



HEART TRANSPLANT NEWSLETTER

Dear Patients, Families, and Friends:

On behalf of the entire Vanderbilt Heart Transplant team, Happy New Year and thank you for the trust you have placed in us this past year.

As our heart transplant program looks forward to the promises of 2021, we also reflect back on 2020 – to remember and honor those who we lost, and to celebrate the milestones we achieved. In 2020, our program performed more heart transplants than any other center in the world. While this numeric achievement is gratifying, the heroic work to save lives and protect our patients was the real achievement, and one that reflects an amazing team effort – we are grateful to you for being part of that team.

We know many of you have questions about COVID-19 vaccination. In short, we strongly encourage all of our patients and their caregivers to be vaccinated once you have the opportunity to do so, either in your communities or here at Vanderbilt. You should have received several MHAV communications on this topic, including the link below. Please reach out to your transplant coordinator with additional questions or concerns.

<https://www.vumc.org/coronavirus/PatientVaccines>

Among the things to expect this year – some new faces! ([see page 3](#)), our ongoing virtual support group ([see page 10](#)), the start of a quarterly, virtual education series motivated by feedback from you ([see page 10](#)), a newly outfitted biopsy room for some patients undergoing heart biopsies ([see page 6](#)), and HOPEFULLY, better health and more safe and peaceful togetherness for all of us.

In the meantime, thank you for continuing to mask and socially distance, and for being a part of our transplant family.

Warmly,

Kelly Schlendorf & Ashish Shah

FEBRUARY 1, 2021

Vanderbilt Heart Transplant

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FOR YOU THE PATIENT:

VUMC Now Leads World in Heart Transplantation

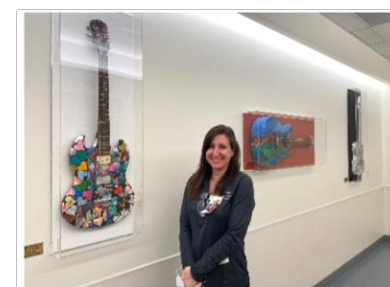
By: Matt Batchelor, reprinted from *The VUMC Reporter*

Vanderbilt University Medical Center performed more heart transplants in 2020 than any other center in the world — 124 adult hearts, 23 pediatric hearts and VUMC's first heart-lung transplant since 2006.

While a number of factors contributed to Vanderbilt's record year, chief among them were the tireless efforts of a talented multidisciplinary team and the deployment of cutting-edge technologies that have expanded the donor pool and allowed access to more organs.

"Throughout a tumultuous 2020 our heart transplant teams continued their work with a laser-like focus to impact the lives of these patients. As a result, there are 148 children and adults who have the opportunity for a long and happy life. I am incredibly proud of every member of these teams for achieving such outstanding results," said C. Wright Pinson, MBA, MD, Deputy CEO and Chief Health System Officer for VUMC.

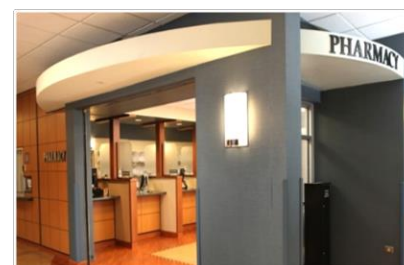
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A Chance to Give Back

Just another reason why our team Rocks.

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Pharmacist Corner

Hot Topic – See what your Pharmacy team says about Iron.

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New Faces, Saying Hello



**Samantha White, APRN
Nurse Practitioner**

Sam is originally from Greenville, South Carolina. She obtained her Bachelor's of Science in Nursing degree at the University of South Carolina (Go Gamecocks), and completed her Master's of Nursing at Vanderbilt University. She worked in Vanderbilt's CVICU for 4.5 years, and took care of many heart transplant patients during that time. In her spare time, Sam looks after her two pups, Sassy (an 11-year-old poodle) and Rex (a 1-year-old goldendoodle) who keep her on her toes. Sam is a huge college sports fan, loves to travel, and go hiking. She is excited to continue to learn and grow in the world of heart transplant. "I cannot wait to continue to impact the lives of others with this great team!"

