

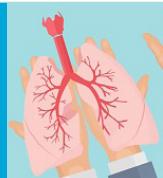
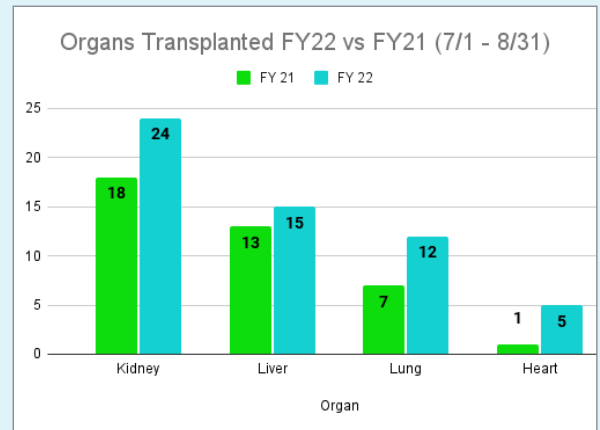


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Transplant by the Numbers

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400TH LUNG TRANSPLANT

PUNEET S. GARCHA, MD, MBA
Medical Director, Lung Transplantation
Baylor St. Luke's Medical Center

Baylor St. Luke's Medical Center's (BSLMC) lung transplant team, led by Dr. Gabriel Loor (Surgical Director) and Dr. Puneet Garcha (Medical Director), achieved a milestone by performing their 400th lung transplant. The lung transplant team's mission is to provide hope for patients with advanced irreversible lung diseases by delivering quality-driven, timely, accessible, compassionate, and innovative transplant care while developing therapies to improve outcomes.

During the pandemic to date, the team has successfully performed ten lung transplants for patients with COVID-19 who developed

irreversible lung damage. BSLMC is one of the select centers worldwide offering lung transplantation for COVID-19. The team provides state of the art donor management utilizing ex-vivo lung perfusion (EVLP) and donation after cardiac death (DCD) donors. In collaboration with the intensive care multidisciplinary team, they have utilized extracorporeal membranous oxygenation (ECMO) as a bridge to transplant for sick pre-lung transplant patients. BSLMC also offers multi-organ transplants and redo lung transplantation. Apart from clinical innovations, the lung transplant team is conducting research trials in primary graft dysfunction, airway complications post-transplant and chronic lung allograft dysfunction. The lung transplant team was awarded the Cystic Fibrosis Foundation grant to participate in the Cystic Fibrosis Lung Transplant Transition Learning & Leadership Collaborative. This 18-month initiative helps the BSLMC team to review practice, learn new skills, improve patient satisfaction scores, and provide a seamless transition for the CF patients in their lung transplant journey.

Transplant Hot Topics

TYLER LAMBING, MD, Assistant Professor, Infectious Diseases

Transplant recipients' failure to develop antibody response to SARS-CoV-2 after vaccination is being heavily discussed in the medical community. Many experts are concerned that the vaccine may not provide as much protection for transplant patients as it does for the rest of the population. We currently do not know which antibody level prevents infection or provides protection from symptomatic or severe disease. However, the amount of antibody needed to protect against severe disease is lower than that needed to prevent infection. Therefore, even in the absence of an antibody response, there may still be some protection against severe disease. Antibodies are also not the only factor that help protect the body from viruses. Other immune system cells such as T cells also help protect the body and it is currently unknown how much response the vaccine causes in these types of cells. There is a possibility that the vaccine may cause a response in these cells that help protect transplant recipients from COVID-19. Our knowledge in this area is constantly growing and recent trials have looked at giving a third dose of the mRNA vaccine. A recent trial showed that a third dose of the mRNA vaccine provided at an interval of two months after the second dose significantly increased antibody titers. This additional dose was safe and well tolerated. Currently it is recommended that a third dose of mRNA vaccine be given for solid organ transplant recipients. We continue to recommend additional safety precautions regardless of vaccination status. These include wearing a mask around persons outside of your household, practicing good handwashing, and maintaining physical distancing when in public places

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RESEARCH

RESEARCH NEWS

ABBAS RANA, MD

Assistant Professor of Surgery

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Michael E. DeBakey Department of Surgery

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Every 12 minutes, a new person is added to the organ transplant waiting list. Every day, 21 people die waiting for an organ match, as many more patients need donor organs than are available. 100,900 solid organ transplants and 20,200 liver transplant procedures are completed each year. Successful procedures require not only the specialized medical expertise of the surgeon, but also the ability to evaluate the quality of the match of the patient donor recipient with the available donor organ. The importance of this matching process is particularly important because there is a much higher patient need for donor organs than there is organ availability, making successful matching with minimized adverse outcomes the field's top priority.

