

LUNG TRANSPLANTATION

What is it?

Lung transplantation is an exciting new therapy which offers the promise of improved survival and quality of life to selected people with life threatening lung diseases. The World's first successful lung transplant, a combined heart and double lung transplant, was performed at Stanford University Medical Centre in 1981. Since that time there have been several thousand lung transplants performed throughout the world. In Australia lung transplantation began in 1986 and over 250 patients have received these operations since that time.

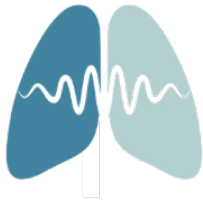
Who needs it?

Only people who are dying from their lung disease or the effects of their heart disease on their lungs are suitable candidates for this type of novel surgery. There is a high degree of risk attached to the surgery and the post-operative course. Lung transplantation is performed for people with severe lung diseases such as cystic fibrosis, emphysema, pulmonary fibrosis as well as certain forms of congenital heart disease and pulmonary hypertension. More than 350 Australians die each year with these conditions. Unfortunately there are not enough donor lungs to help all those people who could be helped. As a result only about 70 patients a year get a lung transplant in Australia.

Where and how is it done?

For adults with these types of lung diseases there are two centres funded by a Federal Grant to provide lung transplantation services to the whole Australian community. These are the St Vincent's Programme in Sydney and the Alfred Programme in Melbourne. Patients are referred by their specialist doctor to these programmes for a thorough assessment regarding their potential suitability for this type of surgery. If there are no reasons found that would make the proposed operation of great risk, then the patient goes on to an active waiting list until the right lung or lungs become available depending on matching blood group and size. Some patients will only wait a few days or weeks for their transplant but most will wait between 12-18 months. Not everyone who is accepted on to the waiting list will receive a transplant. Unfortunately some 10-15% of patients on the waiting list will either become so sick that they could not receive a transplant safely, or they will die from their lung disease before a lung becomes available.

The transplant itself takes between 4 and 8 hours and is performed by an expert team of surgeons, anaesthetic staff and nursing staff. Most patients will stay in hospital for 2-3 weeks after their transplant but it is remarkable how soon normal activities can be resumed. After the transplant patients take immunosuppressive medications to prevent their body from rejecting the transplanted organs. In addition antibiotics are taken to prevent common infections and regular tests are made of the transplanted organ with x-rays, lung function tests and small lung biopsies if indicated.



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How successful is it?

The outlook for patients receiving lung transplants within Australia has improved significantly year by year since the first transplant in 1986. Regardless of the form of transplant (single lung, double lung or heart and double lung) the majority of patients (approximately 90%) will live at least a year or more following their transplant with 80% living 4 or more years. Quality of life as measured by ability to exercise, attend educational courses, work or manage a household is significantly improved. For example patients should not need oxygen saturation was 96% on room air after a transplant.

Isn't it expensive?

Australia actually has one of the least expensive transplantation programmes in the world. In many cases transplantation is less expensive than prolonged medical therapy for patients with severe lung diseases causing them to be in hospital for long periods of time. Fortunately transplantation is currently paid for by the Federal Government so eligible Medicare patients don't have to pay for the transplant procedure themselves. Patients from all over Australia are able to come to either Sydney or Melbourne for their transplant, and both groups hold outreach clinics in all other capital cities so that patients may be followed up closer to their homes.

What can I do to help?

Perhaps you know somebody with a severe lung problem who has not thought about lung transplantation. This brochure may help you to discuss this procedure with them. For most Australians the one thing that they can do is to discuss with their family and loved ones a positive approach towards organ donation without which no Australian could be helped by these wonderful new therapies. In some States it is possible to endorse a driver's licence with the intention to become an organ donor. Prior notification of intent to become an organ donor is the way in which Australians can help more people by organ transplantation.

Please Note: This information is intended by The Australian Lung Foundation to be used as a guide only and is not an authoritative statement. Please consult your family doctor or specialist respiratory physician if you have further questions relating to the information provided here.

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