Stephanie Dixon grew up in Knoxville, TN and attended nursing school at the Medical University of South Carolina. In 2004, she began her Vanderbilt nursing career on 7N, our inpatient cardiac stepdown unit. Some of you may be wondering why she looks so familiar. Prior to joining the transplant team, Stephanie worked for 10 years in the VHVI Heart Failure clinic. She is looking forward to this new experience, to meeting new patients, and being a part of taking care of you! She is so excited to be a member of the heart transplant team as our new post heart transplant coordinator. She is married with 2 children, Ben and Caroline, and an English Setter named Joy.



**Stephanie Dixon, RN, BSN
Transplant Coordinator**

Training:

- Internal Medicine Residency - University of Pennsylvania
- General Cardiology Fellowship - University of Pennsylvania
- Postdoctoral Research Fellowship - University of Pennsylvania and Mayo Clinic, Rochester MN
- Advanced Heart Failure and Transplant Fellowship – University of Pennsylvania



**Dawn Pedrotty, MD, PhD
Advanced Heart Failure and
Transplant**

We are pleased to introduce you to our newest Transplant Physician, Dr. Pedrotty.

Dr. Pedrotty is interested in inflammatory cardiomyopathies, specifically myocarditis and cardiac sarcoidosis, including early detection of arrhythmias and prevention of sudden cardiac death. She has started a cardiac sarcoid clinic at Vanderbilt. She also focuses on advanced heart failure

therapies as well as the development and implementation of cardiac health innovative programs to improve patient outcomes via patient education and adherence. She has a PhD in biomedical engineering with a focus on translational investigation specifically with novel device and biomaterial development.

She enjoys hiking, indoor cycling, Pilates, and barre. She cannot wait to start traveling again once safe. She also is a big advocate and participant in community outreach including tutoring and mentoring underserved youth and providing medical care to those in need locally and abroad.

Dr. Pedrotty looks forward to meeting you and providing care as part of your heart transplant team.

Departing Friends, Saying Goodbye



**Dr. Mark Glazer, MD
Interventional Cardiology**

As you may have heard, Dr. Glazer has recently retired from the Cath Lab. He has performed many biopsies through the years, and many of you have shared laughs and special moments with him. He will continue to care for general cardiology patients in the clinic, and continue in his administrative role, Executive Medical Director of VUMC's Center for Health Information Management. For fun pictures and a little more about Dr. Glazer, hold down control button on keyboard and click his photo to the left.

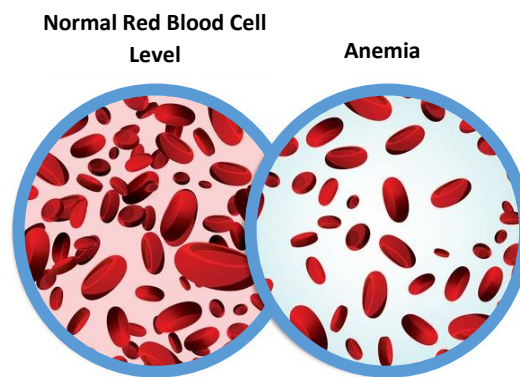
The Pharmacists' Corner

By: Stephanie Heeney, PharmD, Kim Harrison, PharmD, and Madeline Morrison, PharmD

DID YOU KNOW...many patients require iron supplementation after heart transplant?

Anemia, or a low red blood cell count, has many potential causes after transplant. One of the most common causes is iron deficiency, where an individual does not have enough iron available to make red blood cells. Symptoms may include fatigue or weakness. A diagnosis must be made using laboratory values, including red blood cell counts and iron studies. Because iron deficiency is common after transplant, the heart transplant team will check these labs and let you know if extra iron supplementation would be helpful.

Iron may be supplemented with either oral pills or with an intravenous (IV) infusion (or both). Each strategy has unique pros/cons:



Pros		Cons
Oral Iron	<ul style="list-style-type: none"> - Does not require IV access - May be less expensive 	<ul style="list-style-type: none"> - It takes longer to replace iron stores (up to 6 months) - Common side effects include: nausea, constipation, metallic taste, dark-colored stools
IV Iron	<ul style="list-style-type: none"> - A faster way to replace iron 	<ul style="list-style-type: none"> - Will likely require multiple infusion appointments

Tips for taking oral iron supplementation:

- Taking with food may reduce stomach-upset or nausea.
- You may need to take a stool softener or laxative to maintain regular bowel movement frequency.

