## **UCMC -Liver Transplant Tobacco Cessation Guideline**

## Tobacco cessation is required prior to listing in all candidates with any of the following diagnoses/history:

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Coronary Artery Disease (CAD):	History of Myocardial Infarction, Percutaneous Coronary Intervention (cardiac stents or
	angioplasty), Coronary Artery Bypass Grafts, or non-obstructive CAD (angiographic evidence)
Chronic Obstructive Pulmonary	FEV1/FVC ratio < 0.7 AND FEV1 < 60% predicted
Disease (COPD) Moderate or Severe	
Peripheral Arterial Disease	ABI < 0.8 or diagnosed by angiography, CT, MRA, or ultrasound
Hepatocellular Carcinoma (HCC)	Biopsy proven or radiographic evidence (arterial enhancement, wash-out on portal venous
	phase and delayed phases, peripheral rim enhancement, 50% growth < 6 months, AFP > 400)
History of certain cancers	Head and Neck, Breast, Lung, Gastric, or Urothelial

## The evaluation process will be revised as follows for candidates required to quit using tobacco

- o Evaluations may be started, but listing will be postponed until abstinence has been verified.
- Consultation will be recommended to a tobacco cessation specialist (584-QUIT).
- o Tobacco cessation will be verified by cotinine levels and/or urinary nicotine ordered at regular intervals at the team's discretion.
- Candidates using tobacco cessation medications (e.g. nicotine patch or gum) can be listed once carboxyhemoglobin levels are negative for smokers and cotinine levels/urinary nicotine are negative for patients using chewing tobacco (the goal of tobacco cessation medications is to utilize for no longer than 12 weeks).
- Candidates will be given 6 months to quit tobacco and will be discussed in the Selection Committee if unable to do so with consideration to decline the candidate for transplant.

## Candidates in the following scenarios that are currently using tobacco may be eligible for a listing exception (determined on a case by case basis)

- Status 1A listing
- Evaluation testing is complete, satisfactory AND candidate currently engaged in smoking cessation program AND native MELD ≥ 25
- Evaluation testing is complete, satisfactory AND candidate currently engaged in smoking cessation program AND develops acute on chronic liver failure (hospital admission) requiring urgent transplantation.
  - NOTE: Candidates discharged w/o transplantation are expected to engage and complete smoking cessation
- New inpatient transfer that satisfactorily completes inpatient work up AND is less likely to be discharged w/o transplantation.
  NOTE: Candidates discharged w/o transplantation are expected to engage and complete smoking cessation.