

Routine Surveillance Bronchoscopy At First-Month In Lung Transplantation Recipients – A One Year Single Center Experience Analysis



A Crutu¹, A Hanna¹, V de Montpreville¹, V Florea¹, P Pradere¹, S Feuillet¹, G Dauriat¹, J Le Pavec^{1,2} and E Fadel^{1,2}

¹Hôpital Marie Lannelongue, ²Université Paris Sud

Background

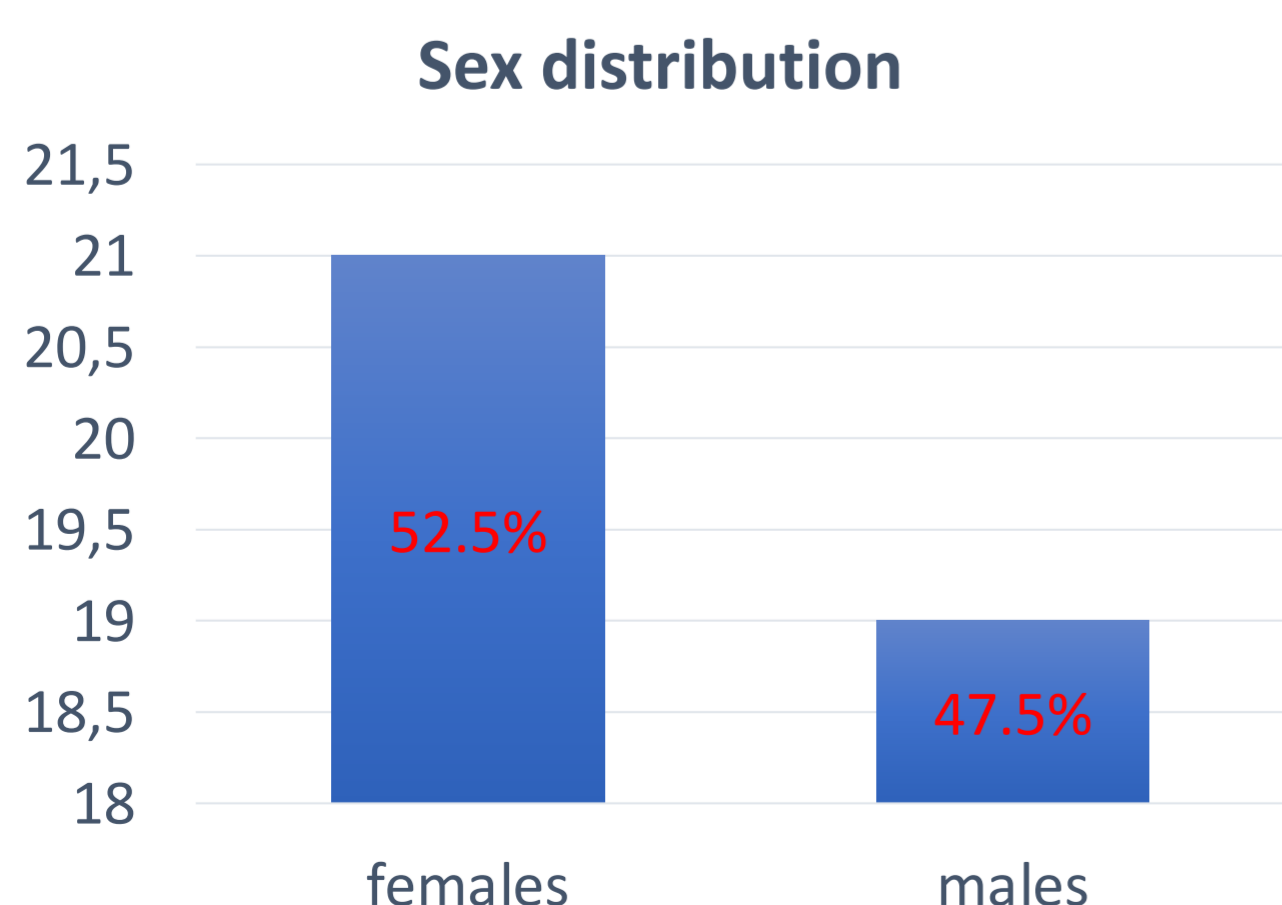
- Bronchoscopy with transbronchial biopsy (TBBX) remains the current “gold standard” for the diagnosis of the acute cellular rejection (ACR), which represents one of the most important risk factors for the chronic allograft dysfunction.
- Early detection of asymptomatic ACR episodes may play a role in its prevention.
- The aim of our study was to identify the number of ACR detected in routine surveillance bronchoscopy (SB).
- This study, however, did not assess the impact of surveillance bronchoscopy on the development of BOS and survival

