



Do the “Pros” Outweigh the “Cons” for the Use of Probiotics in Transplant Recipients?

by Clarice Carthon, PharmD, BCPS, PGY2 Solid Organ Transplant Pharmacy Resident

Millions of people around the world consume probiotics daily for perceived health benefits. Supermarket shelves are lined with various probiotic supplements. Probiotics are live bacteria and yeasts, many of which are naturally found in your body and keep your digestive system healthy. They have a long history of safe use in foods and dairy products such as fermented milk and yogurt.

Probiotics have also been used by societies around the world for the treatment of intestinal disturbances. It is important to note that, in the United States, the claimed benefits from the use of probiotics range from decreasing diarrhea, improving symptoms of irritable bowel syndrome to decreasing risk of cirrhosis and helping fight cancer...many of which are not proven. The Food and Drug Administration regulates probiotics like foods, not like medications, which means probiotic supplements don't have to show the products are safe or that they work. In general, probiotic supplements are thought to be safe for most people.

For an immune-suppressed transplant recipient, it is important to remember that consuming live bacteria and yeast may increase your risk for infections. On rare occasions, probiotics can lead to bacteria in the blood causing infection or an infection of the inner layer of the heart, particularly in patients with weakened immune systems.

Organisms that are regarded as safe include *Lactobacillus*, *Bifidobacterium*, and yeast. There are other probiotic organisms, such as *Enterococcus*, *Bacillus*, and other spore-forming bacteria that are not regarded as safe but are used as probiotics. It is important to read the labels of probiotics to ensure you are taking organisms that have demonstrated safety. The two most common groups in commercially available products that we regard as safe are *Lactobacillus* and *Bifidobacterium*. Talk to your transplant team prior to starting any probiotic product. Side effects may include upset stomach, diarrhea, gas and bloating. If you have problems stop taking them and talk to your doctor or pharmacist.

References: Snyderman, DR. The safety of probiotics. *Clin Infect Dis* 2008; 46:S104-11.

Senok AC, Ismael AY, Botta GA. Probiotics: facts and myths. *Clin Microbiol Infect* 2005; 11:958-66.

Joint FAO/WHO Working Group on Drafting Guidelines for the Evaluation of Probiotics in Food. Guidelines for the evaluation of probiotics in food: report of a Joint FAO/WHO Working Group on Drafting Guidelines for the Evaluation of Probiotics in Food, London Ontario, Canada, April 30 and May 1, 2002.

Available at: http://www.who.int/foodsafety/publications/fs_management/probiotics2/en/index.html. Accessed 28 March 2016

Curing HCV After Liver Transplantation

by Julio Gutierrez, MD



This is the first time in medical history that we can use the words “Hepatitis C (HCV)” and “cure” in the same sentence. Much of the research and clinical trials with patients has been done at the Texas Liver Institute (TLI), a partner with University Transplant Center.

A major step forward in the care of patients with chronic liver disease is the development of a new class of oral drugs to treat HCV. They are known as direct acting antivirals (DAAs) that produce lasting cures with most patients reporting little to no side-effects. Despite these successes in patients with certain types of HCV, there had been concerns that patients who underwent a life-saving liver transplant might not respond as well to the therapies because of antirejection medications like tacrolimus.

It is also well recognized that those who undergo a liver transplant for HCV, who have not already been cured of HCV, will universally be re-infected after the transplant. To make things more complicated, untreated HCV becomes more aggressive after liver transplant with up to 50% of patients developing cirrhosis (irreversible liver damage) again after 5 years. Recurrent cirrhosis can be a devastating diagnosis. Thus, curing HCV is an important step in maintaining the health of the transplanted liver and increasing the life span of HCV-infected liver transplant recipients.

These new medications combine different types of drugs into one form of treatment. The main difference between these new drugs and drugs used in the past is that they directly attack the virus at different stages of its development. This results in a “direct kill” of the virus and decreases many of the side effects of the older drugs. There are many effective drugs available, or coming available in the future, that are used based on the different types of HCV. These are prescribed by your hepatologist (liver specialist) to act on the specific form of hepatitis you have. All of these drug combinations are FDA-approved for treating HCV, and three of the five commercially available, are approved for use in liver transplant patients. Clinical trials have shown that there is no significant difference in HCV cure rates amongst liver transplant recipients compared to those who have not been transplanted.

According to the CDC, millions of Americans have HCV but most don't know it. About 8 in 10 people will develop a chronic or life-long infection and often have no symptoms. People who were born between 1945 and 1965 have the highest risk of having HCV. People in this age group are encouraged to see their primary care provider for HCV screening.



Pediatric Kidney Transplant Coordinator, **Ashton Porter Bayleat**, received his second kidney transplant 17 years post-transplant on April 29, 2016. When asked how he feels, he said *"This is why I wanted to do what I do. To show patients and families the possibilities... I feel great!"*



It's official! A foster child in desperate need of a kidney transplant to save his life received two special gifts. 6 year-old **Leland** not only received his transplant, but he also received a new family. He now has the opportunity to enjoy being a kid for the first time in his life.



