

A Tradition of Excellence

METHODIST TRANSPLANT CENTER
HOUSTON, TEXAS

2009 Year in Review



Methodist
Transplant Center
Houston, Texas

LEADING MEDICINE®



Dear Friends,

Words seem inadequate to sum up what it means to save or extend one life, let alone 308 lives! In 2009, the Methodist Transplant Center in Houston, Texas, provided a second chance at life for more men and women than in any previous year, reinforcing a tradition of excellence begun by Methodist's own Dr. Michael E. DeBakey nearly 50 years ago.

During the past year, we made great strides in transplantation and treatments for end-stage organ failure. We welcomed several new physicians, surgeons, researchers and expert staff to our growing team. We continued to push for more effective assist devices for heart failure, advanced desensitization protocol and programs for kidney patients, tumor reduction for potential liver patients, and methods to expand the indications for lung patients.

I am proud to note that in 2009, after years of being recognized as one of "America's Best Hospitals" by *U.S. News & World Report*, the magazine placed Methodist on its prestigious Honor Roll for the first time. This year every area of our transplant program — heart and heart surgery, respiratory disorders, digestive disorders, and kidney disorders — is honored.

This focus on excellence is why I'm proud to lead the Methodist Transplant Center team — the best anywhere in the country. Thanks to them, our program continues to grow — not only in volumes and outcomes, but also in patient satisfaction, participation and giving back. In addition, I give my heartfelt thanks to the phenomenal leadership of our executive council at Methodist, Drs. Barbara Lee Bass, Timothy Boone, Michael Lieberman, Alan B. Lumsden, Joseph Naples, Miguel A. Quinones and Richard Robbins.

I hope this report gives you a glimpse of the miracles taking place within the Methodist Transplant Center and our dedication to advancing organ-failure treatments and transplantation.

Warm regards,

A. Osama Gaber, M.D., FACS
Director, Methodist Transplant Center
Professor of Surgery, Weill Cornell Medical College
Vice Chair, Administration & Faculty Affairs, The Methodist Hospital Department of Surgery



A LEGACY OF LEADERSHIP

The Methodist Transplant Center in Houston, Texas, has long enjoyed a reputation for pioneering leadership in transplantation. We treat patients with end-stage organ disease including heart failure, lung disease, liver disease, kidney failure, diabetes and pancreatitis. From our physicians and surgeons to our financial coordinators and dietitians, the tradition of excellence begun nearly 50 years ago continues to be at the heart of all we do.

While research and clinical advances have enhanced the span and quality of life for thousands of patients through the years, it's patient-centric care that distinguishes Methodist from all others. We strive to treat every patient as a mother, son, friend — understanding that each is just that to their loved ones.

The Methodist Transplant Center achieves some of the best clinical outcomes in the world due to our multidisciplinary approach in treating end-stage organ failure. We aim to help patients manage their diseases until transplant becomes the best option. In the end, leading medicine is a philosophy we not only profess — we practice it.



NORA'S HOME

Thanks to the extraordinary compassion of a seven-year old girl, transplant patients and their families one day soon will enjoy a "home away from home" near The Methodist Hospital. The JLH Foundation pledged one million dollars for 2010 to help build and operate Nora's Home, named for Nora Gaber, whose short life culminated in providing a second chance for several individuals through organ donation. Along with land contributed by The Methodist Hospital and Nora's Life Gift Foundation, Nora's Home ultimately will serve families challenged with the health care needs of a loved one. For more about Nora's Home, visit norashome.org.

2009

YEAR IN REVIEW

From its beginnings, the Methodist Transplant Center has been known internationally for excellence. Yet, this tradition is most alive in the hearts and minds of the center's team — individuals who work to exceed their own expectations for leadership in transplantation.

THE PAST YEAR is certainly a hallmark of innovations in clinical treatments, research, outreach and, most important, patient-focused programs that have laid a foundation for advances for years to come.

Hundreds more men and women, and their referring physicians, chose the Methodist Transplant Center this year with a single goal — to save their lives from end-stage organ failure. Many of these patients were listed for or received kidney, liver, pancreas, lung, heart or multi-organ transplants, and can expect outcomes rivaling and exceeding top centers in the country. In fact, the center performed 308 transplants, an increase of 31 percent over 2008.

With more transplants comes a comparable growth in the ability to improve outcomes through research. A growing spotlight on pre-transplant disease management has fueled clinical programs and research, as well as stronger collaboration with community physicians.

The 2009 establishment of a Physician Partnership Program actively involves referring physicians in their patients' care. Another effort provides a firsthand look at transplantation for staff of dialysis centers and physician offices, the frontline caregivers for individuals suffering from renal failure.





