Ad Hoc Disease Transmission Advisory Committee: A Report to the OPTN/UNOS Board

Emily A. Blumberg, MD
Chair, OPTN/UNOS DTAC

Shandie Covington
UNOS Staff Liaison, DTAC

November 14-15, 2011
Atlanta, Georgia
BOD Approved Committee Projects

Bi-annual DTAC e-newsletter
- Last issue October 2011
- Highlights new HRSA-CDC Working Agreement
- Covers DTAC abstracts from 2011 ATC and a recent journal publication on malignancy.

Guidance for Considering Donors with Meningoencephalitis of Unknown Etiology
- Subcommittee work ongoing
- Guidance document anticipated by June 2012 BOD meeting

OPTN
BOD Approved Committee Projects

- Improvements to disease reporting page on Improving Patient Safety portal

  Modifications recommended by DTAC and DTAC support staff

  Committee voted to approve modifications for programming

  - These changes will be part of a larger programming effort to update LD, Patient Safety and Disease Transmission reporting pages.
BOD Approved Committee Projects

Proposed Minimum Screening Requirements for Living Donors

- Provided input and feedback to the Living Donor Committee

Follow-up survey of all OPOs Regarding Donor Screening Practices

- On hold pending the finalization of US PHS Guidelines, as this is expected to change OPO screening practices
Other Projects and Issues

US PHS Guidelines Review

- DTAC took an active role in reviewing all of the recommendations over the course of 6 conference call and through email discussion.
- Many general and specific concerns, with feedback going into larger OPTN response from multiple committees.
- Committee has concerns regarding impact on transplantation as a whole.
HRSA-CDC Working Agreement

- CDC and HRSA DoT recently developed a working agreement in order to:
  - reduce the burden on OPTN members for reporting similar information to two different organizations, and
  - prevent duplication of effort between the CDC and DTAC.

- While reporting requirements outlined in Policy 4.5 will not change, the state or local public health and/or the CDC will lead and coordinate any reported PDDTE that is flagged as public health investigation.
HRSA-CDC Working Agreement

As of October 1, 2011, a public health investigation may be pursued when a PDDTE involves:

- A **notifiable disease** (as listed by each state. Please be aware of reportable diseases in your specific locale.);
- A **disease cluster** (i.e. two or more recipients infected); or
- A **disease or condition with public health implications** (e.g. emerging pathogens, diseases with potential for person-to-person transmission).
HRSA-CDC Working Agreement

- DTAC Support Staff will continue standard case management for all malignancy and non-notifiable/non-public health interest cases.

- DTAC will continue to review all reported cases, relying on case summaries from the CDC on cases led by local or state PH or CDC.
HRSA-CDC Working Agreement

- OPTN members notified by memo in the UNOS Communications e-newsletter in October.
- To date, the CDC is leading 8 of the 15 cases reported in October and reviewed by DTAC.
  - There were five additional reports that were cancelled d/t duplicate or unnecessary reporting.
HRSA-CDC Working Agreement

■ To date, only one member has raised concerns regarding the new process.

■ CDC invites DTAC to participate in any conference calls it schedules, and will provide a case summary once review is complete
  • No summaries received to date, but we have not reached 45 day marker
153 cases reported as of 10/31/11. On pace to surpass 2010 total.
# Summary of Reported Cases: Jan- Oct 2011

<table>
<thead>
<tr>
<th>Disease Types</th>
<th># of Donor Reports</th>
<th># of Recipients w/ Confirmed Tx*</th>
<th># of DDD-Attributable Recipients Deaths*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bacterial</td>
<td>43</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Viral</td>
<td>36</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>Fungal</td>
<td>22</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Parasites</td>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Other Diseases</td>
<td>7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Malignancies</td>
<td>41</td>
<td>7</td>
<td>3 (2 explanted)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>153</strong></td>
<td><strong>25</strong></td>
<td><strong>6 (2)</strong></td>
</tr>
</tbody>
</table>

Data on confirmed transmission and transmission-attributed deaths is based upon what is available as of 10/31/11, and does not include 45 day follow-up or SSDMF review for all events reported to date. Numbers are subject to change.

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DTAC Members (2011-2012)

Dr. Emily Blumberg, Chair (TID)
Dr. Daniel Kaul (TID)
Dr. Afshin Ehsan (Thoracic TX Surgeon)
Dr. Thomas Gross (TX Oncology)
Dr. George Lyon (TID)
Dr. Betsy Tuttle-Newhall (Abd TX Surgeon)
Dr. Tim Pruett (Abd TX Surgeon)
Dr. Philip Ruiz, Jr. (Pathologist)
Ms. Samantha Mitchell (OPO)
Ms. Carrie Comellas (TX Coordinator)
Ms. Linda Weiss (OPO laboratory)
Dr. Bernie Kozlovsky (Ex Officio, HRSA)
Dr. Susan Hocevar (Ex Officio, CDC)

Dr. Michael Green, Vice Chair (Peds TID)
Dr. Edward Dominguez (TID)
Dr. Michael Nalesnik (TX Pathologist)
Dr. Shimon Kusne (TID)
Dr. Rachel Miller (TID)
Dr. Volker Nickeleith (Pathologist)
Dr. Martha Pavlakis (Nephrologist)
Dr. Michael Souter (OPO Med Dir)
Dr. Russ Wiesner (Hepatologist)
Mr. Barry Friedman (TX Administrator)
Dr. Jim Bowman (Ex Officio, HRSA)
Ms. Raelene Skerda (Ex Officio, HRSA)

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Questions?

Emily Blumberg, MD  
- Univ of PA Med Center  
- 215-662-7066  
- blumbere@mail.med.upenn.edu

Shandie Covington
- UNOS  
- 804-782-4929  
- shandie.covington@unos.org

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Thanks!

Chair: Emily Blumberg, MD
Vice Chair: Michael Green, MD

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