



eSurvey

Pediatric transplantation in Europe during the COVID-19 pandemic:

Early impact on activity and healthcare

*Juan Manuel Torres Canizales, MD, PHDs.
La Paz University Hospital – Madrid (Spain)
ERN TransplantChild - Coordinator team*



**European
Reference
Network**

for rare or low prevalence
complex diseases

 **Network**

Transplantation
in Children

(ERN TRANSPLANT-CHILD)

Your Data

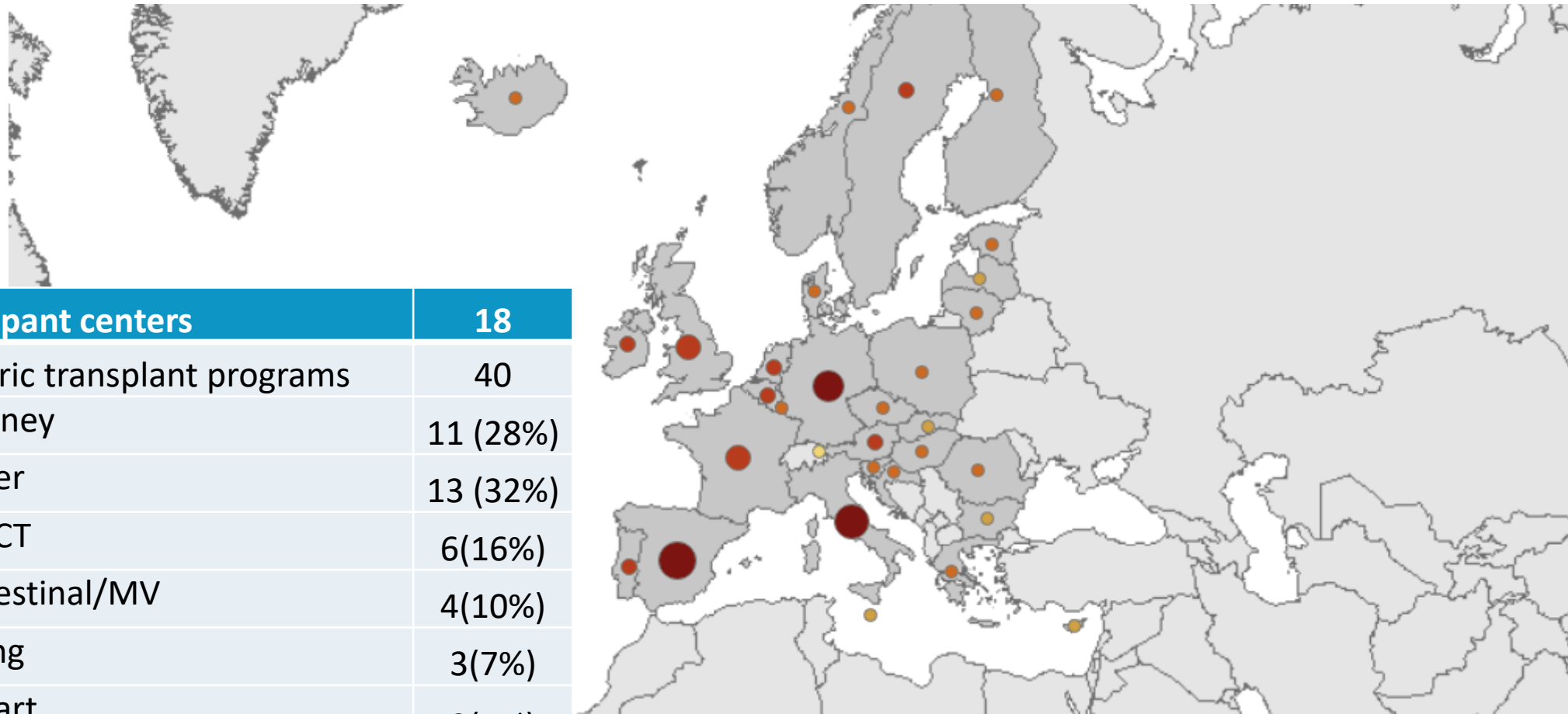


SURVEY RESULTS

Your Date Here

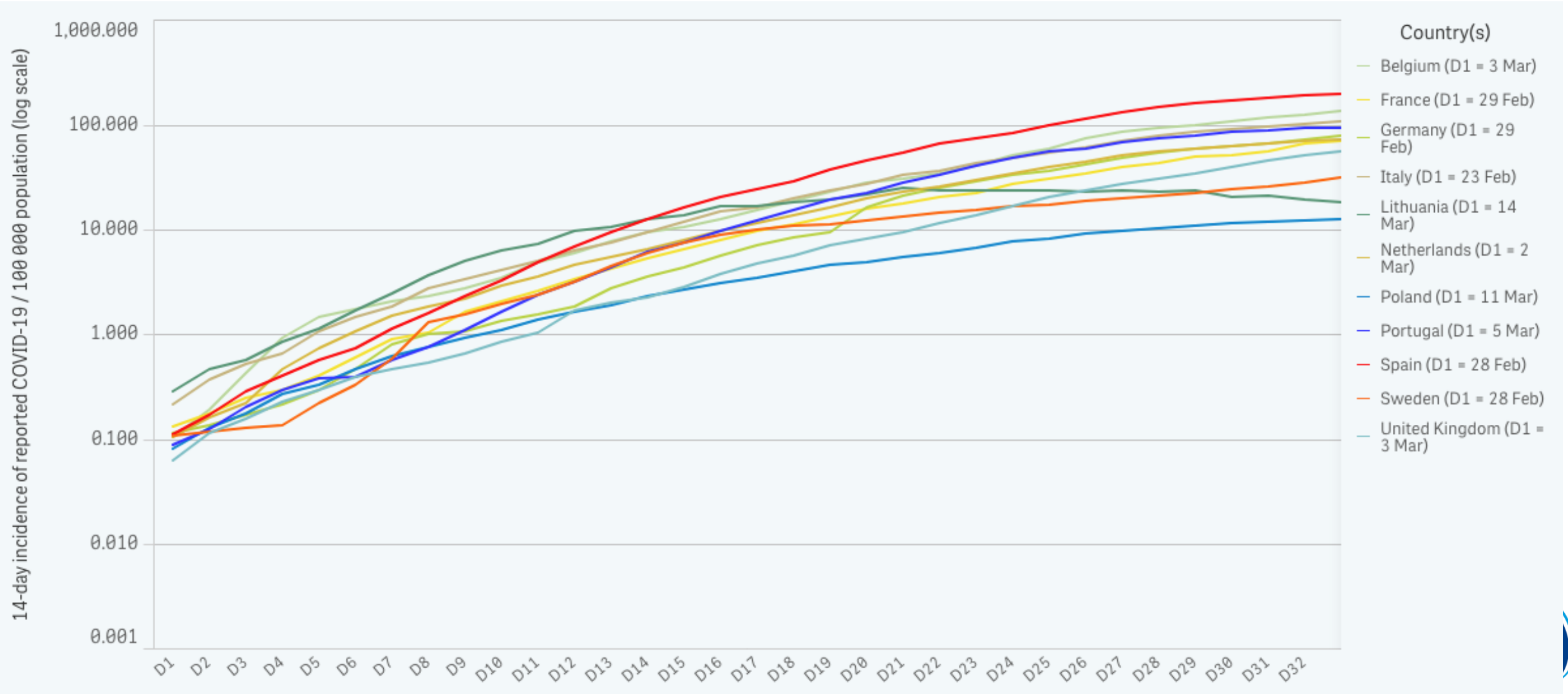
Your Footer Here

COVID-19 situation in Europe and participants



Participant centers	18
Pediatric transplant programs	40
Kidney	11 (28%)
Liver	13 (32%)
HSCT	6(16%)
Intestinal/MV	4(10%)
Lung	3(7%)
Heart	3(7%)

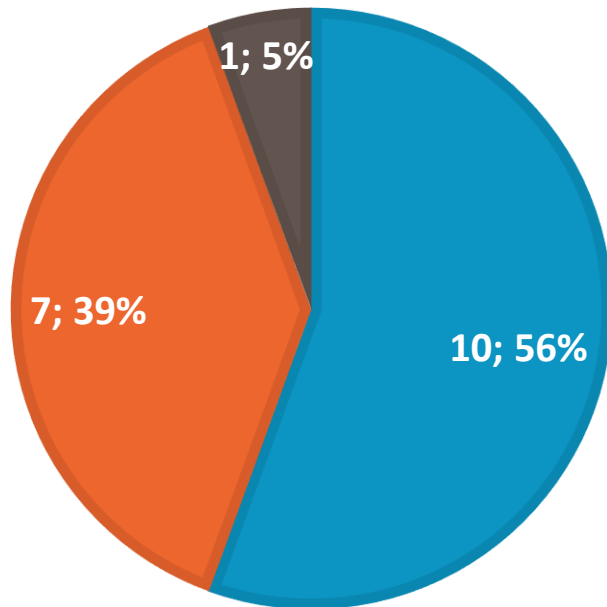
COVID-19 situation in Europe and participants



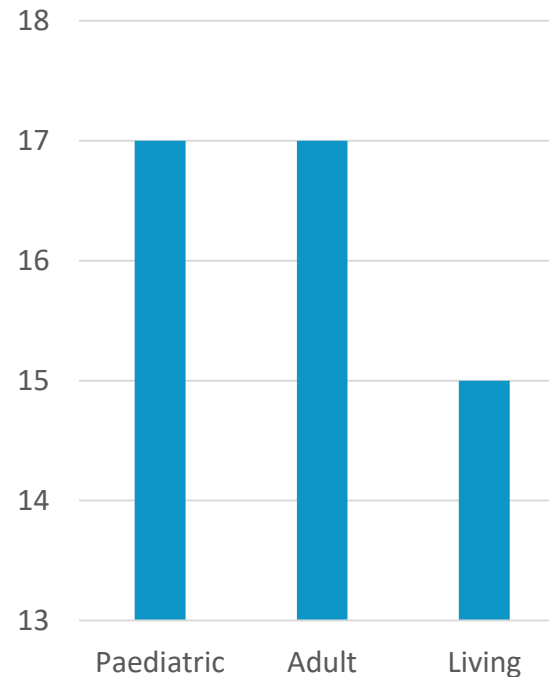
What was the situation during March in the TransplantChild members?

