

JAMES ALCORN

Senior Policy Strategist at United Network for Organ Sharing (UNOS)



Title

Prioritizing Organ Transplant Allocation using AHP

PRESENTATION: FRIDAY, DEC 16, 1:00- 2:00 PM (EST)

Biography

James has been a leader in organ transplant policy for more than a decade, responsible for the policy department and strategy for the nation's transplant system. At UNOS, he has been responsible for every aspect of how the country determines how to allocate resources in accordance with federal laws and regulations.

He is an expert in the management and operations of a policy department within a federally contracted healthcare system. He is responsible for engaging with policy oversight bodies, boards of directors, the US Department of Health and Human Services, and Health Services and Resources Administration. And he supports the public and the transplant community in participating in the policy development process.

<https://optn.transplant.hrsa.gov/policies-bylaws/a-closer-look/continuous-distribution/>

Abstract

Organ transplantation is a complex field with multiple goals governed by federal laws, clinical science, and normative ethics. In the United States, the organ transplant system is administered by the Organ Procurement and Transplantation Network (OPTN). Federal law charges the OPTN with developing and implementing the allocation rules by which donor organs are matched with candidates needing an organ transplant. The order in which organs are offered and received is literally a life-and-death decision.

Over the last few decades, several authors have published different approaches to develop these allocation policies using different multi-criteria decision making (MCDM) methodologies, including AHP. Recently, the OPTN began a generational change in the development of the transplant allocation policies to be more equitable, nimble, and transparent with the community. After discussion, the OPTN chose to use an AHP exercise to collect information from the transplant community about balancing these competing goals. The OPTN has conducted three AHP exercises (regarding lung, kidney, and pancreas transplantation) and is planning for two more AHP exercises (regarding liver and heart transplantation). Hundreds of transplant community members participated in the previous AHP exercise giving the OPTN new insights into the transplant community's priorities. With each AHP exercise, the OPTN has learned more about utilizing this information and made adjustments to the exercise, its analysis, and its role in developing transplantation policies. Initial modeling showed that the new policies will lower waiting mortality by over one-third while also having a more organ placement efficient system.

Our plenary will showcase the complexities of organ transplantation and the real-world experience of conducting AHP exercises with a large, diverse participation pool governed by multiple goals.