From surgeons to administrative staff, the Methodist Transplant Center lives a philosophy of championing life. Few events capture this better than the annual Celebration of Life, held during national Donate Life Month in April. The event celebrates the life-giving opportunities provided to our patients by organ donors and transplantation. More than 300 people attended the 2009 gathering, which unveiled a painting by local artist Jody Respondek, depicting the continuation of life through organ donation and transplantation. Additionally, Methodist staff member George Kovacik and his musical partner Jeff Balke played “Someone Came to Help Me,” a song Kovacik penned to capture the essence of organ donation.

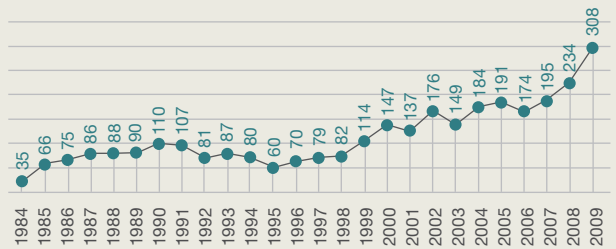
In its inaugural New Beginnings CME course, Methodist hosted nearly 150 physicians, nurses, dialysis staff, organ donor and transplant coordinators, and other health care staff in a full day of transplant education. Topics covered heart, lung, liver, kidney, pancreas and islet transplant, with a full hour of ethics credit.

A single-minded focus on the patient drives all we do. Expert social workers provide helpful programs for patients, caregivers and living donors to navigate the administrative, medical and emotional challenges that accompany organ failure and transplantation. In 2009, the Transplant Friends volunteer program got off the ground, offering volunteer opportunities for patients and their families.

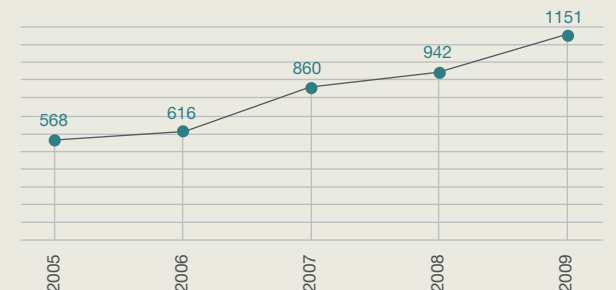
While here we reflect on a year of accomplishments, we already are working to surpass our own goals in 2010, continuing a tradition of excellence.

MTC Transplants Performed by Year

From 1963-1983 a total of 386 transplants were performed.



MTC Transplant Evaluations Performed by Year



Heart Transplant

METHODIST TRANSPLANT CENTER DIRECTORS

Matthias Loebe, M.D.
Ph.D., FACC
Associate Professor of Surgery,
Baylor College of Medicine
Chief, Division of Transplant and
Assist Devices, Methodist DeBakey
Heart & Vascular Center
Surgical Director, Thoracic
Transplant

Guillermo Torre-Amione, M.D.
Ph.D., FACC
Associate Professor of Medicine,
Weill Cornell Medical College
Medical Director, Heart Transplant

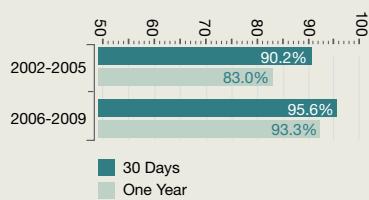
Scott Scheinin, M.D., FACS
Diplomat, American Board of
Thoracic Surgery
Director, Thoracic Organ
Procurement



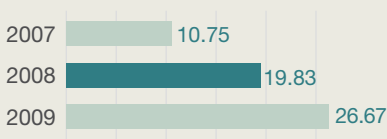
THE WORLD-RENOWNED LEGACY OF DR. MICHAEL E. DEBAKEY continues to be at the center of Methodist’s transplant program.

Thanks to the abundant experience of our cardiologists, cardiothoracic surgeons and other health care professionals, our thoracic transplant program is the largest in Texas, providing more than 30 heart transplant patients a second chance at life in 2009.

MTC Heart Transplant Patient Survival Rates



MTC Average Heart Transplant Waiting List by Year

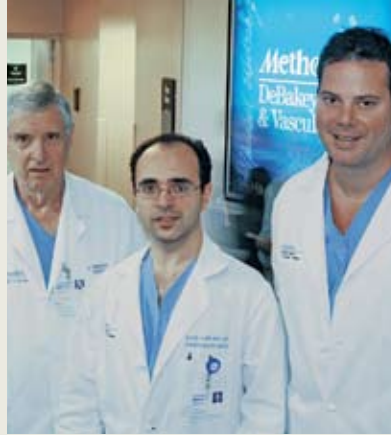


Most important, we continue to monitor and update our protocol, keeping patient safety and resource conservation at the heart of all we do.