CURRENT PAEDIATRIC TRANSPLANTATION ACTIVITY

■ Active ■ Only for urgent patients ■ Stopped

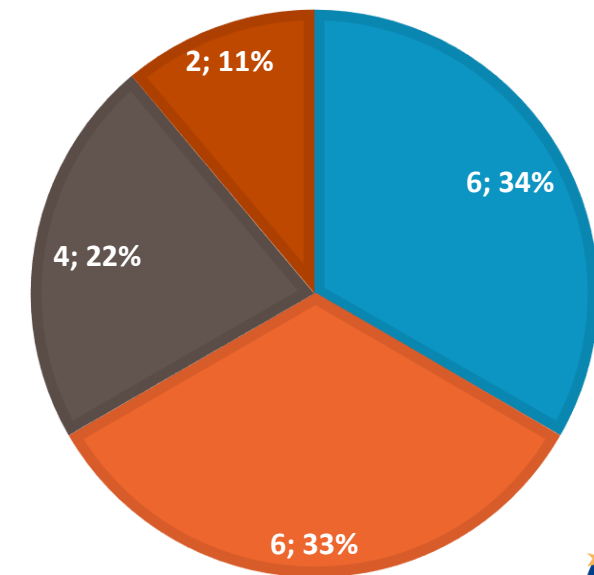


Types of donors



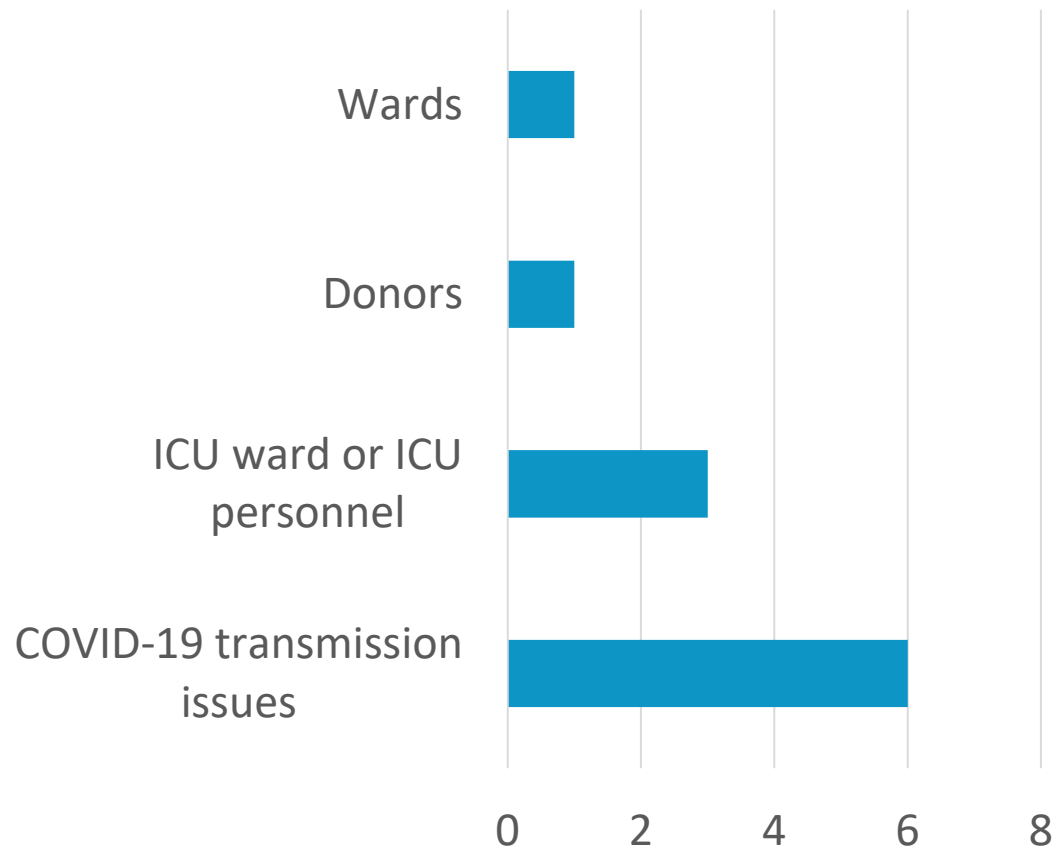
ACTIVITY REDUCED IN MARCH WITH RESPECT TO LAST YEAR

■ Decrease of 50% ■ No decrease
■ Decrease of 25% ■ Decrease of 75% or more



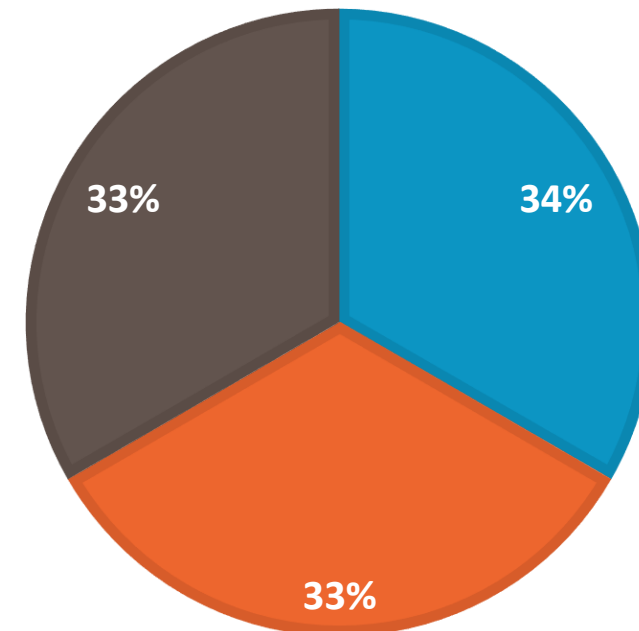
Why is paediatric transplantation activity impaired?

Only urgent transplantation due to:



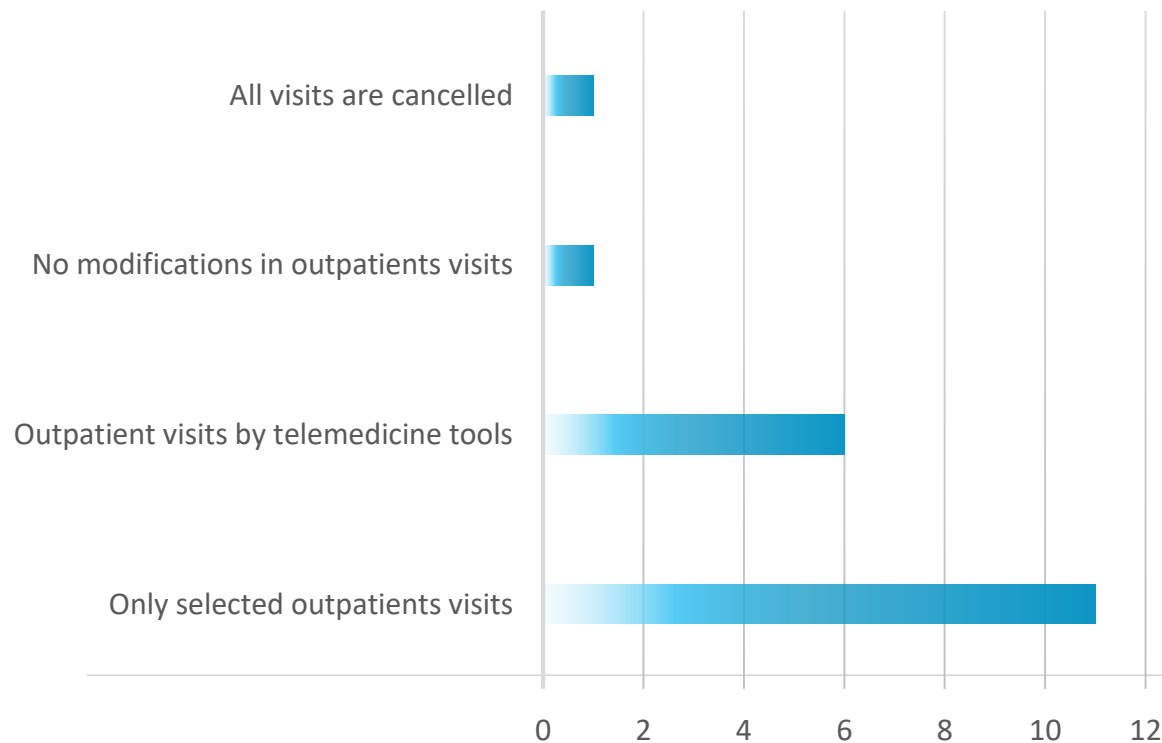
ACTIVITY STOPPED DUE TO:

