



**Please indicate any Lung Failure/Transplantation topics you will be seeking information on in the next 12 months.**

- Ex vivo lung perfusion. **(25 responses)**
- CLAD assessment and treatment. **(20 responses)**
- dd-cfDNA. **(17 responses)**
- Immunosuppressive therapies. **(16 responses)**
- COVID related. **(13 responses)**
- DCD management and protocols. **(12 responses)**
- Antibody mediated rejection. **(11 responses)**
- OCS. **(7 responses)**
- Patient selection. **(7 responses)**
- Xenotransplantation. **(7 responses)**
- ECMO. **(6 responses)**
- DSA management. **(5 responses)**
- Infection risk and treatment. **(4 responses)**
- Influence of lung microbiome on post-transplant outcomes. **(4 responses)**
- Organ preservation solutions and devices. **(4 responses)**
- ECLS advances as bridging. **(3 responses)**
- Donor selection. **(3 responses)**
- Donor management. **(3 responses)**
- eNOSE **(3 responses)**
- End of life care for Lung transplant patients. **(2 responses)**
- Lobar transplant. **(2 responses)**
- Lung perfusion and preservation. **(2 responses)**
- LUNGguard Donor Lung Preservation System. **(2 responses)**
- More on coordinator/APRN role. **(2 responses)**
- Novel treatments for rejection. **(2 responses)**
- Pediatric lung transplant. **(2 responses)**
- Post-op management - critical care. **(2 responses)**
- Preservation solutions and devices. **(2 responses)**
- Pulmonary hypertension. **(2 responses)**
- Role of RV failure in Lung Transplantation. **(2 responses)**
- The same. **(2 responses)**
- Use of novel therapeutics. **(2 responses)**
- 10C lung preservation studies. TANRP.
- ACHD and LTx.
- Adult congenital heart disease, graft rejection.
- AMR/ACR.
- Antifibrotics post lung transplant – *pharmacy*.
- Applicability of the new technologies that endures the test of time and are proved to be of true utility and applicability in real-world clinical practice.



**Please indicate any Lung Failure/Transplantation topics you will be seeking information on in the next 12 months. -- *continued***

- Artificial Intelligence, lung organoids, Epithelial Mesenchymal transition.
- Assessment and management of frailty. Use of blood tests in monitoring.
- At home monitoring and video visits.
- Basic science and translational research in lung transplantation. Single cell RNAseq data in transplantation. Biomarkers: Can the community agree on key / high-priority biomarkers, these should be included in future studies, how can we move some of these from the research world into clinical practice. Ethics in research / scientific integrity / value of negative data: I worry that we are often tempted to value only "positive" data. I think there would be value to more openly discuss the importance of negative data, as well as the importance of setting up and conducting studies in rigorous ways, focusing on data integrity and avoidance of bias. I will propose a symposium on this topic. EVLP: standardization of sample collection during ex-vivo lung perfusion. I will suggest this.
- Cardiopulmonary effects of sarcoidosis as it relates to cardiopulmonary failure/transplantation. Pulmonology/heart failure and pulmonary vascular disease.
- Cardiothoracic Surgery - procurement organ preservation, biomarkers associated with PGD.
- Check points and lung transplant.
- CLAD (RAS and BOS), AMR, perioperative management of LTx recipients, ECMO for bridge to transplant, nutrition and rehabilitation pre/post LTx
- CMV management.
- Continued learning of all aspects.
- Continuing trials, rejection novel therapies, new pharmacological treatments.
- Continuous distribution of organs.
- COPD-PH.
- ctDNA testing, Lung
- Cystic fibrosis.
- DCD and NRP. DCD QAPI. Processes for lung tx programs. Constant unos changes and the implications.
- Desperate need for a lung transplant coordinator society or breakout group.
- Diaphragm pacing to overcome diaphragm dysfunction.
- Does it work? CareDx is paying a lot of money for no real data. Will need review.
- Donor organ machine perfusion.
- Duration of opportunistic infection prophylaxis. Duration of inhaled anti-infective therapy after lung transplant. Optimal mycophenolate dosing after lung transplant, when to reduce (if severe leukopenia, are we covered while holding MMF?).
- Dysphagia/Early peri and postoperative GI complications/Nutrition in the post operative period/Reflux.
- ECMO vs CPB.
- ECP.



**Please indicate any Lung Failure/Transplantation topics you will be seeking information on in the next 12 months. -- *continued***

