Chylothorax - nutritional practices survey

What are the aims of this survey?

This survey is being undertaken by dietitians from Children's Health Queensland Hospital and Health Service and the British Dietetic Association: Paediatric Cardiac Interest Group. The aims are to map current international practices for the diagnosis and management of children with chylothoraces, and to identify the next steps required to develop consensus guidelines and management for this condition.

To be involved, simply complete this online questionnaire. It should take no longer than 5 - 10 minutes. It is entirely optional. If you do not wish to take part simply close the questionnaire. However we are really grateful for your opinions. There are no specific benefits to you from taking part but no risks either. All information you provide will be anonymous and cannot be withdrawn once you submit it. You may include your email at the end of the survey, but this is entirely optional.

By completing the questionnaire you agree to participate in this process. Please also feel free to pass this link onto colleagues in your team who have experience managing this patient group.

If you any queries, please do not hesitate to contact: Anna Doolan (Aus) (Annabel.Doolan@health.qld.gov.au) or Dr Luise Marino (UK) (luise.marino@uhs.nhs.uk) and thank you for your time on behalf of the team.

Section 1. How is chylothorax managed?

In this section we would like to understand how chylothorax is managed - there is no right or wrong answer

Diagnosis and pre-diet assessment

How is chylothorax diagnosed in your unit?

	Yes	No
Observational â€" presence of chyle observed in chest drain	\circ	0
Pleural fluid sample with triglycerides > 1.1mmol/L	\circ	0
Pleural fluid sample with absolute white blood cell counts $> 1000 \ cells/mm3$	\circ	0
Pleural fluid sample with lymphocytes > 80%	\circ	0
Lymphatic imaging	\circ	0
Other	\circ	0

If you have indicidated other, please provide details

Diagnosis and pr	e-d	iet assessment		
What is the first li	ne 1	reatment for chylothora	x in	your unit?
What is the line in		readificate for englocational	21 111	your unit.
			Yes	No
Usual feed/ diet for first 1	10 da	ys with no fat restriction	0	0
Oral or enteral Low Long	g chai	in fat (LCT) diet/formula	0	0
Nil by mouth with low Lo	CT fo	ormula as enteral nutrition suppor	t O	0
Nil by mouth with parent	eral ı	nutrition support	0	0
Combined low LCT diet/	form	ula with IV lipid support	0	0
Other			0	0
If you have indicid	date	ed other, please provid	e de	tails
ii you nave maier	uaic	d other, it piedse provid	c uc	tans
Dietary managen	nen	t of chylothorax		
T 41 4 141 1		1 1 .1	•	
Is the nutritional n	nan	agement of chylothorax	ın y	our unit guided by
	Yes	No		
Unit protocol	<u> </u>	0		
Local clinical guidelines	0	0		
Published guidelines	0	0		
Physician preference	0	0		
January Processing				

Other O									
Dietary ma	nager	nent o	f chylo	thora	X				
What is the	recom	mende	ed dura	tion of	low	LCT d	liet ther	apy in	your unit?
	1 week	2 weeks	3 weeks	4 weeks	5 weeks	6 weeks	> longer		
Diet therapy for	0	0	0	0	0	0	0		
If longer tha	an 6 w	eeks, p	olease s	specify	why				

Dietary management of chylothorax

What is considered day one of diet therapy in your unit?

	Yes	No
The day low LCT diet therapy commences	0	0
The day the last chest drain is removed	\circ	0
Other	0	0

If you have indicidated other, please provide details

What is the most com No fat restriction 1g LCT per year of life					
No fat restriction					
No fat restriction					
No fat restriction					
No fat restriction					
No fat restriction					
No fat restriction	-				
	mon c	laily LCT	fat allowar	nce for an infant or children in	your ı
	1 -	5 years of ag	e 5 - 10 years	>10 years of age	
1g LCT per year of life	0	0	0	0	
	\circ	\circ	0	0	
	0	0	0	0	
	\circ	0	0	0	
	0	0	0	0	
Other, Individualised approach	1 🔘	0	0	0	
If you have indicidate	ed othe	er. please	e provide d	etails	
<i>,</i>		-, r	r r		

Please indicate the low fat feeds and supplements used in your unit to manage chylothorax

Defatted (Skimmed) human breast milk	\circ	\circ								
Monogen	0	\circ								
Fortified skim milk drinks	0	\circ								
Extensively hydrolysed feeds 35 - 50% MCT	0	0								
10 - 15% glucose polymer drinks	0	0								
MCT oil	0	0								
Liquigen	0	\circ								
Modular feeds - low LCT	0	\circ								
Other	0	0								
In your unit how does an infant of prescribed diet therapy course		hild re	esume	a nor	mal d	iet fol	lowing	g the c	compl	etion

Yes No

 \bigcirc

 \circ

 \circ

 \circ

Yes No

If you have indicidated other, please provide details

Gradual resumption of usual feed/ diet over a period of days

Gradual resumption of usual feed/ diet over a period of a week O

Immediate resumption of usual feed/ diet

Other

Supplementation			
Supplementation			
n your unit what situations are essential fatty ac	ids ((EFA) supplemen	itec
•		`	
	Yes	No	
No supplementation	0	0	
No supplementation for infants	\circ	0	
Supplement only children >12 months of age on a low LCT formula	0	0	
Supplement all infants/children regardless of fat restriction	\circ	0	
Supplementation if LCT is providing	\circ	0	
Other	0	0	
	. •1		
f you have indicidated other, please provide de	etail	S	

How is EFA su	ıppl	ementation in your unit given?
	Yes	No
Walnut oil		
Canola oil	0	
Fish oil supplements		
KeyOmega		
Other	0	\circ
		ated other, please provide details of diet therapy, in your unit, do you provide any of the following?
S		
	Yes	No
Fat soluble vitamins	\circ	
Electrolytes	\circ	
Multivitamins	\circ	
Minerals	\circ	
Individual vitamins	0	
What are the ba	arrie	ers to managing chylothorax in your unit?
		Yes No
Food service capabili	ities	

Absence of clinical guidelines	\circ
Limited evidence base	0 0
Available formula/feed options	0 0
Variations in practice of clinicia	ns O O
The individual infant/child's gro	wth or nutritional status
Other	\circ \circ
If you have indicidated	other, please provide details
What should we do to i	educe variation in practice with regards to nutritional
mangement of chylothe	
	Yes No
Randomised controlled trial	\circ \circ
Prospective observational study	
Delphi consensus	\circ \circ

How do you think chylothorax should be managed?

0 0

Other

Section 2. A bit about you	
This section is about you	
What profession best describes you?	
ı J	
Dietitian	
Nurse	
O Dr - Cardiac	
O Dr - Intensivist	
Other	
How many years have you been managing of	children with chylothorax?
 Less than or equal to 1 year 	
O 2 - 5 years	
6 - 9 years	
More than 10 years	
What is the name of your hospital/ organisa	tion?

n which country is your hospital based?
Please provide an email address if you are happy for us to contact you in the future
hank you for taking this questionnaire.

 $If you have any queries, please contact: Luise.marino@uhs.nhs.uk \ or \ Graeme.O'Connor@gosh.nhs.uk$