■ ICU ward or ICU personnel ■ Surgeons ■ Clinicians

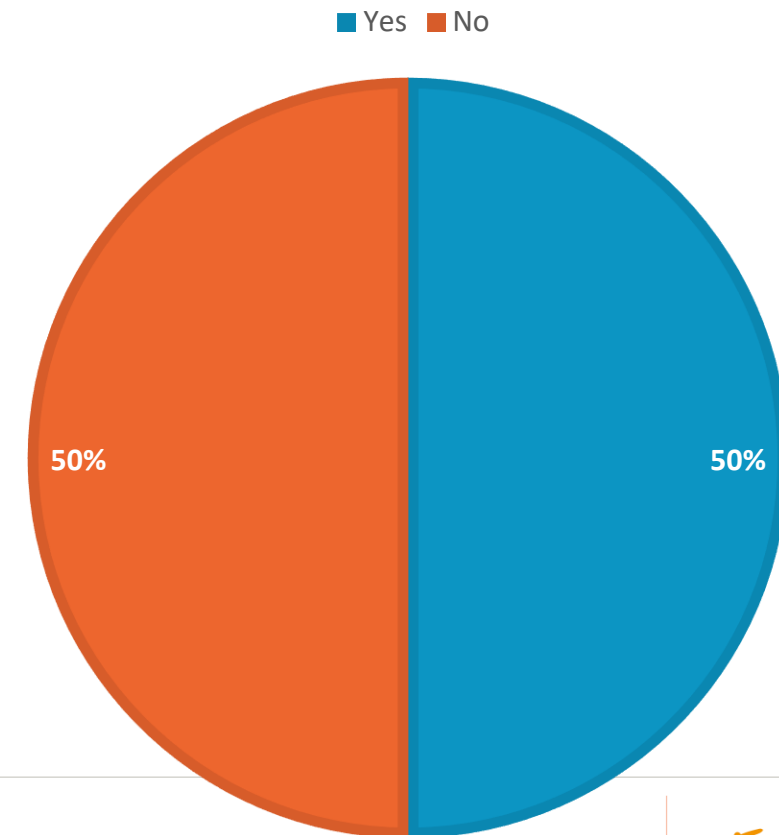


How was the management of outpatient visits?

MANAGEMENT OF NON-COVID-19 PATIENTS WITH THE PLANNED OUTPATIENT VISIT DURING THIS PANDEMIC



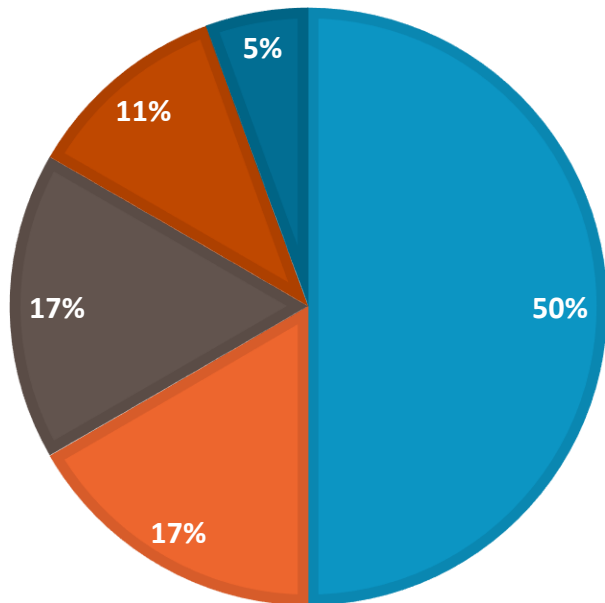
OUTPATIENTS VISITS ALLOWED ONLY AFTER A PRE-TRIAGE VISIT BY PHONE TO EXCLUDE EPIDEMIOLOGICALLY



What was the situation, per hospital, with COVID-19 patients?

