Reviewer's report

Title: Transplant eligibility for patients with affective and psychotic disorders: a review of practices and a call for justice

Version: 0 Date: 09 Jul 2017

Reviewer: Peter A. Shapiro

Reviewer's report:

The authors review the relatively sparse literature on transplant outcomes in patients with mental disorders, and compare these findings with the extant guidelines viewing mental disorders as relative or absolute contraindications to transplantation. (They don't describe their search strategy.) They highlight that a just allocation of scarce resources (organs) requires both fairness and considerations of utility, and argue that because there is no evidence that patients with affective and psychotic disorders are unable to satisfy the requirement of utility, they are deserving of fairness in allocation decisions. The real question is, can one predict on the basis of psychosocial or any other factors, at the time of evaluation for listing as a candidate for transplant, who will have such significant inability to adhere to the transplant regimen that survival is substantially reduced and therefore the utility criterion is not satisfied? The authors go on to call for national standardization of evaluation processes in order to avoid inter-institution variation in selection of candidates based on psychosocial criteria.

Most of this is thoroughly unobjectionable, although not very novel. No psychiatrist working in the field of organ transplantation has endorsed excluding patients from transplant candidacy on the basis of psychiatric diagnosis, and the published work on the PACT, the TERS, and, more recently, the SIPAT, has all aimed at understanding the patient's risk on the basis of more than diagnosis alone.

The authors have ignored the many cases of liver transplantation for acute hepatic failure immediately after suicide attempt by acetaminophen ingestion, and the many patients with alcohol-related liver failure who receive transplants despite not having achieved stable abstinence. These cases tend to undermine the argument that transplantation is denied to patients with affective illness, and the broader concern that false notions of utility may be the basis for denying transplants to the mentally ill.

Another source of inter-institution variability (and of variability within institutions) with respect to who is and who is not accepted as a candidate for transplant is the transplant program's recent experience. When programs are doing well, they tend to be more liberal about whom they will accept as a patient. When they are experiencing many deaths and complications, they tend to become more cautious. This is a dynamic human process that has to do with staff burnout in the face of extraordinarily demanding cases, threatened loss of accreditation if survival statistics fail
to stay above OPTN standards, and the availability in some places of other means of caring for
the patient—including other transplant programs! The authors would demonstrate a more
nuanced view of justice by acknowledging these sources of variation.

The manuscript is too long.

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

No

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Unable to assess

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

No

**Are you able to assess any statistics in the manuscript or would you recommend an
additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further
assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable
Declaration of competing interests
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

2. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

3. Do you hold or are you currently applying for any patents relating to the content of the manuscript?

4. Have you received reimbursements, fees, funding, or salary from an organization that holds or has applied for patents relating to the content of the manuscript?

5. Do you have any other financial competing interests?

6. Do you have any non-financial competing interests in relation to this paper?

If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

I declare I have no competing interests.

I agree to the open peer review policy of the journal. I understand that my name will be included on my report to the authors and, if the manuscript is accepted for publication, my named report including any attachments I upload will be posted on the website along with the authors' responses. I agree for my report to be made available under an Open Access Creative Commons CC-BY license (http://creativecommons.org/licenses/by/4.0/). I understand that any comments which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

I agree to the open peer review policy of the journal