Methods

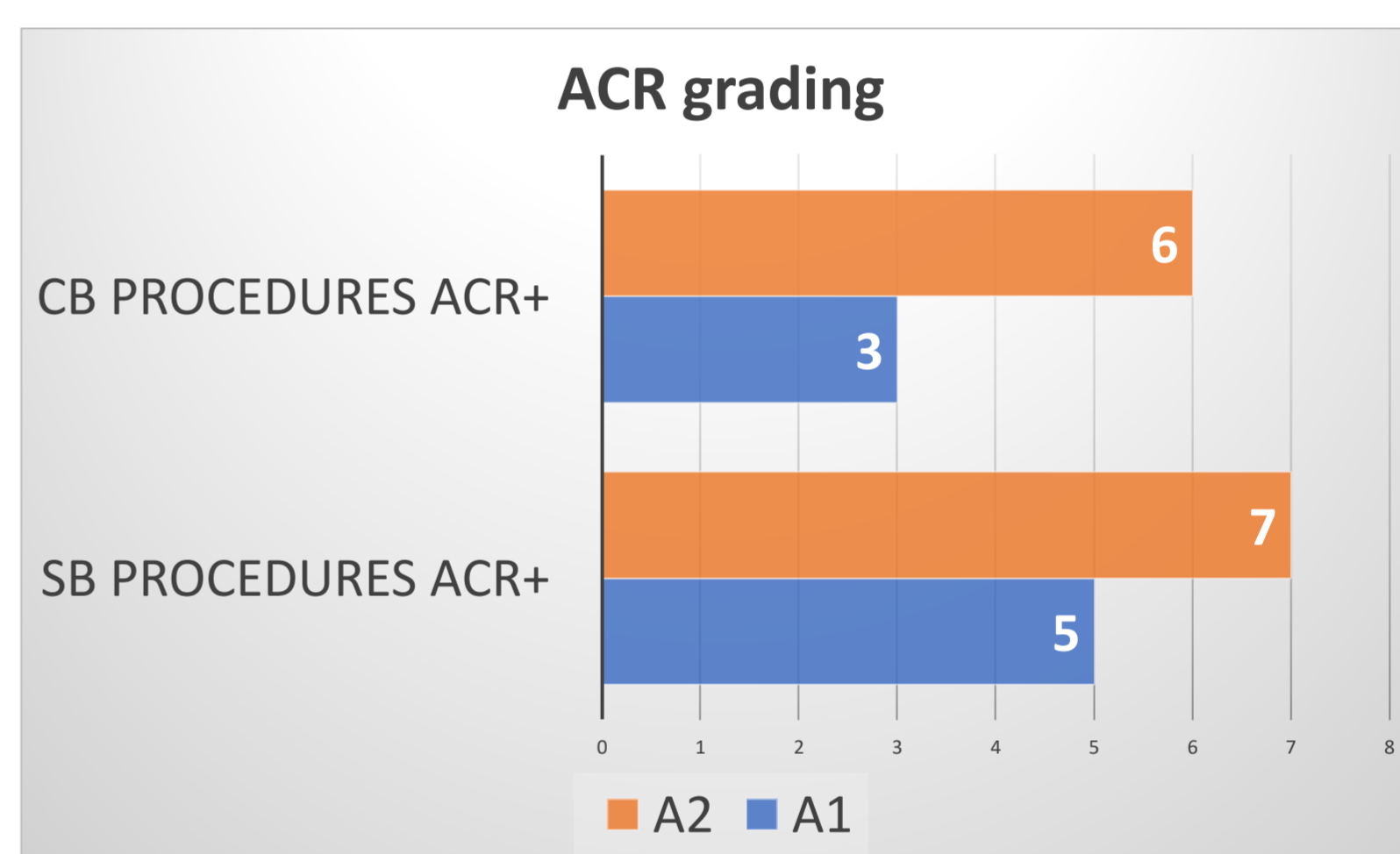
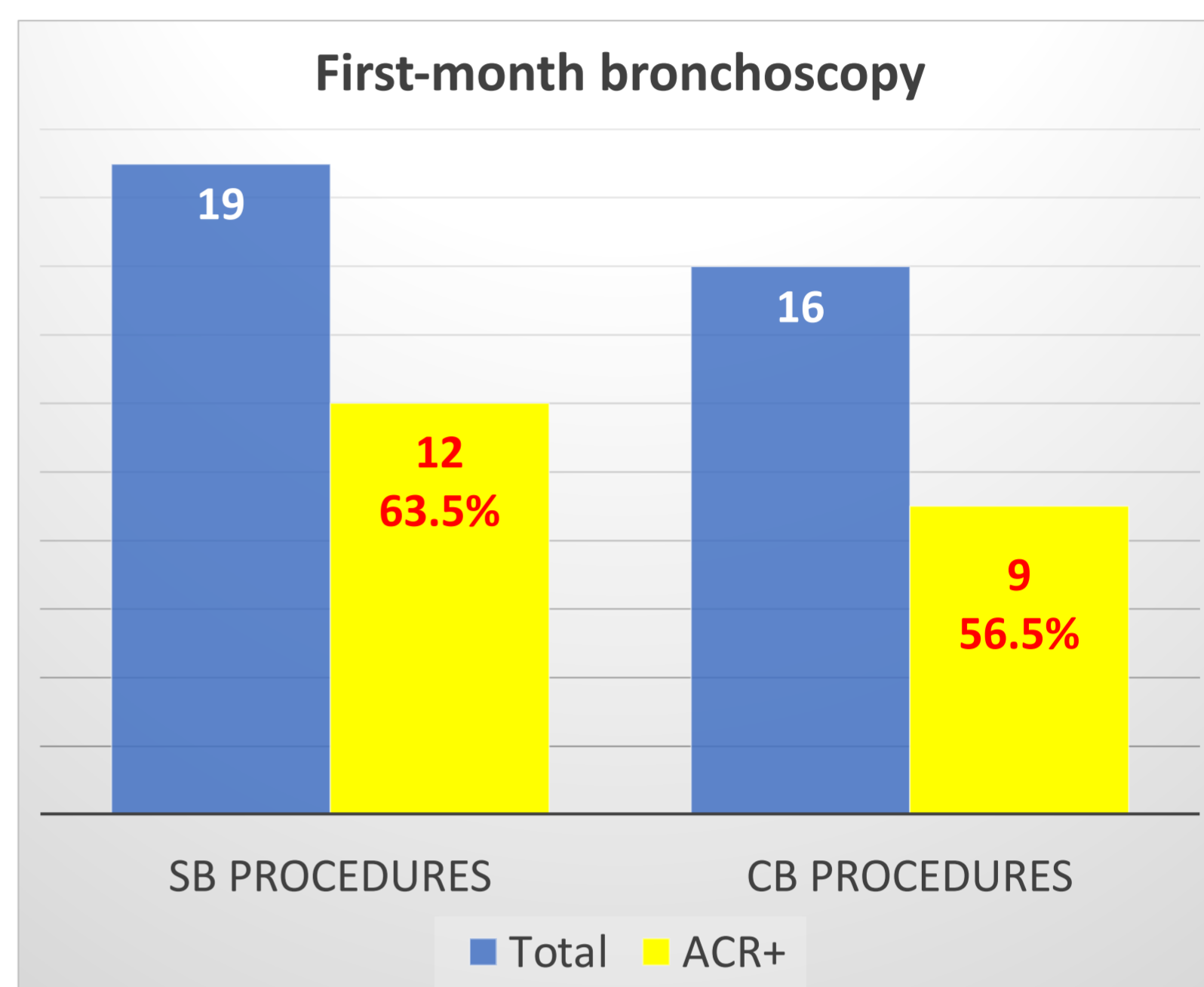
- In our center we perform a routine SB with TBBX at first-month after lung transplant (LTx) for all asymptomatic patients. The lung transplant recipients can have, at any time, a clinically indicated bronchoscopy (CB).
- We performed a retrospective analysis of the data concerning the 40 patients that had lung transplant during the calendar year of 2021. The bronchoscopy procedures performed at first-month post-transplant were analysed and the number of ACR was recorded.
- TBBX were performed using serrated forceps blindly positioned without fluoroscopic control. Five biopsy samples were taken if possible and analysed by an experienced pathologist. Biopsy was graded A0 to A4 and B0 to B4 (B2 R after 2007) according to the current recommendations.

Results

- 40 bilateral LTx in 2021 in our center
- Main indication PAH



- 5 patients excluded from the analysis



- no major complications and no death

Conclusions

- In our experience the information obtained by the surveillance bronchoscopy at first-month post-transplant influenced the therapeutic management in a significant number of cases.
- In the literature the role of surveillance bronchoscopy remains controversial and even more there is no consensus on the frequency in which we should be performing surveillance TBBX.
- An adequately powered multicentre prospective randomized controlled study comparing surveillance bronchoscopy to clinically indicated bronchoscopy is required.

Bibliography

1. Glanville AR. The role of bronchoscopic surveillance monitoring in the care of lung transplant recipients. *Semin Respir Crit Care Med* 2006;
2. Benzimra M. Surveillance Bronchoscopy: Is It Still Relevant? *Semin Respir Crit Care Med* 2018;
3. McWilliams TJ, Williams TJ, Whitford HM, Snell GI. Surveillance bronchoscopy in lung transplant recipients: risk versus benefit. *J Heart Lung Transplant* 2008;
4. Stewart S, Fishbein MC, Snell GI, et al. Revision of the 1996 working formulation for the standardization of nomenclature in the diagnosis of lung rejection. *J Heart Lung Transplant* 2007.