

ABOUT LUNG TRANSPLANTS

About Lung Transplants

Lung transplantation is an option for certain people with idiopathic pulmonary fibrosis (IPF). It is one form of treatment currently available for IPF, but not everyone is eligible, and finding a donor lung isn't guaranteed. Lung transplants have been shown to improve both life expectancy and quality of life in people with IPF, but there are serious risks involved.

In order to qualify for a lung transplant, you must meet certain criteria. For one, you must have no other significant health problems, such as cancer; heart, liver, or kidney disease; or chronic incurable infections. This can be a challenge in people with IPF, as many suffer from other lung conditions, coronary artery disease, or other problems that make them ineligible to receive a transplant. Your doctor will be able to tell you if you are eligible for a transplant based on your overall health status.

In the past, individuals over the age of 65 rarely received transplants. However, because surgical techniques and results have improved, more centers are performing transplants in older patients.

Risks of Lung Transplantation

Lung transplantation is a highly risky procedure and there is no guarantee that it will be successful. Risks include:

- Illness or fatality from the surgical procedure itself
- Infection or cancer brought on by long-term use of medicines that suppress the immune system
- Rejection of the donor lung

Only your doctor can say whether or not you are a possible candidate for a lung transplant. Medical guidelines recommend that the option of lung transplant be brought up at the time IPF is diagnosed if the patient meets all the criteria for transplant. Before pursuing the option of a lung transplant, you should discuss all the potential risks and benefits with your doctor.

Waiting is Now Reduced for Eligible Patients

The new lung allocation system (LAS) used by the United Network for Organ Sharing (UNOS, www.unos.org) has set new standards for how they evaluate transplant candidates. LAS is now based on the severity of lung disease. As a result, wait times have been reduced considerably for patients with severe lung function issues, including people with IPF.
