Poster presentation

Early outcome following single versus bilateral lung transplantation in recipients 60 years of age and older

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Introduction

Lung transplantation (LT) has been increasingly applied to patients over 60 years. The outcome of LT recipients in this age group has not been analyzed systematically. The purpose of this study was to evaluate the early mortality (30 days) in LT recipients older than 60 years according to the type of procedure (single vs bilateral LT).

Methods

We retrospectively reviewed our experience with older recipients between January 1999 and August 2007. The curves of survival were calculated by the Kaplan–Meier method and the comparison among curves was made by the log-rank method.

Results

During the study period 167 LT procedures were performed in 164 patients, of which 51 (30.5%) were aged 60 years and older (range 60–70, mean 63.3 \pm 2.4 years). Thirty-seven of the recipients 60 years and older received a single LT and 14 a bilateral LT. Indications included chronic obstructive pulmonary disease in 51% (26/51), idiopathic pulmonary fibrosis in 43% (22/51), and other in 6% (3/51). The 30-day survival was 84% (95% CI, 67–92%) for patients who underwent a single LT and 93% (95% CI, 59–99%) for patients who underwent a bilateral LT. No differences were observed between both curves of survival according to the log-rank test (P =

0.896). A Cox proportional hazards analysis for overall survival at 30 days showed a hazard ratio of 1.05 (95% CI, 0.46–2.38; P = 0.897) in the unilateral LT group.

Conclusion

The early survival of lung transplant recipients 60 years of age or older who underwent bilateral versus single LT is comparable. The type of procedure is not a predictor of mortality in this age group. In carefully selected recipients \geq 60 years of age, LT offers acceptable early survival.

References

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