

Quality of life in patients with transplanted hearts

 Ivana Simić*,
 Barica Stanić

General Hospital "Dr. Josip Benčević", Slavonski Brod, Croatia

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***ADDRESS FOR CORRESPONDENCE:** Ivana Simić, Opća bolnica "Dr. Josip Benčević", Andrije Štampara 42, HR-35000 Slavonski Brod, Croatia. / Phone: +385-91-502-9810 / E-mail: isimi1310@gmail.com

ORCID: Ivana Simić, <https://orcid.org/0009-0008-8287-3628> • Barica Stanić, <https://orcid.org/0000-0002-9407-5614>

Introduction: Heart transplantation is a surgical procedure in which a patient's heart is replaced with a suitable donor heart. Today, it is considered the gold standard in treating patients in the terminal stage of heart failure with an expected life span of less than one year, despite optimal conventional therapy. Given the severity of the disease, the patient's quality of life is significantly compromised in all aspects. The primary criterion for indicating transplantation is the functional capacity of the patient. According to the well-known NYHA classification (New York Heart Academy), these are patients in functional class III or IV. For a successful transplantation, a careful selection of patients and donors, as well as a well-organized transplant team, are essential. Heart transplantation now enables excellent long-term survival of patients (1-year survival rate is 81%). As the number of transplantations and survival rates continue to rise, emphasis is placed on the quality of life of the transplanted patient. It is important to note that a better subjective perception of health and functional abilities is one of the most critical factors affecting the quality of life after transplantation¹. For most patients, the quality of life improves, and with the help of a good rehabilitation program, they can almost fully return to performing daily physical activities. The patient's understanding of their own illness, preoperative preparation, postoperative procedures, and complications, as well as a specific post-transplantation lifestyle and monitoring, is crucial for a longer and higher quality life. Family support, the support of the environment, and the entire healthcare team involved in the transplantation program are extremely important in raising awareness about the quality of life of transplanted patients.

Case report: 57-year-old female experienced an anteroseptal myocardial infarction primarily manifested by cardiorespiratory arrest and underlying ventricular fibrillation. Following successful resuscitation and primary percutaneous intervention, ischemic cardiomyopathy with severely reduced ejection fraction persists. In secondary prevention of sudden cardiac death, the patient underwent implantation of a cardioverter-defibrillator and was placed on the heart transplantation waiting list. The heart transplantation took place in August 2022 at Dubrava University Hospital, Zagreb. Subsequently, myocardial biopsies were performed on multiple occasions, revealing pathological signs of rejection. Throughout 2023, the patient experienced frequent hospitalizations at the Cardiology Department at Slavonski Brod Hospital. The patient presented with poor general condition, nausea, vomiting, lack of appetite, dehydration, and a weight loss of up to 20 kilograms. During this period, secondary diabetes was diagnosed as a consequence of immunosuppressive therapy. The patient's quality of life was significantly impaired, necessitating a multidisciplinary treatment approach involving cardiologists, diabetologists, infectious disease specialists, physiotherapists, and psychologists. Nursing interventions focused on addressing issues included monitoring food and fluid intake, oral and parenteral rehydration, blood glucose monitoring and correction, education on diabetes and its complications, and monitoring body weight. Throughout this process, the nurse acted as a caregiver, educator, and health promoter, ensuring an improvement in the patient's quality of life². Over a two-week period, the patient experienced gradual recovery and was discharged home in an improved condition with recommended therapy. The patient's condition is regularly evaluated through follow-up appointments at the cardiology day clinic.

Conclusion: Heart transplantation represents the gold standard in treating patients with terminal heart failure when all other treatment modalities have been exhausted. An individualized approach to the patient, and collaboration among different specialists within a multidisciplinary team play a crucial role in achieving successful recovery and improving overall health, thereby enhancing the quality of life.

LITERATURE

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