February 4, 2026

At NEUN, we are committed to providing the best possible care for all children in need of organ transplants, including those facing the most complex medical challenges.

In the latest SRTR report released on January 6, 2026, our pediatric liver transplant program was flagged for review based on pre-transplant mortality data. We want to provide context for this data and explain why we believe it does not fairly represent the unique challenges of caring for children awaiting multiple organ transplants.

All three patients included in this metric were listed for multiple organs—specifically liver, intestine, and pancreas. These "multivisceral" cases are among the most complex in pediatric transplantation. While national reporting systems try to adjust for medical complexity, they currently don't account for the added risks of multi-organ listings. This means these children's outcomes are being compared to those of children waiting for a liver alone, which is not a fair or accurate comparison.

Importantly, NEUN has had no pre-transplant deaths among children waiting for liver alone in recent years.

Children needing multivisceral transplants face added challenges—they often require rare, size-matched donors and cannot receive partial or living donor transplants. These factors greatly limit their access to transplant opportunities, making their cases even more time-sensitive and complex.

Despite this, current national reporting holds transplant programs accountable for these cases without fully recognizing the added risks. We believe it's only fair that children awaiting multiple organs be treated consistently in data reporting—just as they are already excluded from some post-transplant outcome metrics.

At NEUN, we stand behind the care we provide to these vulnerable children and will continue to advocate for changes that bring greater fairness, transparency, and understanding to transplant reporting systems.

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