment of metrics used to evaluate organ procurement organizations and transplant centers.

The AST believes that organ donation and transplantation are interdependent. Therefore, to save more lives the focus must be on the whole system as opposed to its individual parts. The construction of metrics to evaluate the performance of transplant programs and organ procurement organizations in isolation contributes to an environment where transplant program incentives and OPO incentives may be in conflict. This conflict prevents maximizing system performance for the benefit of patients. Therefore, the AST recommends a holistic approach to the formulation of transplant system metrics that considers the inter-dependence of transplant centers and OPOs in ensuring optimal organ donation and transplant services.