

HEART AND LUNG TRANSPLANTATION

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Abstract

Thoracic organ transplantation (Tx) has become clinical routine for the treatment of end-stage heart and lung disease. The article discusses the current guidelines for the indication of thoracic transplantation. It provides furthermore a brief summary about listing procedures, allocation, post-operative care and the long-term results after heart or lung transplantation.

Ischemic cardiomyopathy and the heterogeneous group of dilative cardiomyopathy represent up to 40% of the causes that lead to heart failure and finally, to heart transplantation (HTx). Other indications for HTx are valvular diseases or congenital heart failure that cannot be corrected surgically.

In the decision for Tx are equally involved the cardiologist, the cardiovascular surgeon and the patient. The main objectives are the quality of life and the success of the transplantation. The time point for placing the patient into the waiting list has to be estimated by considering the individual risk and the expected waiting time. HTx is not an operation to be performed in emergency, because patients on the waiting list must be optimally prepared.

Keywords: heart transplantation, lung transplantation, immunosuppression

Rezumat

Transplantul organelor toracale reprezintă în prezent o metodă terapeutică de rutină pentru boli cardiace și pulmonare în stadiu terminal. Articolul prezintă un ghid practic de indicații pentru transplantul de organe toracice, tipurile de tehnică chirurgicală și tratamentul postoperator, precum și supraviețuirea la distanță după transplantul de cord și de plămân.

Cardiomiopatia ischemică şi grupul heterogen al cardiomiopatiilor dilatative, reprezintă 40% din cauzele ce duc la insuficiență cardiacă şi, in final, la transplantul cardiac (HTx). Alte indicații sunt bolile valvulare şi malformațiile congenitale cardiace, care nu pot fi corectate chirurgical.

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