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Liver Transplant: Who Should Get One and Why

When your <u>liver disease</u> becomes life-threatening, it's time to consider a liver transplant. This procedure involves removing your diseased liver and replacing it with a healthy one.

You may have heard about "living-related donor" transplants. In these procedures, relatives donate a piece of their liver. This type of transplant doesn't work well for people with Alpha-1 for a number of reasons:

- 1. Alpha-1 is a genetic disease, so close relatives may share the condition.
- 2. Most centers won't transplant a liver from an Alpha-1 related donor. They're concerned that the liver will be at increased risk of injury in the future. And, the donor might also be at increased risk of liver disease.

Most people with Alpha-1 get their new livers from an unrelated organ donor, once the donor has been declared brain-dead.

Preparing for a liver transplant

Your body's immune system sees the transplanted organ as a foreign "invader," and it may attack it. There are a number of things that must be done to help your new liver survive and thrive.

First, tests must be performed to ensure that your cells and blood type are a good match to the donor's. Next, you'll have to take powerful medicines to lower your immune system. This is intended to prevent your body from rejecting your new liver.

Of course, a weak immune system can put you at risk of serious <u>infections</u>. You'll have to be careful for the rest of your life.

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Liver transplants save lives

Successful liver transplantation can provide decades of healthy life. Plus, your new, healthy liver makes normal quantities of normal AAT. Essentially, liver transplantation cures Alpha-1! However, you'll still have abnormal AAT genes. That means you can pass them to any future children.

So, if liver transplants are so great, why doesn't everyone with Alpha-1 have one? There are several reasons.

- 1. There aren't enough donor livers available.
- 2. Liver transplants are complicated surgeries and carry a high risk of death.

Waiting for a liver transplant

As mentioned above, needing a liver transplant and getting one are two different things. To start the process, you must be evaluated at a liver transplant center.

At the center, they'll <u>test your bilirubin</u>, <u>PT</u>, and <u>creatinine</u> to assess the severity of your liver disease. Based on the results, they'll assign you a Model for End-State Liver Disease (MELD) score. Your score will fall between 6 and 40, with 6 being less ill and 40 being gravely ill. Children get Pediatric End-stage Liver Disease (PELD) scores.

When a donor liver becomes available, centers look at a range of criteria to decide who gets it. The patient with the highest MELD or PELD score and a good tissue match usually receives the liver. However, "Status 1 patients," whose liver has suddenly failed may be moved to the top of the transplant list.

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What might prevent a transplant?

There are several things that can prevent you from receiving a liver transplant, even if your liver disease is severe. You can't have a transplant if you have:

- cancer in another part of your body
- serious heart, lung, or nerve disease
- active alcohol or illegal drug abuse
- an active, severe infection
- problems following your treatment plan

And, since people with Alpha-1 liver disease may also have <u>lung</u> disease, this may be a roadblock to getting a liver transplant.

For more in-depth information on this topic, please visit the Big Fat Reference Guide (BFRG). If you are enrolled in AlphaNet's Subscriber Portal, you can access the BFRG here.

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