
primary studies - published, non RCT

Lung transplant outcomes in cystic fibrosis patients with pre-operative Mycobacterium abscessus respiratory infections.

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Study design (if review, criteria of inclusion for studies)

retrospective study

Participants

CF patients transplanted at the University of North Carolina from 1992 to 2012 were retrospectively examined. Patients with at least one respiratory sample positive for *M. abscessus* prior to transplantation were included.

Interventions

Lung transplantation

Outcome measures

post-transplant complications, and survival.

Main results

At transplant, mean age was 24.6 yr, mean BMI was 18.1 kg/m², six had 3+ positive smears for *M. abscessus*, and three were ventilator dependent. All met American Thoracic Society microbiological criteria for disease pre-transplant. Three patients developed *M. abscessus*-related complications, with clearance of the organism following treatment. Survival post-transplant shows 77% alive at one yr, 64% at three yr, and 50% at five yr; none died of *M. abscessus*. The survival data showed no statistically significant difference ($p = 0.8$) compared with a contemporaneously transplanted population of CF patients without *M. abscessus* ($n = 154$).

Authors' conclusions

Lung transplantation, with favorable survival, is possible in CF patients with *M. abscessus*. Even if *M. abscessus* recurs, local control and clearance is possible.

<http://dx.doi.org/10.1111/ctr.12140>

See also

Clin Transplant. 2013 Jul-Aug;27(4):523-9. doi: 10.1111/ctr.12140. Epub 2013 May 26.

Keywords

Adult; Aged; Bacterial Infections; Infection; Mycobacteriosis; pharmacological_intervention; Respiratory Tract Diseases; Respiratory Tract Infections; Anti-Bacterial Agents; Lung Transplantation; non pharmacological intervention - surg; Respiratory Insufficiency; transplantation;