What to expect during an intravenous (IV) iron infusion:

- The length of time and number of infusions will depend on the type of IV iron selected/covered by your insurance.
- Infusions are usually well tolerated. Very rarely an allergic-type (anaphylactic) reaction may occur during the infusion.

Would you like to see a pharmacist? We have TeleHealth and limited clinic visits available for medication education, assistance managing your medication, and help accessing medication. Reach out to your coordinator if you would like to have a visit arranged with a transplant pharmacist.

#1 in the World Continued...

The transplant teams include cardiologists and cardiac surgeons, intensivists, nurses, nurse practitioners, pharmacists, social workers, financial coordinators, nutritionists, organ procurement coordinators, preservationists, operating room staff, cardiac anesthesiologists and nurse anesthetists, among others, led on the adult side by Ashish Shah, MD, professor and chair of Cardiac Surgery; Kelly Schlendorf, MD, MHS, associate professor of Medicine and medical director of VUMC's Adult Heart Transplant Program; and JoAnn Lindenfeld, MD, professor of Medicine and director of the section of Heart Failure and Transplantation; and on the pediatric side by David Bichell, MD, William S. Stoney Jr. Professor of Cardiac and Thoracic Surgery and chief of Pediatric Cardiac Surgery at Monroe Carell Jr. Children's Hospital at Vanderbilt; and Debra Dodd, MD, professor of Pediatrics and medical director of the Pediatric Heart Transplant Program at Children's Hospital.

"Ours is an amazing team of individuals who have accomplished something truly extraordinary during what has been a challenging and extraordinary year," Schlendorf said. "I think we all have a lot to be proud of."

In addition to people, innovation and technology have played key roles in the success of Vanderbilt's heart transplant programs. In February 2020 the adult team used a novel organ preservation technique to transplant a heart from a donor who died from cardiac death (as opposed to brain death) for the first time in Tennessee. Hearts from these donors (often referred to as DCD) are anticipated to expand the donor pool by up to 30-40%.

In September 2020, the team performed the first dual heart-lung transplantation of a COVID-19 patient in the world.

And throughout the year, the team has continued to pioneer transplantation of hearts from hepatitis C-infected donors, another strategy that in the current era has significantly increased the number of transplantable organs.

"The Covid-19 pandemic forced our team to make difficult choices about heart transplantation as a priority," Shah said. "With each challenge, this team, along with VUMC senior leadership, found innovative solutions to allow for safe transplantation. While the overall volume of cases is gratifying, the heroic efforts to save lives and protect our clinical teams is the real achievement."

In addition to the 23 pediatric heart transplants, the pediatric heart team placed ventricular assist devices in six patients, including in five infants less than 1 year old, Dodd said.

"Mechanical circulatory support in this young age group has been classically very difficult compared to other age groups, but we have had excellent success bridging our sickest infants to transplant," she said.

The combined adult and pediatric transplant teams care for more than 600 transplant recipients as well as multiple individuals with advanced heart disease who are on the heart transplant waitlist. In addition, many patients are evaluated for newly approved therapies or considered for new and promising experimental therapies for advanced heart failure.

The Vanderbilt Transplant Center is part of an elite group of heart transplant programs that have performed nearly 1,500 transplants. The center's adult heart transplant program began in 1985, followed by the opening of the pediatric program in 1987.

"This program exemplifies the best of VUMC," said Seth Karp, MD, H. William Scott Jr. Professor, director of the Vanderbilt Transplant Center and chair of the Section of Surgical Sciences. "World-class research and innovation are being used to directly benefit patients in our community and help others across the world use new techniques and technologies to help their patients."

Rockin' at the Chance to Give Back

By: Madeleine Hallum RD, CSG, LDN (VAD/Heart Transplant Dietitian)

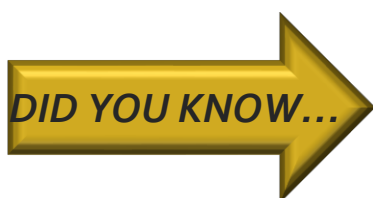
Last March, I was given the opportunity to create some art for our new cardiac stepdown unit on 7 MCE. I felt as though this was my time to “give back” to VUMC since it has given me so much. Vanderbilt trained me as a Registered Dietitian in 2006 and saved my life in 2010 after I was Life-Flighted here.