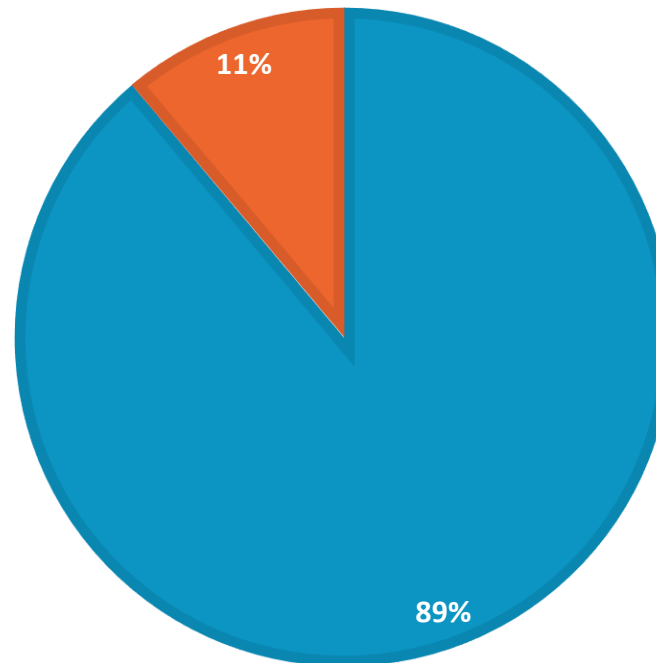
COVID-19 PAEDIATRIC PATIENTS PER CENTRE AT THE TIME OF THE SURVEY

■ 0-10 ■ 10-20 ■ 21-30 ■ More than 30 ■ No



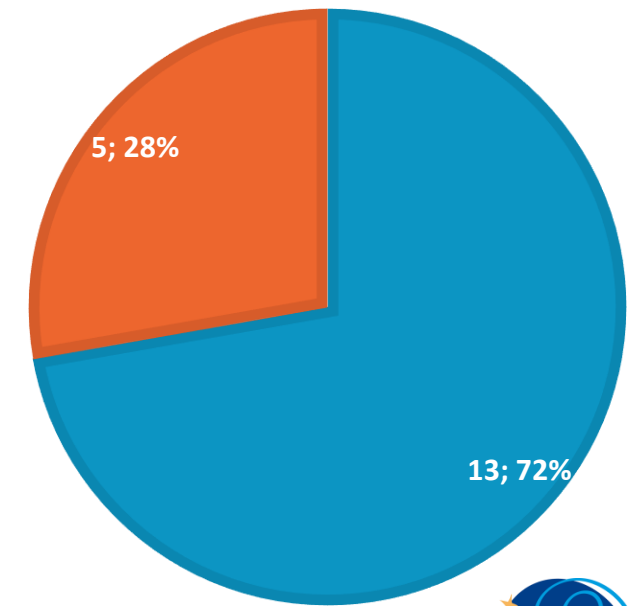
COVID-19 PAEDIATRIC PATIENTS THAT REQUIRED ICU

■ Below 5% ■ No

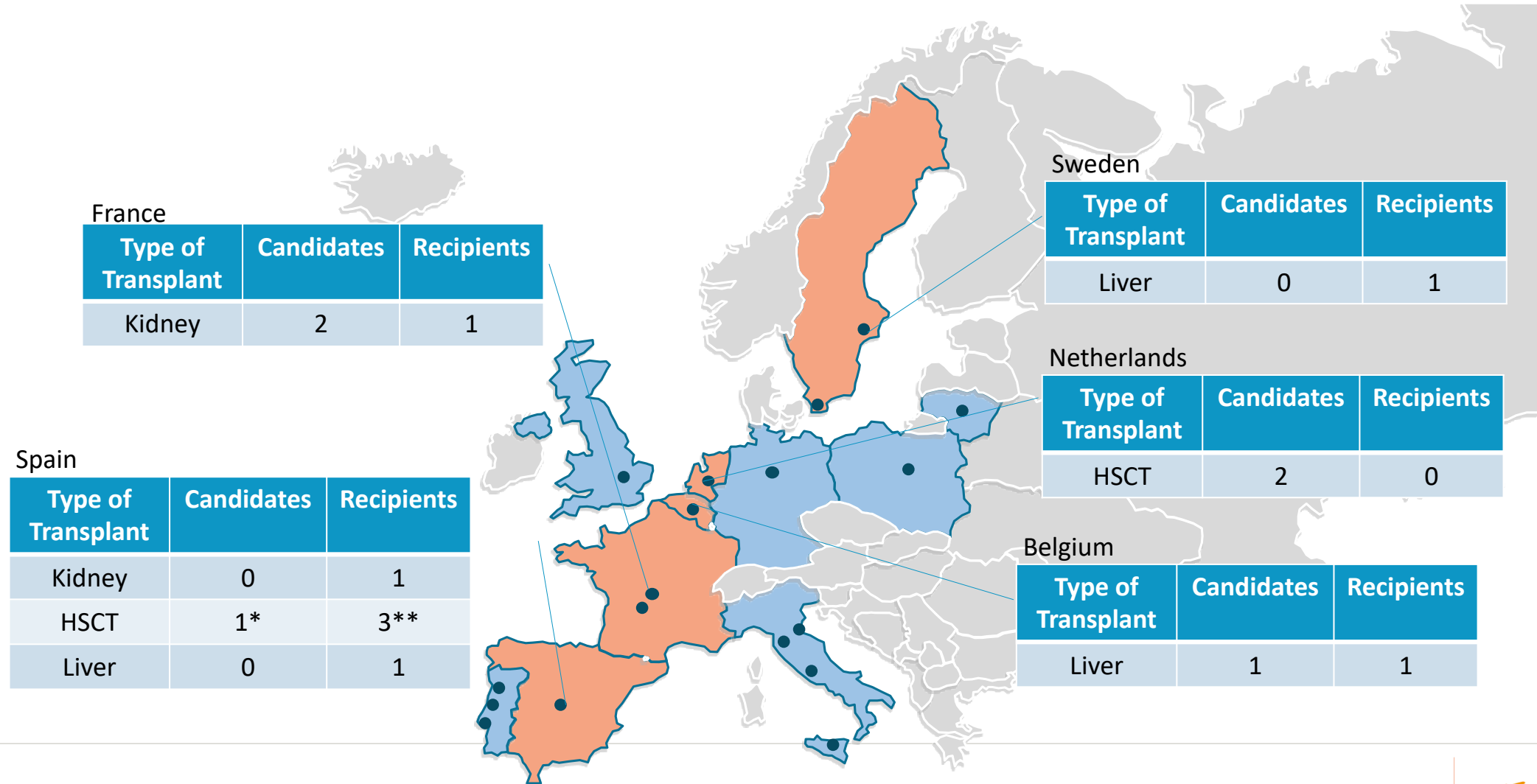


ANY COVID-19 POSITIVE AMONG TRANSPLANTED PATIENTS