- Effect of COVID 19 infection in children post lungTx, is this different compared to adult. Effect of COVID 19 vaccination (community Peds, might also be interesting for ped. heart transplantation. Psychosocial aspects of lung transplant).
- Epidemiological data on lung failure, underlying reasons, predictive factors. Chronic complications like CLAD differentiated according to phenotype
- Frailty significance in lung transplant patients, Quality of life vs survival benefit for lung transplant patients.
- Fungal infections.
- Global health - making lung transplantation available for LMICs, collaboration to help hospitals in developing world to start "ground up" programs.
- Hemodynamics of lung transplantation: Interaction between right ventricular function and ischemia-reperfusion injury of the lung. Implementation of novel ECLS devices and non-conventional ECLS strategies for specific patients.
- Highlighting APP practice.
- Home monitoring of respiratory issues post-transplant.
- How to build a lung transplant team.
- How to start a pediatric lung program.
- I will pursue the topic of lung donor age, cold preservation limits and lung scoring on EVLP.
- I would like more information on re-do transplantation for lung and heart-lung. What are other facilities policies or guidelines on re-do?
- ILD screening / disease treatment and screening - to include data for transplant referral.
- Impact of treating pseudomonas/aspergillus colonization on lung transplant outcomes -TTV monitoring as a surrogate for degree of immunosuppression -Novel therapies for AMR and CLAD (i.e. daratumumab, alemtuzumab, itacitinib, ECP, TLI) -Individualized IMS optimization (i.e. who to switch to sirolimus, predicting drug toxicity, who can get away with MMF dose reduction).
- Increasing cold ischemic times. Treatment of PGD.
- Industry engagement with new RCTs.
- IPF treatment post-transplant (**pharmacists**),
- Kidney dysfunction, immunosuppression, acute rejection, CLAD, and pathophysiological relevance of circulating cell-free DNA (not just as a marker of rejection).
- LAS, post-transplant complications.
- Less emphasis on incisions and more emphasis on the importance of ICU care.
- Listing pediatric patients with pulmonary hypertension.
- Lung transplant postoperative pain control.
- Lung transplantation after A-NRP and TA-NRP.
- Lung Transplantation and sensitization.
- Management of post-transplant complications (GI, malignancy, infection).
- Management of short telomere patients.
- Mechanical ventilator management of patients post-transplant.



**Please indicate any Lung Failure/Transplantation topics you will be seeking information on in the next 12 months. -- *continued***

- Mechanisms of inflammation and target therapies.
- Molecular microscopy.
- More about PAH and lung transplant.
- More ID.
- More room for PVD.
- New advances in lung recovery options.
- New non-invasive methods to diagnose diseases.
- New technological innovations like Xvivo and lung in a box.
- New treatments of advanced PVD. Timing and balancing surgical interventions in PVD.
- Non rejection complications of lung transplant.
- Non-invasive methods for assessment of allograft dysfunction and rejection.
- Novel therapies for BOS. Novel diagnostics for BOS.
- Novel ways to detect graft failure.
- NRP advancement.
- Nursing: patient monitoring systems.
- Ongoing updates in noninvasive monitoring-more QA/QI.
- Optimal cooling temperature.
- Optimization of aftercare.
- Organ acceptability, organ allocation, CMV and other infections.
- Oscillometry in lung transplant, home spirometry, CLAD diagnostic tools. I belong to Pediatrics and Pulmonology Professional Communities.
- Outcomes data, infectious disease issues, donor management, immunosuppression. Look in active literature as well as ACCP and ATS meeting.
- Oxygen toxicity post lung transplant.
- PAH transplant options.
- Pain management of lung Tx patients immediate post op.
- Pain management, anesthesia management, protective ventilation, hemodynamic management, bleeding management, ECMO management in lung transplantation, complementary therapeutics.
- Pathology CAV markers, female access to transplant, ethical responsibility as a transplant community of using same listing criteria (avoid age and BMI listing difference for example) to provide equity.
- Pediatric lung transplantation and evaluation including special considerations for pathologic evaluation for rejection. *Pediatric Lung Transplantation and Pathology Communities.*
- Perioperative management of lung transplantation: Anesthetic Management, Echocardiography, and Fast-track Considerations. *Anaesth/Critical Care / Transplant Pulm / Surgery*
- Policy debates with regulators involved.
- Mechanisms of inflammation and target therapies.
- Molecular microscopy.



**Please indicate any Lung Failure/Transplantation topics you will be seeking information on in the next 12 months. -- *continued***

- More about PAH and lung transplant.
- More ID.
- More room for PVD.
- New advances in lung recovery options.
- New non-invasive methods to diagnose diseases.
- Postviral sequelae continue to be a challenge for all of us. Can this be better defined rather than just "CLAD" -- can there be other scientific means to define post COVID / post parainfluenza etc. and hopefully this could lead to therapeutic targets?
- Prehabilitation and post-tpx rehabilitation - applies to physical and occupational therapy, nursing, providers, tpx coordinators, perfusion (in the event the pt is on T-MCS).
- Probably all things related to lung transplant.
- Pulmonary Vascular Disease.
- Rejection.
- Relationship with educating outside facilities, SNFs and rehabs taking care of transplant patients.
- Reperfusion injury
- Scleroderma
- Studies early treatment DSA,
- Survival rates post-transplant.
- Telomere studies.
- The rational use of EVLP, when to use, and when not to use. More education and facts needed from colleagues and less from the industry.
- The use of hypnosis as pre-operative sedation.
- Timing of Tx in patients with PVD. Mechanical support/ECMO.
- Transplant for patients not previous listed.
- Transplant lung physiology.
- Treatment for BOS/RAS in lung transplant recipients.
- Viral triggers of allograft dysfunction.
- What are Patient Reported Outcome Measures and how are they designed and implemented.
- Workshops on implementation of a minimally-invasive lung transplant surgery.
- Would like information on how to better apply results on ddcfDNA to making changes with IS or treating for possible AMR earlier instead of waiting for it to clinically appear/+DSA.