



Science Advancement & Outreach  
A DIVISION OF PETA

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## **National Institute of Allergy and Infectious Diseases Request for Information on Clinical Trials in Organ Transplantation Program**

**Notice Number: NOT-AI-25-042**

**Submitted by email on January 16, 2026.**

We're writing on behalf of People for the Ethical Treatment of Animals—PETA entities have more than 10 million members and supporters globally, and PETA U.S. is the largest animal rights organization in the world—to make recommendations on improving outcomes in pediatric and adult solid organ transplant candidates and recipients through the next Clinical Trials in Organ Transplantation (CTOT) cooperative research initiative.

Historically, Notices of Funding Opportunities for the CTOT program have explicitly excluded xenotransplantation studies, and this exclusion should remain in place. Xenotransplantation raises significant ethical concerns, animal welfare issues, and unresolved immunologic and infectious risk profiles. Instead, CTOT should continue to prioritize optimizing the existing allotransplantation framework and strategies to expand the human donor pool.

CTOT should support critical research on Donation after Circulatory Death (DCD), as the Health Resources and Services Administration recently directed the Organ Procurement and Transplantation Network to propose policies to strengthen DCD operations.<sup>1</sup> This proposal identified a need to update DCD processes and disclosures.<sup>2</sup> CTOT should explore how to implement practices that enhance transparency and build public confidence, fostering greater acceptance of DCD as an ethical way to increase organ availability.

Additionally, CTOT should support the evaluation of advanced organ preservation technologies, such as *ex vivo* normothermic perfusion, to reduce discard rates and improve post-transplant graft function. Further, studies assessing risk-adjusted acceptance frameworks for extended-criteria organs are essential to determine whether expanded utilization can be achieved without significantly compromising outcomes, thereby increasing the pool of transplantable organs.

In summary, CTOT should prioritize research that strengthens the allotransplantation system and expands human organ availability without resorting to xenotransplantation.

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<sup>1</sup> Health Resources & Services Administration. HRSA directive for OPTN donation after circulatory death policy development. U.S. Department of Health & Human Services. Published May 28, 2025. Accessed January 11, 2026. <https://www.hrsa.gov/optn/policies-bylaws/public-comment/hrsa-directive-optn-donation-after-circulatory-death-policy-development>

<sup>2</sup> Health Resources & Services Administration. HRSA directive for OPTN donation after circulatory death policy development: policy proposal. U.S. Department of Health & Human Services. Published 2025. Accessed January 11, 2026. <https://www.hrsa.gov/sites/default/files/hrsa/optn/hrsa-directive-for-optn-dcd-policy-development-policy-proposal.pdf>