



ASTS Responses to OPTN Proposals Open for Public Comment

September 28, 2022

Update Data Collection for Lung Mortality Models

The American Society of Transplant is pleased to provide the following feedback to the OPTN Lung Transplantation Committee.

Are the proposed data changes and data definitions clear?

Yes, for the most part.

Under prior lung surgery:

VATS is a technique used for surgery and not a type of operation itself. The data collection should be modified to whether each of the surgeries performed was done VATS or open (i.e., VATS lobectomy vs. open lobectomy, VATS wedge resection vs. open wedge resection, etc.)

What clinical parameters, if any, would you add to the diagnosis-specific data definitions of exacerbations?

The need for hospitalization might be a marker for more serious deterioration and should be included for exacerbations of COPD and CF. For example: did some of the exacerbations require hospitalization (yes/no). Alternatively, the number of exacerbations that required hospitalization in the last year, as well as total number of exacerbations.

Is it clear how data should be submitted related to assisted ventilation and supplemental oxygen, and how values entered in these fields or other assigned values will be incorporated into the lung CAS?

Yes, the proposal is clear. The exact definitions will need to be made clear to programs at the site of data collection so that the individual entering the data is able to do so correctly. The data is burdensome, but it is understandable why it should be collected. In the future OPTN should seek to simplify this if possible.

Are there any other clinical criteria that should be added to better estimate a candidate's waiting list survival or post-transplant outcomes?

Simple measures of frailty should be collected; there is growing literature that these may be predictive of waitlist mortality and perhaps post-transplant mortality.

Should any of the proposed clinical criteria not be included in the OPTN Waiting List?

No.

Is there a need to retain any of the clinical criteria proposed for removal?

No.

ASTS Position: Support