■ No ■ Yes



COVID-19 cases in ERN-TransplantChild centers





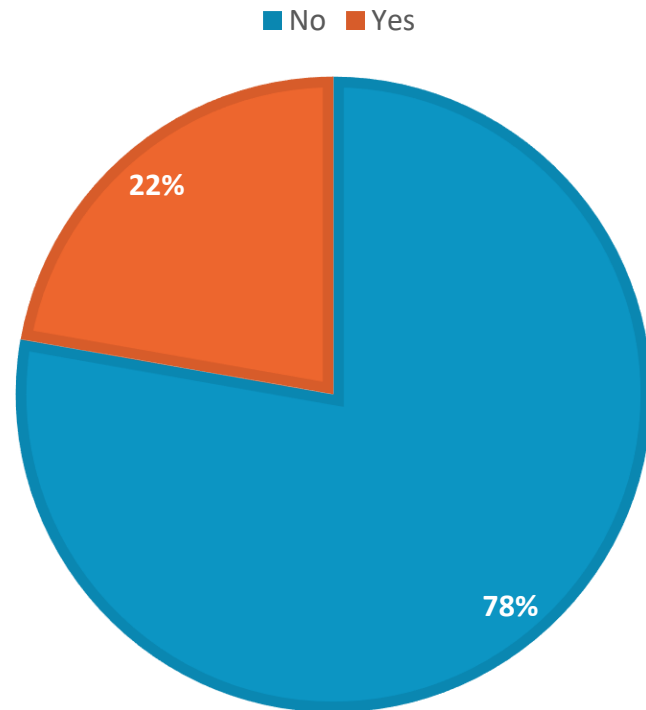
***STRATEGIES TO PREVENT AND MANAGE
SARS-COV-2 INFECTION AT THE
HOSPITAL LEVEL***

Your Date Here

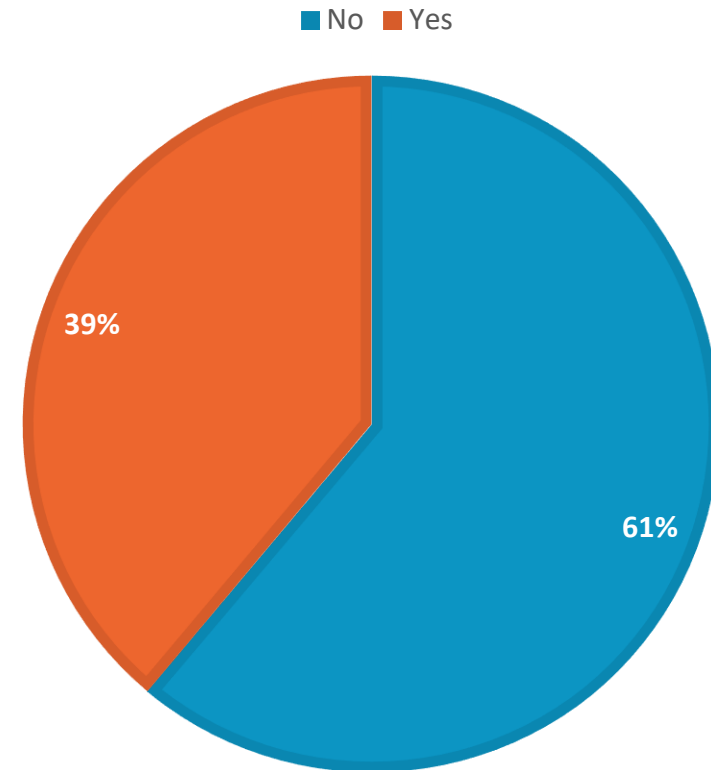
Your Footer Here

Are there protocols for paediatric transplanted patients with COVID-19?