With donations from Dr. Jessica Huston, and nurse practitioner Whitney Batchers family, I was able to paint two electric guitars and one acoustic. The electric guitar is adorned with hearts that our VAD/TXP staff, their families, and various employees helped to create. After Dr. Shah showed me how to remove a pickguard on the electric guitar, I was able to replace the old one with Yupo Paper and Alcohol Ink. The other two guitars were painted with acrylic paint.



I am thankful for the opportunity to decorate the halls of VUMC. I hope the enjoyment I felt while creating this artwork translates into a more enjoyable environment for our patients.



You can still feed your competitive hunger after heart transplant. Click the link below to find out more about the Transplant Games!

<https://www.transplantgamesofamerica.org/>

Mental Health Minute: Practicing Gratitude

By: Daniel D. Daunis, MD

Maintaining our mental health in the face of transplant is critical both to the health of our hearts and our overall well-being. During these challenging times, it can be difficult to practice routine things we do to maintain our health and wellness. Fortunately, there are many alternative things we can do to improve our mental health. Even when faced with extraordinary challenges, we should always be able to find something we are thankful for. Acting on the things we are thankful for is called practicing gratitude, and it is critical for our mental health.

Practicing gratitude involves bringing our attention to what we are thankful for. It focuses our attention to positive aspects of our lives and the goodness that is around us. I know what you are thinking... after everything that happened in 2020 you want me to be grateful?! The short answer is, Yes! In times of uncertainty practicing gratitude is not only helpful but it is essential for our mental health (trust us here, lots of research backs us up!). According to Harvard researchers, "Gratitude helps people feel more positive emotions, relish good experiences, improve their health, deal with adversity, and build strong relationships." It has also been shown to improve depression, anxiety, motivation, sleep, and health issues.

Here are some simple ways to practice gratitude in your own lives;

- Each morning write down one thing you are grateful for (it can be as simple as "I am grateful for coffee")
- Thank someone for doing something nice for you.
- Tell a family member you are thankful for them.
- Reflect on some positive aspects of the pandemic (ex: "it has allowed me to slow down.")

During a time where we feel we have lost control of so much, expressing gratitude to others is a simple act we have control over and can take each day to improve our lives.

Better Care for a Better You



A new Biopsy Room has been opened on the 5th floor of Medical Center East, where patients can obtain biopsy procedures without sedation. Patients are now able to check in for their appointment, complete their biopsy, labs and clinic visit all in one area. Advantages for this new process include a more efficient visit, and less waiting time. Biopsies are currently performed in the biopsy room on Mondays and Tuesdays. Please talk with your coordinator to see if this may be an option for you. It has been a collaborative effort between the heart transplant MDs, NPs, schedulers, VHVI diagnostics and check-in team members as well as Cath Lab MDs and others to make this idea a reality. There has been a longstanding desire to perform heart biopsies in this space and, so far, it has been a success.

Understanding CAV & Tips to Protect Yourself

By: Dr. Richa Gupta, MD, Aniket Rali, MD, Allman Rollins, MD (Transplant/Advanced Heart Failure Fellows)

What is CAV?

CAV stands for cardiac allograft vasculopathy, which is a disease that affects the coronary vessels of the transplanted heart. This process is different from traditional coronary artery disease in non-transplant patients (called atherosclerosis) in which blockages are caused by buildup of cholesterol plaque. In CAV, the coronary arteries themselves thicken, limiting blood flow to the heart (see Illustration). While cholesterol plaque may affect only one or two arteries in a few spots, CAV typically affects all three arteries as well as small arteries we cannot directly see. This can lead to damage of the transplanted heart over time, more heart failure and in some cases the need for a repeat heart transplant.

How do we detect CAV?

We typically screen for CAV within a few months of transplant and then annually thereafter with either coronary angiograms (where we inject dye into the coronary arteries to visualize them) or with stress test imaging such as cardiac MRI or PET to find areas with poor blood flow.

