

6.03 Increased usage, new indications and the emergence of single use flexible bronchoscopes in Adult Cystic Fibrosis. A review of practice at Cork University Hospital 2012-2022.

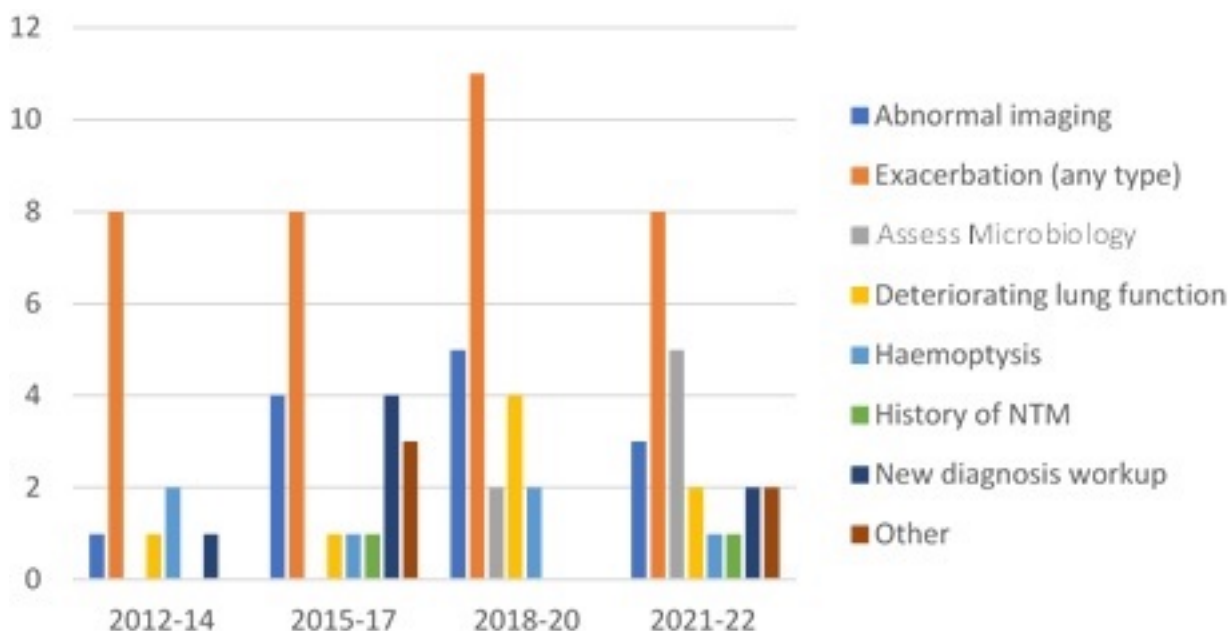
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Traditionally bronchoscopy has been used in paediatric patients-with-cystic-fibrosis (PWCF) for microbiological assessment, however in adult PWCFs this has not been necessary.

We performed a retrospective review of medical records between 2012-2022 of all adult PWCFs attending the service (n=223) to identify those attending for bronchoscopy. Demographics, baseline metrics, indication and outcome were recorded.

69 bronchoscopies were performed, representing 56 unique patients, including 9 (16%) post-lung-transplant. At time of procedure, mean FEV1 (% predicted) increased from 60% (2012-2014) to 71% (2021-2022) and age from 30.3 to 35.8 years. There was an increase in bronchoscopies with a mean of 6



per-annum (2012-2019), compared with 13 in 2021, and 7 year-to-date 2022. Figure 1 highlights the changing indications. Since 2019, bronchoscopy as a primary tool to assess airway culture has emerged, with all bronchoscopes changing to single-use-flexible-bronchoscopes (SUFB) since 2021. 78.9% (n=15/19) of SUFB patients were culture positive compared with 83.7 (n=41/49) of reusable bronchoscopes. 1 post-lung-transplant patient required admission due to an exacerbation within 4-weeks of bronchoscopy. Increased usage and changing indications for bronchoscopy is probably explained by a reduction in sputum production as a consequence of increasing CFTR modulation. The emergence of SUFBs allows analysis which avoids cross-contamination and sample contamination.

(6.3)

Figure 1(6.3). Indications for bronchoscopy in adult PWCFs 2012-2022

Conflict of Interest: None to declare