COVID-19 PROTOCOL FOR PAEDIATRIC TRANSPLANT PATIENTS AVAILABLE IN THE COUNTRY

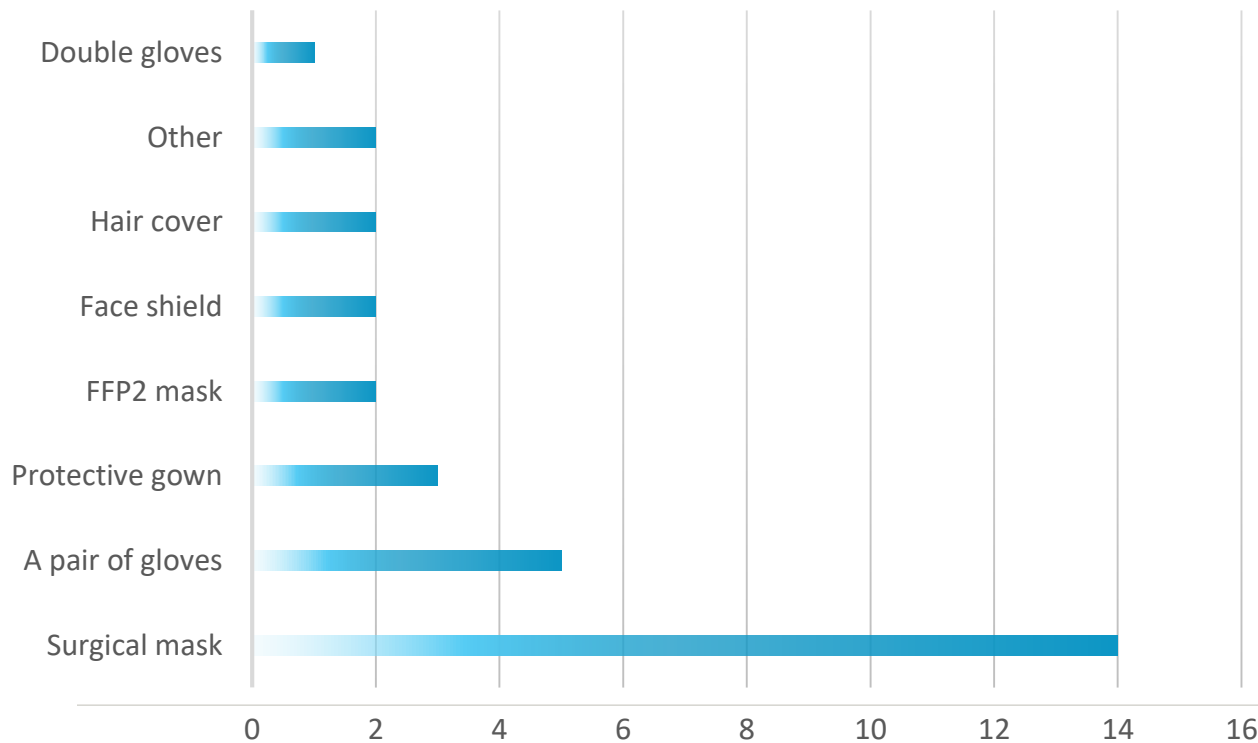


COVID-19 PROTOCOLS FOR PAEDIATRIC TRANSPLANT PATIENTS



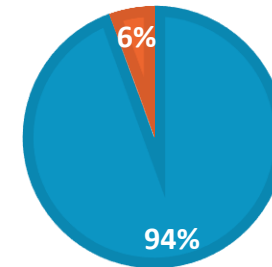
What is the level of protection during daily work?

WHAT TO WEAR DURING IN-HOSPITAL DAILY ACTIVITY (WHEN NOT EVALUATING CONFIRMED/SUSPECTED COVID PATIENTS)



