



LUTX: Requirements

UKKJ-FM

gültig ab:01.07.2020 Version: 04 Seite 1 von 1

Vienna, July 2020

Dear colleagues!

In order to ensure optimal care of children and adolescents with terminal respiratory insufficiency for whom lung transplantation might represent a life prolongation and quality of life improvement the following requirements and recommendations must be guaranteed by the centres of post-transplant care:

- 1. Comprehensive and repeated education of the patient and the parents on the possibilities and limitations of a lung transplantation in children and adolescents (risk of transplant surgery procedure, mean organ survival of about 4-5 years, life-long medication with immunosuppressive drugs with repeated blood level measurements, repeated bronchoscopies with biopsies as needed, need of tight connection to a post-transplant centre for children and adolescents ensuring all diagnostic and therapeutic tools).
- 2. Clarification of the medical treatment options in the area patients are living. In particular it must be required, that a specialized centre guarantees access to immunsuppressive drug level measurements, has access to bronchoscopy during day/night, can process lung biopsies in a specialized histo-pathology unit, has access to microbiological, virological and parasitological culture conditions, can provide lung function measurement for children and adolescents by bodyplethysmography. It is extremely important that a nominated doctor or a team is assigned for the patient care.
- 3. Proximity of the parents living place to the centre should be clarified. The monetary burden should also be considered, since peri-transplantation costs are just covering a restricted part of the total costs. It should be omitted that patients/families become welfare cases due to underestimation of the total costs of patient care.
- 4. Prior to potential eligibility for lung transplantation at the Thoracic Transplantation Centre in Vienna, a pre-evaluation with a 3 day hospitalization at the Children´s Hospital of the Medical University of Vienna has to be arranged.

Considering all the above mentioned points we hope to improve the quality of children and adolescents in the pre-, peri- and post-transplantation phase.

Kindly yours

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