Lung transplant recipient of 11 years **Debra Aparicio** was the winner of Donate Life America's blue & green day photo contest. Winners received a prize but the chance to honor her donor in this way was priceless!



26-year-old **Miranda Bennett** was honored at the 2016 University Health System Foundation Medical Miracles Gala for her gift of liver donation to save her dying mother, **Tammy**. Miranda shares, *"It was very easy to make the decision, because it was the right thing to do. That doesn't mean it wasn't the scariest thing in the world."* Miranda and Tammy are pictured here between **Dr. and Mrs. Glenn Half**.

If you would like to appear in future newsletters or on our social media sites, e-mail Transplant.Marketing@uhs-sa.com.

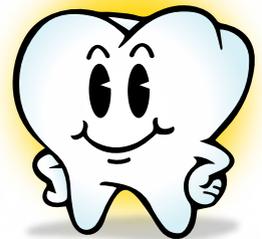


University Hospital's commitment to providing you improved access to care has led to the development of a new Adult Transplant Clinic. Similar to other expansions, design elements and art will be included to provide an environment for comfort and healing. Your healthcare experience at the clinic will not be short of spectacular! With over twice the amount of exam and treatment rooms, comfortable infusion bays, consultation rooms, nearby labs, pulmonary function treatment areas, radiology and other services – patients are assured easier access to routine care. The Adult Transplant Clinic is estimated to open early next year. We will keep you informed.

Post-Transplant Dental Tips

by Michelle Templeton, BSN, RN, University Transplant Clinic

It is important for transplant recipients to maintain good oral hygiene to prevent unnecessary infections and more serious health problems. Regular dental check-ups and cleanings can prevent this from happening. There are a few simple things you can do to maintain optimum dental health.



- Establish a professional relationship with a reputable dentist and make him/her aware of your full medical history including your medications. This is important because some medications that are taken after transplant can cause you to develop infections more easily.
- Before having dental work performed such as fillings and repairs, tooth removal, general cleaning, root canal, bonding, braces, veneers, crown and caps or bridge work, get approval from your transplant team.
- Transplant recipients must take antibiotics prior to the dental work being performed. Generally this is Amoxicillin 2g by mouth one hour prior to dental procedure or, if allergic to Penicillin, Clindamycin 600mg oral capsule one hour prior to dental procedure is the drug of choice. You can get prescriptions for these drugs from your dentist of the transplant team.
- Inspect your mouth regularly and call the dentist or the transplant clinic if you have tooth pain, swelling, chipped or cracked teeth, sores in the mouth or white patches on your tongue or the lining of your mouth.
- Brush your teeth thoroughly at least twice a day, once in the morning and again before going to bed and floss at least once a day to clean between your teeth.

Proper dental care at home, combined with seeing your dentist regularly, is your ticket to good dental health and a beautiful smile!

Reference: American Dental Association and American Heart Association

Making Life Possible



University Transplant Center's National Donate Life Month campaign in April of 2016 was an incredible success. By month's end, the campaign reached more than 700,000 people and added 200+ donors to the Texas registry. Events included Blue & Green Day Walk for Life, the Circle for Life motorcycle rally, colorful presentation at the Fiesta Flambeau Parade, and much more. Needless to say, this could lead to countless lives saved! If you would like to join patients, partners and staff in future events, follow us on Facebook @UniversityTransplantCenter for updates.

According to Donate Life America, 95% of Americans are in favor of being a donor, but only 52% are registered. Help us bridge that gap by directing friends and family to register to become organ, eye and tissue donors.

DonateLifeTexas.org/UHS

UNIVERSITY TRANSPLANT CENTER STATISTICS (1/1/2016 - 6/30/2016)

Transplants:	Lung	Liver	Kidney	Kidney & Pancreas	Pancreas	Pediatric Kidney	Pediatric Liver
	27	35	43	1	1	11	2

Outcomes Data (1/1/2013 - 6/30/2015):

Source: Scientific Registry of Transplant Recipients @ www.srtr.org

		Lung	Liver	Kidney	Kidney & Pancreas	Pancreas	Pediatric Kidney	Pediatric Liver*
1-Year Graft Survival	Expected:	86%	89%	96%	96%	No Estimate	No Estimate	67%
	UTC:	86%	92%	96%	100%	No Estimate	98%	100%
	National:	86%	89%	95%	96%	No Estimate	96%	85%
1-Year Patient Survival	Expected:	87%	92%	98%	97%	96%	No Estimate	88%
	UTC:	85%	94%	99%	100%	100%	100%	100%
	National:	87%	91%	97%	97%	97%	99%	92%

We are proud to share our most recent transplant outcomes with our patients and partners. Should you have questions regarding our survival rates, please refer to the source by visiting www.srtr.org or contact your coordinator at 210.567.5777.