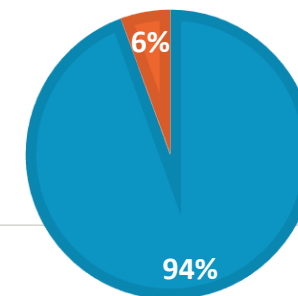
ACTIVE SURVEILLANCE FOR ALL HEALTH-CARE WORKERS

■ No ■ Yes, once



ACTIVE SURVEILLANCE FOR ALL HEALTH-CARE WORKERS DEALING WITH IMMUNOCOMPROMISED PATIENTS

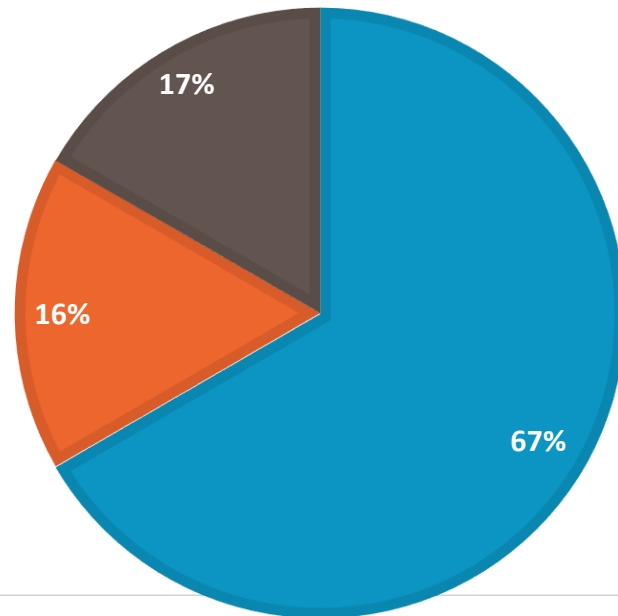
■ No ■ Yes, periodically



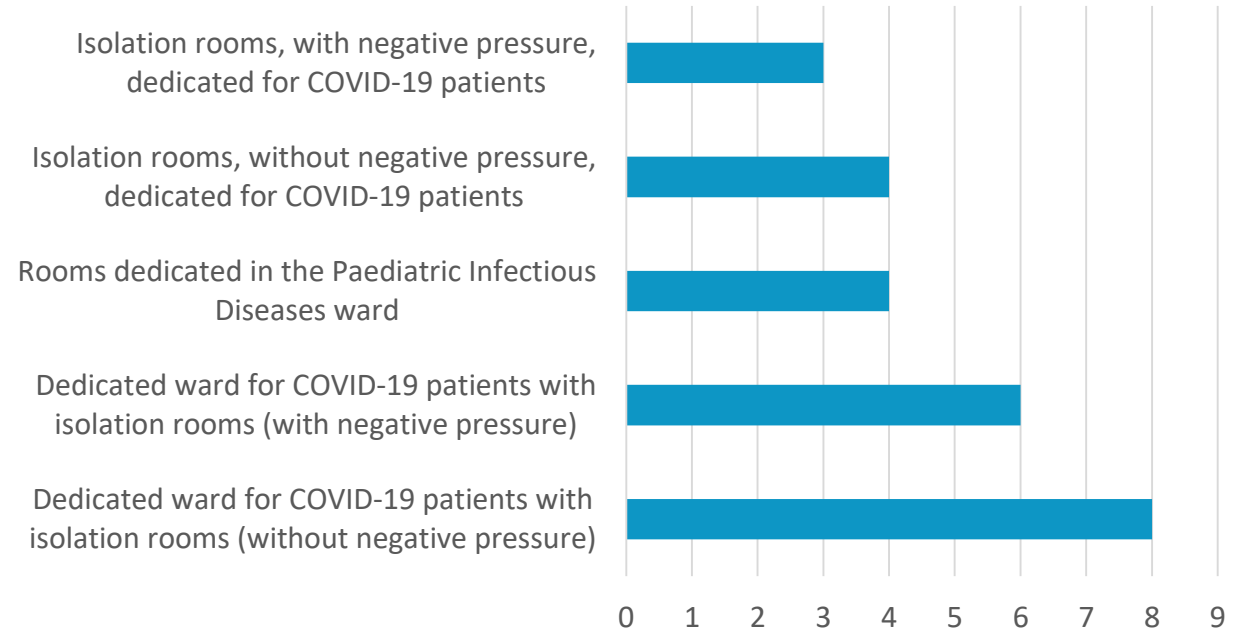
How was the management of COVID-19 patients?

MANAGEMENT OF SOT/HSCT PAEDIATRIC PATIENTS WITH SUSPECTED/CONFIRMED COVID-19

- If mildly symptomatic, discharged at home with a phone call follow-up
- All admitted for observation, regardless of symptoms
- Other



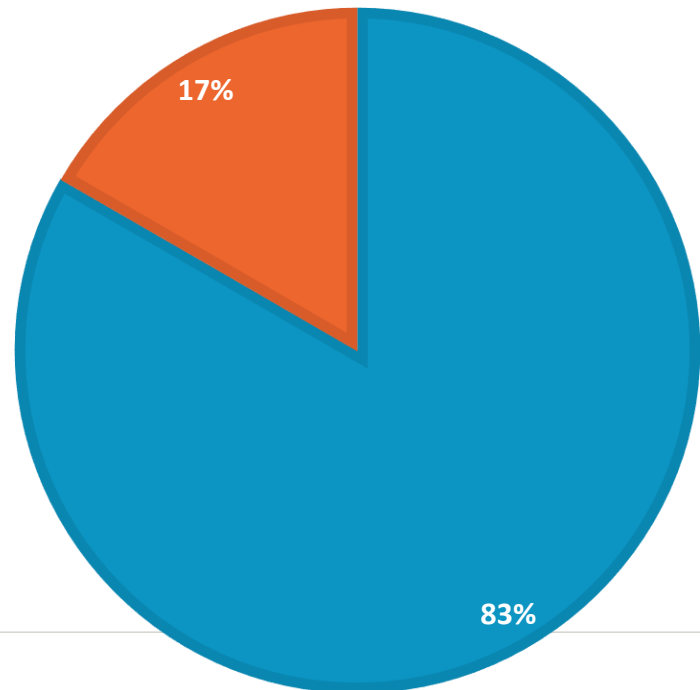
Where to admit clinically stable SOT/HSCT paediatric patients with suspected/confirmed COVID-19



How was the management of paediatric transplanted patients?

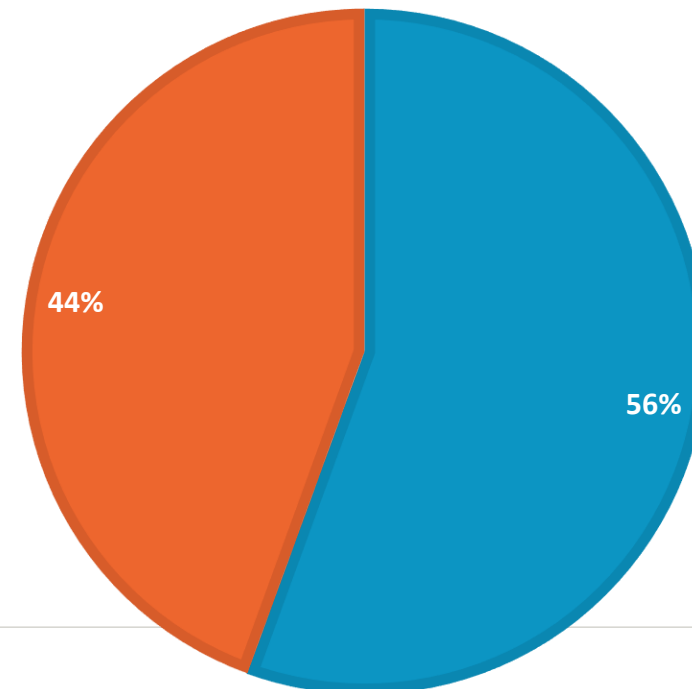
HOSPITAL ADMISSIONS FOR MEDICAL OR SURGICAL REASONS ARE ALLOWED ONLY AFTER A PRE-TRIAGE BY PHONE TO EXCLUDE EPIDEMIOLOGICAL