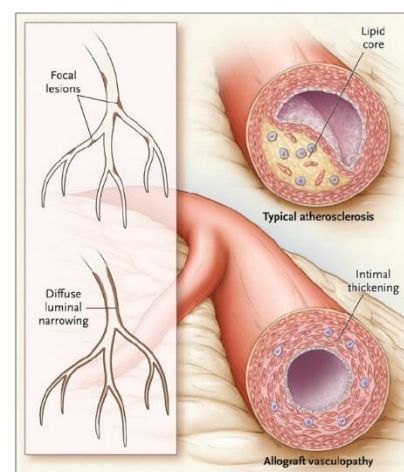
What are some of the risk factors for CAV that are within my control?

Certain medications can slow the progression of CAV but cannot cure it. Because of this, it is incredibly important to work on getting risk factors under control—these include high blood sugars, high blood pressure, tobacco use, obesity, and poor diet.

What are steps I can take to improve the longevity of my transplanted heart?

- Take your medicines as we prescribe them!
 - We generally recommend a statin (cholesterol medicine) and a baby aspirin for prevention of CAV for patients who can tolerate them. There is good evidence that these improve longevity of the transplanted heart and reduce the likelihood of CAV.
 - Maintain good blood pressure control (we will prescribe blood pressure medicines where they are needed).
 - Do not miss your immunosuppression—missing doses increases the risk of rejection and repeated episodes of rejection can increase your risk for CAV down the road.
- Have good control of your blood sugars and diabetes.
- Maintain a healthy weight and stay active.
- Eat a heart healthy diet, low-sodium diet full of nutrient-rich foods including fruits and vegetables. Limit intake of fried, high-fat, high-calorie foods, and refined carbohydrates.
- Do not smoke or use tobacco products!
- Tell your coordinators and doctors if you are having trouble with any of these so we can help.

Cardiac allograft vasculopathy (bottom vessel) versus typical coronary artery disease due to atherosclerosis (upper vessel) (Colvin, et al)



References:

1. Chih S, Chong AY, Mielniczuk LM, Bhatt DL, Beanlands RS. Allograft Vasculopathy: The Achilles' Heel of Heart Transplantation. J Am Coll Cardiol. 2016 Jul 5;68(1):80-91.
2. Colvin, Monica & Harcourt, Nonyelum & Duprez, Daniel. (2012). Endothelial Dysfunction and Cardiac Allograft Vasculopathy. Journal of cardiovascular translational research. 6. 10.1007/s12265-012-9414-3.

Time to Get Involved

We are excited to announce the return of the Heart Transplant Support Group! We will meet online via Zoom on the first Tuesday of every month from 12 noon to 1 pm CST. This is an opportunity for you and/or your caregivers to meet with other heart transplant recipients. In this Support Group, you'll have the chance to share your transplant experience with others who have followed a similar path. Quarterly, a guest speaker will provide an interactive education session on topics such as mental health, medications, nutrition, etc.

**Our First Quarterly Education Session will be:
February 2, 2021 with Dr. Daunis from Transplant Psychology**

We hope that the Support Group will provide an opportunity to strengthen our transplant community, in a time where we all may feel disconnected. We hope you will join us!



If you have any questions, you can contact Maura Webb at 615-343-8451

<https://zoom.us/j/94499478581?pwd=UFQwS0ZIYmNRZ3V2RjkvNU14NVdVQT09>

Meeting ID: 944 9947 8581

Passcode: 812985

Click logo below for more information.



Interested in volunteering your time or talent, connecting us with in-kind donations, making a suggestion or asking a question? Our Executive Director, Davey Shepherd, can be reached at:

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COVID-19 Vaccination Recommendations

We encourage all heart transplant patients who are more than one month past their transplant date and have not received monoclonal antibody treatment for COVID-19 in the last 90 days, to receive the vaccine as soon as you have the opportunity to do so. If you were transplanted less than one month ago or are unsure about the appropriate timing for you to get vaccinated, please contact your transplant coordinator to discuss.

VUMC's COVID website is updated frequently and is the best source of information on COVID vaccines:

<https://www.vumc.org/coronavirus/PatientVaccines>

This site shares guidance on when you might be eligible to receive your vaccination, how you will sign up at that time, and FAQs on the vaccine itself.

We also encourage all waitlisted patients and their caregivers to be vaccinated, ideally more than 2 weeks prior to transplantation. If you have questions about appropriate timing once the vaccine is available to you, please reach out to your pre-transplant coordinator.

Remember that you may also have opportunities to receive the vaccine in your community. Please contact your county health department for updates on their plans for vaccine distribution, and how you might register.