*There are no 1-year pediatric liver transplant rates reported in this release. Data estimates shown are based on 3-year survival rates for pediatric liver transplants performed between 01/01/2010 and 06/30/2012, published on December 16, 2015.

Dear Ann Livers,



Q: How can I, a transplant recipient, celebrate my gift of life knowing that someone has died? How do I say thank you to my donor's family knowing they are mourning a loss?

A: Although reading this will not eliminate the guilt you may be feeling, please know it is absolutely normal. Survivor guilt is a natural reaction for many organ transplant recipients. Gratitude, appreciation, sympathy for the donor's family, and responsibility/stewardship are among common emotions felt in the days, months and years post-transplant. While no one can talk you out of your guilt, it is important to give it some attention so you can truly celebrate your donor's gift and their intention for you to survive, thrive and live a longer life.

Guilt usually requires some pondering. Sometimes, the guilt may even require processing with a professional counselor or chaplain if it seems overwhelming and repetitive for you. Ask yourself why do you feel guilty? Do you wonder why you survived and others have not survived? Sometimes answering some of those tough questions can help you process your guilt and receive this precious gift of life in a more celebratory manner.

Reg Green, author of *"The Nicholas Effect"* and *"The Gift that Heals"* and father to Nicholas Green, a 7-year old donor tragically killed while on vacation in Italy with his family; stated that the future taken from Nicholas should be given to someone else and said, "it would have been a terrible act of deprivation, it seems to me, to have not given that future to someone else." This was the Nicholas effect that increased organ donation and registration, even today.

Many donor families share the same sentiment of Mr. Green. Knowing that their loved one's future will be living on through donation is comforting and healing to them.

Reading through donor family stories, when you are ready, may help you to celebrate this gift. It may also help you see a new perspective. You are not only receiving a life-saving gift but also are able to provide healing to a donor's family. Donation has the power to create beauty out of something tragic, painful and devastating.

Begin to see your life and survival as something special. Consider sending a thank you note or card to your donor's family, even if they don't respond, just to let them know how grateful you are (guidelines on page 61 of your post-transplant manual). If they are not ready to receive it, they will keep it closed until they are ready. But when they are, it will provide them a chance to celebrate with you. They will know that you now own a part of someone they love. It can be a healing opportunity for both you, as a recipient, and them, as a donor family.

May the healing and the celebrating of this generous gift begin to comfort and lead you to the future, in honor of your donor, in a meaningful and powerful way.

Michelle Ramirez, MS, CT, CLYL is the founder of Hope for Grievors Bereavement Education, an organization dedicated to empowering organizations and bereavement professionals to better support the families they serve at the end of life and through times of grief and loss. She has empathetically supported donor families, grieving families of traumatic loss and individuals at the end of life. Response is based on personal testimonies from organ recipients and donor families and are not intended to serve as a substitute for the expert evaluation of a mental health professional or clinician.

Reference: *"The Nicholas Effect"* www.nicholasgreen.org

Save the Date

Kidney Patient Symposium

Thursday, September 8, 2016
Pica Pica Plaza
910 S.E. Military Dr,
San Antonio, TX 78214
9:00 a.m. - 3:00 p.m.
TXkidney.org

San Antonio Walk for PKD

Saturday, September 10, 2016
O.P. Schnabel Park
9606 Bandera Rd,
San Antonio, TX 78240
7:30 a.m. - 11:00 a.m.
WalkforPKD.org

Texas Kidney Foundation - Strides for Life

Saturday, October 15, 2016
Nelson Wolff Stadium
5757 W. US Highway 90
San Antonio, TX 78227
7:30 a.m. - 11:00 a.m.
TXkidney.org

Purple Stride

Saturday, November 12, 2016
Retama Park
1 Retama Pkwy
Selma, TX 78154
8:30 a.m. - 10:30 a.m.
PurpleStride.org



4502 Medical Drive MS 18
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A collage of images used for a branding campaign. On the left, two CT scans of a liver are shown. On the right, a woman wearing a large tan hat and a pink shirt is smiling while tending to pink roses in a garden. Overlaid on the CT scans are two white boxes with green text. The top box says "SOME SEE" in large letters, with "A LIVER THAT'S FAILING." underneath. The bottom box says "WE SEE" in large letters, with "LIVING DONATION" and "RENEWING LIFE." underneath. At the bottom left of the collage, there is text: "See Teresa's story at SeeHowWeSee.com". At the bottom center, the University Health System logo (a starburst) is followed by the text "University Health System" and "Thinking beyond • convention." in a smaller font.

We're excited to announce University Health System has just launched a new branding campaign, which two of our transplant patients are featured. Our real patients have a great story to share — the story of a life saved and a miracle made. You'll see Teresa Hendon's and Sandra Haggray's stories in large displays at La Cantera, North Star Mall, San Antonio Airport, and in several magazine ads. Help us share the story! Follow the campaign on our Facebook page and share it with your family and friends. Visit SeeHowWeSee.com for more stories and tell us how you are **#ThinkingBeyond!**