■ Yes ■ No



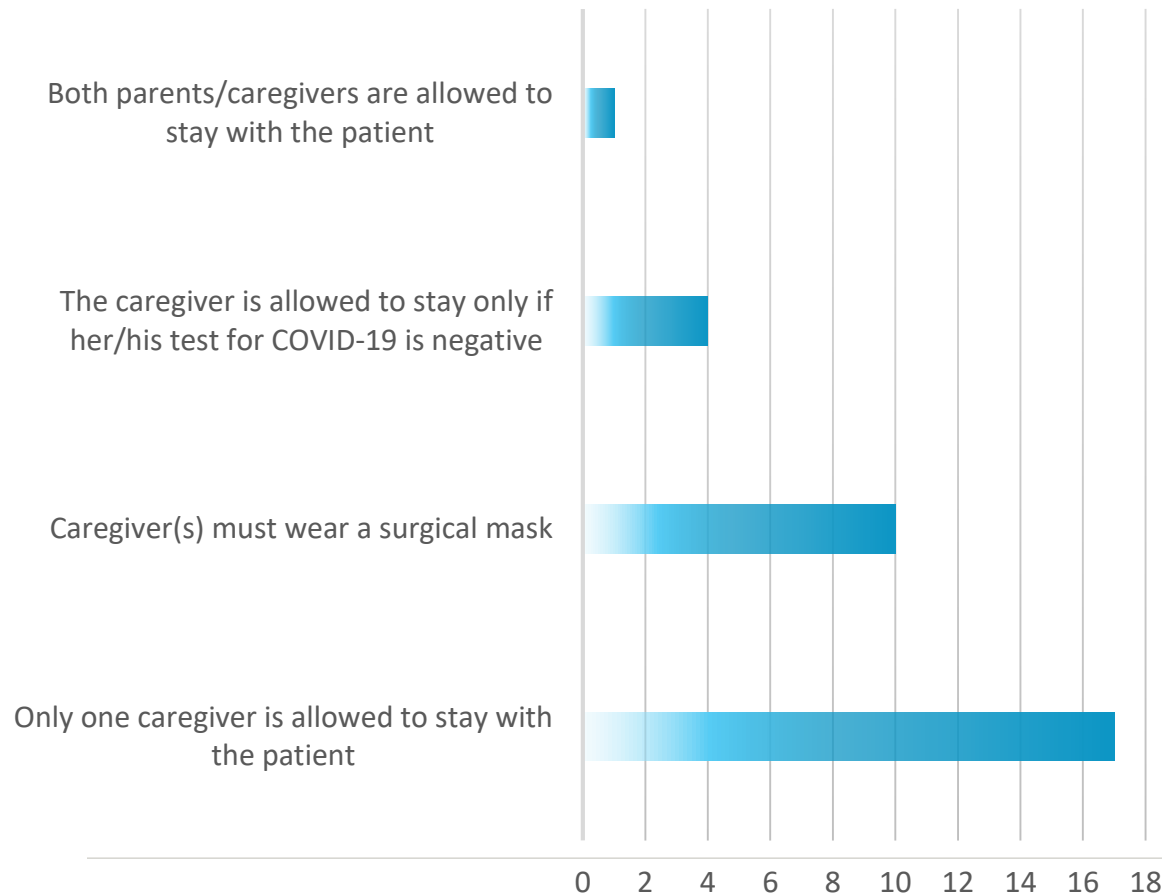
HOSPITAL ADMISSIONS FOR MEDICAL OR SURGICAL REASONS ARE ALLOWED ONLY AFTER A NEGATIVE NASOPHARYNGEAL SWAB OBTAINED

■ Yes ■ No

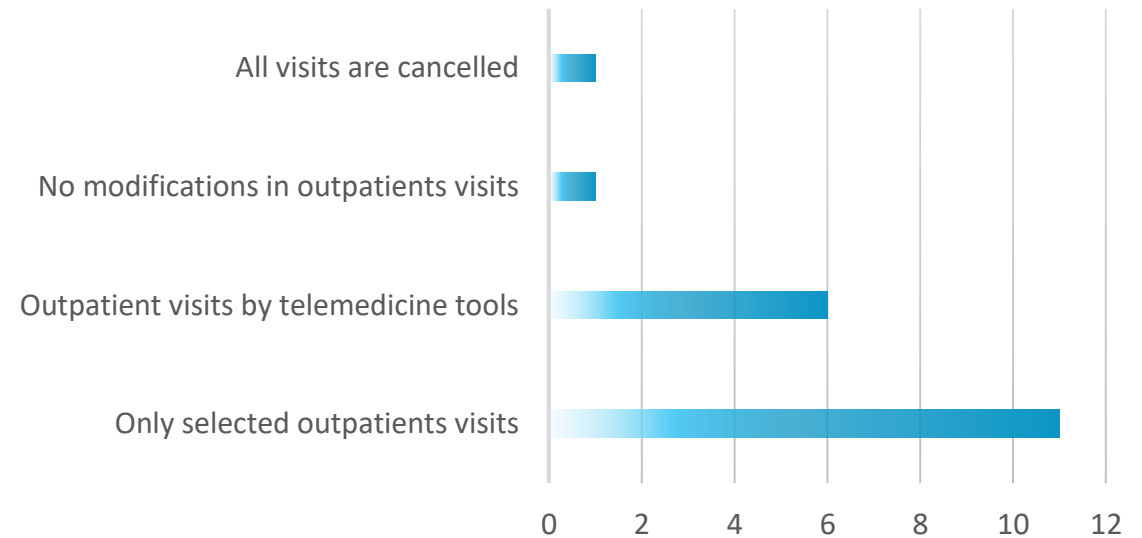


How was the management of paediatric transplanted patients?

CAREGIVER POLICY



MANAGEMENT OF NON-COVID-19 PATIENTS WITH THE PLANNED OUTPATIENT VISIT DURING THIS PANDEMIC





CONCLUSIONS

Your Date Here

Your Footer Here

Conclusions

- This is the first study offering a European snapshot of the large variations in healthcare organizations, early practices, and perceptions of health care workers actively working in the field of paediatric SOT and HSCT during the COVID-19 pandemic. As highlighted by the survey, paediatric transplantation activity as well as outpatient visits were substantially negatively affected by the COVID-19 pandemic across Europe.
- The long-term continuation of these limitations in healthcare resources may have severe consequences both for children on the transplant waiting list and for paediatric transplant recipients due to reduced access to close monitoring and diagnostic testing.
- Telemedicine technologies have been rapidly introduced to support some activities such as remote patient monitoring and management. This technology was already reported as a potentially valuable tool for the follow up of transplant patients, but experience is limited only to the outpatients setting.
- The ongoing situation reflects the early impact of the COVID-19 spread, which seems to be a major worldwide challenge for the field of pediatric SOT and HSCT in the next future. There is a need to expand collaborations and data collection efforts, encourage discussions among experts, clinical trials, and evidence-based practices leading to consensus in addressing the long-term consequences of COVID-19 in pediatric transplant recipients and their families.



Hospital Universitario La Paz
Hospital de Cantoblanco
Hospital Carlos III

 **Comunidad de Madrid**



Coordinator Centre. Madrid, Spain

Transplantchild

Transplantation (SOT & HSCT) in Children

THANK YOU!

Do you have any questions?

coordination@transplantchild.eu

+34 917277576

More information:

www.transplantchild.eu

