From Case to Care Model: Bilateral Lung Transplantation as the Catalyst for a Transitional Pain Service

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Ochsner Health
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Introduction

Post-lung transplant analgesia is challenging due to:

- Need for **effective analgesia while preserving respiratory function**
- **Delirium risk** in critically ill patients
- **Opioid stewardship** in high-risk populations
- **Patient instability limiting regional techniques**
- **Regional anesthesia may reduce opioids**, but placement and catheter maintenance can be difficult in unstable patients.
- **Transitional Pain Services (TPS)** provide **longitudinal, multidisciplinary care** to optimize analgesia and recovery.

Methods

- Verbal consent obtained; **no patient identifiers used**
- **IRB exempt** per Ochsner Health policy
- Retrospective case review of **TPS-managed postoperative lung transplant patient**
- Focus on **regional analgesia strategies and outcomes**

Results/Case Report

Patient
- Bilateral lung transplant (11/16/2025)
- **Indications:** Fibrotic ILD, sarcoidosis, prior COVID-19 pneumonia
- **Comorbidities:** CAD s/p PCI (2020), OSA, obesity, HTN, MASLD, anxiety/depression
- **Home meds:** clonazepam, zolpidem

Analgesic Course
POD 15
- Acute Pain Service consulted for uncontrolled pain
- Thoracic epidural attempt unsuccessful

12/5/2025
- Bilateral ESP catheters placed
- Continuous infusion via CADD pump

Delirium Event
- ESP catheters + chest tubes dislodged
- Re-intubation and chest tube replacement required

12/8/2025
- Extubated
- Hydromorphone PCA initiated

12/9/2025
- T5–6 thoracic epidural placed
- Systemic opioids discontinued POD1

After Epidural Removal
- Oxycodone → hydromorphone
- Acetaminophen
- Methocarbamol
- **Pain remained well controlled**

Discussion

Key Outcome
- Effective analgesia and opioid reduction achieved despite pulmonary complications and delirium through an adaptable multimodal approach

Discussion
- Post–lung transplant patients have complex analgesic needs
- Regional techniques may fail or be interrupted in critical illness
- Flexible analgesic strategies are essential
- Transitional Pain Services (TPS) support:
  - Care continuity
  - Multimodal analgesia
  - Opioid stewardship

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