P1-37: Transition of Pediatric Renal Transplant Recipients to Adult Providers: A Systematic Review of the Literature

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Abstract:
Introduction: Improvements in transplantation have increased the survival of children with chronic kidney disease. These patients have complex needs, and the current medical system is not prepared to effectively transfer their care from pediatric to adult systems. Too often transfer of care occurs during moments of crisis leading to poor outcomes. A process is needed for this transfer and medical transition services (MTS) may fill this gap. The purpose of this systematic review was to identify key factors that impact on MTS for youth with chronic illness (YCI) in order to understand the transitional needs of renal transplant recipients. Specific aims of this systematic review were to identify the key concepts of MTS, identify models of MTS, and to identify outcome measures to evaluate successful transition.

Method(s): A systematic review of the literature related to MTS for YCI was conducted using Medline, Pubmed, and CINAHL. Key words included transition, chronic disease, transfer of care, chronic illness, adolescent, and young adult. The results were combined and analyzed.

Results: Key concepts essential for MTS were identified. MTS need to be developmentally appropriate, include the family, and contain educational components. A portable medical summary is needed, a transition leader should be designated, and the timing of the transfer should be individualized. Three main models of MTS emerged, a disease/illness based model, a primary care based model, and an adolescent based model. No one model has been proven to be superior. The disease/illness based model may be best for YCI. It is not clear what outcome
measures should be analyzed from MTS. Potential outcome measures include: appointments attended, patient satisfaction, rates of insurance coverage, incidence of non-compliance, and measures of disease severity, function outcomes, and quality of life.

**Discussion & Conclusions:** It is clear the transition of care from pediatric to adult providers is complex. The literature to date has mostly focused on the need for MTS, the basic concepts required for MTS, and identified barriers to successful transition. There is a significant lack of data on outcome measures. Further research is needed in this area to optimize the transition of care renal transplant recipients.

**Abstract History:**
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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