

# Proposal to Add Serum Sodium to the MELD Score (MELD-Na)

*Liver and Intestine Committee  
David Mulligan, Chair  
June 23-24, 2014*

# Strategic Plan

Goal: Increase Access to Transplants

This proposal will better prioritize those candidates most in need of liver transplantation.

# Proposal to Add Serum Sodium to the MELD Score (MELD-Na)

- Not Approved During November 2013 Board Meeting
- Board Concerns
  - Application of glucose correction
  - Cost of reprogramming (per livers saved)
  - Sharma abstract – association between Na<sup>+</sup> and LT survival benefit limited to candidates with MELD ≥20
- Invited a L/I Committee response

# MELD-Na

- Committee remains in favor of MELD-Na
- Abstract: Did not assess benefit at various combinations of MELD and Na+.
  - MELD-Na proposal uses 125-135 range only – not addressed in abstract which used Na+ quartiles.
- Published papers – sodium not associated with poor post-transplant outcomes
  - Fisher et al
  - Kim, et al

# MELD-Na – Supporting Evidence

- OPTN Data
  - 2/3 of candidates with low Na have calculated MELD <20
- LSAM model
  - Most of the predicted lives saved were in candidates with MELD <20
- Restricting policy to MELD  $\geq$  20 negates impact
- One-third of all exception requests are fluid-related, which should be addressed by MELD-Na

Committee vote: 21 in favor, 0 opposed, 0 abstentions.

# Resolution 15

**RESOLVED**, that modifications to Policy 9.1.D (MELD Score), shall be amended as set forth in Resolution 15, effective pending programming and notice to OPTN membership.

*\*Page 74 of the Board book*