The ability to build Artificial Intelligence (AI) algorithms to assist surgeons in evaluating the quality of a match between patient and donor organ in real time has the potential to markedly improve patient outcomes and transplant organ utilization. We anticipate our AI algorithm (Trans-AI) will offer a paradigm shifting approach to predicting patient transplant outcomes when based on real-time patient data that is presented to the surgeons.

No significant clinical or technological advancements have been made within the last two decades to actively improve matching success. Specifically, no organ matching predictive outcome model can comprehensively synthesize all available patient- and donor-specific variables at the time of transplantation to guide organ allocation decisions. The innovation in this proposal involves training an AI algorithm to reveal previously undiscovered non-linear insights regarding kidney and liver organ matching. A novel clinician assistance tool (Trans-AI) will be invented as an ultimate implementation of this model. We are confident this approach can lead to an optimized transplant process with enhanced organ allocation and improved patient outcomes.

VACCINE RESEARCH PROJECT

PUNEET S. GARCHA, MD, MBA

Medical Director, Lung Transplantation

Baylor St. Luke's Medical Center

The Baylor St. Luke's Lung Transplant team is currently conducting a study to assess our heart, kidney, liver, and lung transplant patients' overall experience with the COVID-19 vaccine. The goal of the study is to assess our transplant patients' vaccine experience, including evaluation of side effects and overall qualitative experience to gauge patient safety and psychosocial perceptions of COVID-19 vaccination in transplant patients. Select patients will receive an email invitation to complete the brief voluntary online survey. Encouraging patient participation in the study is greatly appreciated! If you or your patients have any questions, please feel free to contact our team at ritika.singh@bcm.edu.

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Quality Corner TRANSPLANT CENTER OUTCOMES — WHAT DOES IT ALL MEAN?

SUSAN BOURGEOIS, MSN, RN, CCRN-K, CPHQ, CCTN, CENP

Transplant Center outcomes are provided by the Scientific Registry of Transplant Recipients (SRTR), an organization that performs statistical analyses regarding organ transplantation in the U.S. SRTR reports include the risk-adjusted Expected Patient and Graft Survival, and the Hazard Ratio—an estimate of how the center's results compare with what was expected. If a center were to achieve exactly what was expected, the Hazard Ratio would be (1). A lower Hazard Ratio indicates better than expected outcomes.

Documents containing these and other data for all transplant centers are available for public review at srtr.org.

July 2021 - Adult 1 Year Survival (1/1/2018 - 3/12/2020)						
	Graft Survival			Patient Survival		
	Observed	Expected	Hazard Ratio	Observed	Expected	Hazard Ratio
Heart	91.89%	92.32%	1.09	91.67%	92.75%	1.15
Lung	91.26%	89.22%	0.93	92.17%	89.86%	0.89
Liver	94.96%	92.71%	0.71	94.96%	94.02%	0.87
Kidney	96.77%	96.06%	0.77	97.99%	97.74%	0.91

Patient Spotlight A WORD FROM OUR PATIENTS

2 FAMILIES FOREVER CONNECTED BY 1 HEART

Read about it here: [HTTPS://ABC7NEWS.COM/HEART-TRANSPLANT-ORGAN-DONATION-LIFE-SAVING-ACT-FEEL-GOOD/10831628/](https://abc7news.com/heart-transplant-organ-donation-life-saving-act-feel-good/10831628/)

Staff Spotlight: KATRINIA BENNETT, BSN, RN



I am Katrinia Bennett and I am the Clinic Nurse Supervisor for the Abdominal Transplant and Liver Clinic.

Prior to beginning my career at CHI St. Luke's, I enjoyed 13 years working as a nurse at a local children's hospital.

I received a life-saving liver transplant on February 23, 2012, and I am almost 10 years post-transplant. I feel like I am literally living my dream by being able to work with the very people that saved my life. I am honored to be a part of so many other transplant stories now!

I think of my donor and all the people that were a part of my transplant journey every time I look at my son. I feel so blessed to be able to raise him and love him each day. I love playing sports, going to the beach, hiking, cooking, planning parties, and I am super competitive about almost anything! I am so grateful to be a part of this team that allows others to have a second chance at life.

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