



OFFICIAL STATEMENT

On the capacity of the public health system
to address complex conditions through a multidisciplinary approach

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Recent news regarding the successful completion of the world's first face transplant using tissue from a donor who received euthanasia, carried out at the Hospital Universitari Vall d'Hebron (Barcelona, Spain), has had a significant international impact. The Spanish Association for Empty Nose Syndrome (AESNV) would like, first and foremost, to express its recognition and admiration for the extraordinary work of the healthcare professionals involved and for the capacity of the Spanish public health system to address interventions of the highest level of complexity.

This medical breakthrough highlights several key elements that we consider essential for the advancement of medicine and patient care: the excellence and specialization of healthcare professionals, the unquestionable value of collaboration between multidisciplinary teams, and the enormous potential of the public health system when there is clinical recognition, appropriate planning, institutional coordination, and a clear focus of resources.

All of this demonstrates the capacity of the public health system to undertake, fund, and coordinate highly complex interventions when there is clinical recognition, adequate planning, and a well-structured multidisciplinary approach.

Experience shows that when a condition is recognized, understood in all its complexity, and addressed from a multidisciplinary perspective, the healthcare system is capable of delivering advanced, effective, and patient-centered outcomes. This approach not only improves clinical results, but also restores dignity, functionality, and quality of life to patients.

From AESNV's perspective, this same model should serve as a reference for other conditions that, despite having a significant physical, psychological, and social impact on those affected, continue to lack adequate recognition and a structured approach within the public health system. Empty Nose Syndrome is one such condition.

It is a complex condition that requires specialized evaluation, long-term follow-up, and a clearly multidisciplinary approach; however, at present it does not benefit from consistent care or sufficient coverage within the public healthcare system. This situation forces many patients to move between consultations, bear significant financial costs, or, quite simply, to go without the care they need.

We firmly believe that the success of interventions such as the one recently carried out at Vall d'Hebron demonstrates that the Spanish healthcare system has the capacity, knowledge, and human resources necessary to also advance in the management of conditions that are currently underserved, provided there is institutional commitment, clinical recognition, and appropriate planning.



This statement is not intended to draw comparisons or to question priorities, but rather to highlight what is possible when the system operates in a coordinated and equitable manner. As a patient association, we hope that this same commitment will extend to all individuals living with complex and currently under-recognized conditions.

AESNV reiterates its willingness to collaborate with healthcare professionals, institutions, and public authorities to move toward a fairer, more comprehensive model of care that is truly centered on patients' real needs.

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