

# WHAT MAKES A TRANSPLANT SUCCESSFUL?

## COMPLICATIONS OF CIRRHOSIS

### ASCITES

Fluid in the abdomen (ascites) is a common problem in patients who have severe liver disease and are waiting for transplants. Patients may notice that their clothes are fitting more tightly or that their bellies seem to be swelling. They may gain weight or have swollen ankles. Treatments for this fluid may include a very low salt diet and water pills (such as Aldactone® or Lasix®). Sometimes, these treatments do not work. In this case, your doctor may want to drain the fluid from your stomach. This is called *paracentesis*. A tiny needle is put through the skin of your stomach to allow the fluid to drain off. This causes only a little discomfort and can give great relief.

### PERITONITIS

An infection within the fluid (ascites) in the abdomen is a serious problem for patients with liver disease. This infection is called *peritonitis*. You may get a fever, stomach pain, or have a rapid buildup of fluid in the abdomen. Some patients may have only nausea and feel like they have the flu. If you have any of these symptoms, you must call your doctor or nurse at once or go to the emergency room. This can be a life or death emergency and should not be overlooked. Peritonitis can be treated if it is caught early. Intravenous antibiotics may be needed for 7 to 10 days. If you have had peritonitis once, your doctor may want you to have a daily antibiotic to take by mouth once you are discharged.

### BLEEDING

Patients with liver disease can have bleeding for many reasons. Patients may bleed from anything that anyone else would bleed from such as ulcers or hemorrhoids. They can also have bleeding from enlarged veins near their liver. This will happen in nearly one third of patients with liver disease at some time and could happen over and over again. When bleeding starts, patients will either vomit blood or pass blood in their stool. This is a life or death emergency, and you should tell your doctor or nurse at once. They will tell you what to do and where to go. Do not delay in calling the hospital if you are bleeding. Go to the nearest emergency room for treatment. Do not drive yourself. If you are feeling weak or dizzy, call an ambulance.

There are many treatments for bleeding from enlarged veins. Endoscopy with injections to clot the blood or using rubber bands is the first choice. TIPS may also be needed to help control the bleeding or keep it from starting again.

Patients with liver disease are at risk for ulcers of the stomach too. For this reason, you should not take any aspirin, Motrin®, ibuprofen, Naprosyn®, Aleve®, or Nuprin®. You should not take any drugs that have one of these compounds in them without checking with your doctor first.

### ENCEPHALOPATHY

When the liver is damaged, it cannot clear toxins (poisons) from the bloodstream very well. Toxins in the blood can cause severe confusion. The medical name is *encephalopathy*. Early signs are being forgetful, confused, or

## ***COMPLICATIONS OF CIRRHOSIS***

agitated. You may notice problems with sleeping or a feeling that you are just not yourself. At the extreme, you may become confused and not know where you are, and you may even go into a coma. There are many things that may trigger this problem:

- Bleeding
- Infection
- Dehydration (not drinking enough fluid)
- Eating the wrong foods
- Medications
- Chemical changes in the blood
- Not taking the medications as prescribed

It is treated by correcting everything listed above. Protein in the diet is cut back, as this plays a role in confusion. Drugs, either lactulose or neomycin, are also given to try to treat the confusion.

Several drugs may make this condition worse including narcotics and sleeping pills. You should not take any of these drugs, even if told to by another doctor, until you check with your transplant doctors.

## ***FATIGUE***

Being very tired (fatigue) is a common problem facing patients while they wait for transplant. You may have sleep problems and not be able to get a good night's sleep even though you are very tired. Most patients have some sleep problems before the transplant. It does improve after the transplant, and many patients are able to return to normal activities and work. The best advice is to try to keep a day/night schedule if you can. Don't nap, so you can increase your chance to rest at night. If you need something to help with sleep, discuss it with your doctor. Light exercise is suggested in order to keep good muscle tone. It may also improve your sense of well-being and reduce fatigue.

## ***WEIGHT CHANGES***

Weight changes often take place during the waiting period. Weight may increase because of the buildup of fluid or loss of muscle mass. You may see your face and arms getting thin even if your weight is not changing. Nutrition is important for keeping your muscle strength (see Nutrition section). Report your weight changes to your doctor.

## ***DEPRESSION***

Again, the waiting period is hard for all patients and their families. It can be frustrating and discouraging. It is natural to have these feelings when you are dealing with chronic illness. It is helpful to discuss your feelings with your family members and doctor. Some people may need medical treatment for depression during this period. You should express your feelings so that you can get treatment. Many patients find that the support group is a place where their concerns and fears may be shared. You are not alone in how you feel. The transplant team can suggest many ways to cope with your feelings while you wait.