

# Lung transplants not dangerous for children with cystic fibrosis, after all

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Responding to a study published in the *New England Journal of Medicine*, which concluded that lung transplants were harmful for children with cystic fibrosis, articles published in the latest issue of *Pediatric Transplantation* refute the conclusions and argue that the highly influential research was severely flawed.

According to two rebuttals published in the acclaimed journal, the conclusions of the study on post-transplant survival rates led by Theodore G. Liou, M.D., of the University of Utah, Salt Lake City, were seriously flawed by misinterpreted statistics that created a strong bias against transplantation.

“Dr. Liou, et al. are accomplished statisticians and honorable academicians,” says Thomas M. Egan, M.D., of the University of North Carolina at Chapel Hill in his systematic rejection of the study. “But sometimes statistics do not tell the truth.”

Using covariates obtained up to three years before actual transplantation and when predicted survival was good, the calculated hazard ratios Liou’s study put forth were based on outdated information that did not reflect true benefit on a patient-by-patient basis at the time of actual transplant, contend Egan and Stuart C. Sweet, M.D. of Washington University, St. Louis.

Liou’s study also conflicts with findings from other sources, in which survival rates for pediatric CF lung transplant recipients were

substantially higher. Furthermore, recent changes in the U.S. transplant allocation policy, which appears to be successfully directing organs to those more at risk of dying on the waiting list and with higher survival benefit, have rendered the findings of Liou’s work irrelevant.

“Because uncritical acceptance of the study results by third party payers, referring physicians, and lung transplant centers could place children with cystic fibrosis who would likely benefit from lung transplants at risk, we appreciate Pediatric Transplantation providing this opportunity to rapidly publish an independent critique of the article,” says Dr. Sweet.

Source: Wiley

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