The Methodist Transplant Center remains at the forefront of developing distinct immunotherapy regimens for each patient. In 2009, the heart program continued to fulfill this goal by participating in a number of clinical trials aiming to find innovative treatments for heart failure and to improve long-term survival after transplant.

For patients with more complex cases, Methodist often is a prayer answered due to its faculty’s unparalleled expertise — and wait times less than half the UNOS national average for critical patients.

In October, The Methodist Hospital hosted a “Leading Hearts” gala which included a panel discussion with the late Charlie Wilson, a 2007 Methodist heart transplant recipient, and former Polish President Lech Walesa. More than \$1 million was raised for heart failure research, honoring Dr. George Noon and other physicians at the Methodist DeBakey Heart & Vascular Center.



Rochelle's Story



Rochelle Johnson, a young mother of three, is the picture of calm. She is relaxed and her voice is laced with mixed emotions when talking about her journey with congestive heart failure.

Johnson's path to a healthy heart has included some stumbles. But Methodist's Charity Care Program and her team of physicians, nurses and research scientists have helped her find a way to return to a normal life. Before undergoing heart transplant surgery, her life was interrupted by constant hospital emergency room visits and short-term stays. Johnson had developed post-partum cardiomyopathy, a condition that can occur in pregnant women, which severely weakened her heart.

After more than two years of medical treatment, Johnson received an LVAD, a pump that kept her heart beating while she waited for a heart transplant. In September 2009, Johnson got that second chance at life — a new heart that revived her fighting spirit.

Johnson has since returned home to her family. She will be closely monitored to ensure her heart remains strong and healthy.

VALENTINE'S CELEBRATION FOR LVAD PATIENTS

The LVAD team at Methodist hosted its fourth annual Valentine's Day party for LVAD and heart transplant patients to celebrate their renewed lives. Each year, the team provides lunch, patient stories and old-fashioned camaraderie for patients in a reunion-type environment. Various device companies support and attend the event, showcasing the very devices that have saved or improved the guests' lives.

In 2009, more than 100 people attended the special event, the most yet.

MTC Heart Transplants Performed in 2009

Heart only	22
Heart/lung	7
Heart/kidney	1
Heart/double lung/liver	1

Left Ventricular Assist Devices

METHODIST TRANSPLANT CENTER DIRECTORS

Matthias Loebe, M.D.
Ph.D., FACC
Associate Professor of Surgery,
Baylor College of Medicine
Chief, Division of Transplant and
Assist Devices, Methodist DeBakey
Heart & Vascular Center
Surgical Director, Thoracic
Transplant

Guillermo Torre-Amione, M.D.
Ph.D., FACC
Associate Professor of Medicine,
Weill Cornell Medical College
Medical Director, Heart Transplant

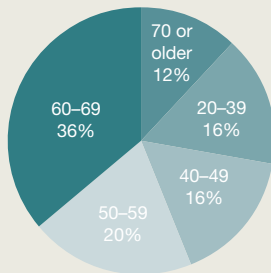


WHILE DR. DEBAKEY ADVANCED ORGAN TRANSPLANTATION, he and his team at Methodist pioneered the development of mechanical-assist devices for helping a weakened heart pump blood through the body. From the day the world's first left ventricular assist device (LVAD) was implanted at Methodist in 1967, these devices have been used as a "bridge to transplant." Modern assist devices now can sustain a patient's heart for years, and some provide urgent support following open-heart surgery or acute myocardial infarction.

Methodist's vast experience with LVADs recently has helped surgeons better determine which, of a variety of devices, would most benefit an individual patient. Methodist physicians remain at the forefront of LVAD research, pioneering the development of second- and third-generation devices. Additionally, Methodist's LVAD program nearly exclusively implants "non-pulsatile" devices, smaller pumps that help improve a patient's opportunity to enjoy typical activities without trading favorable long-term outcomes.

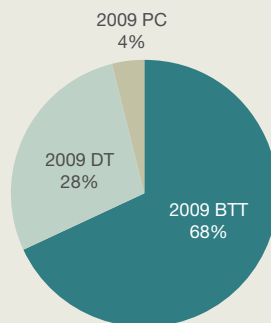
Methodist was the only program in the nation to receive two awards at the 2009 INTERMACS meeting: The Vanguard Center Award and James K. Kirklin Award.

2009 MTC LVAD Implants by Age



Number of Implants

2009 Indication for LVAD



DT — Destination Therapy
BTT — Bridge to Transplant
PC — Post Cardiotomy

Shayla's Story



For nearly three years, Shayla Hendricks has worked as a gang counselor for the City of Houston. She works directly with schools, where she holds both one-on-one and group counseling sessions with middle-school children who are at risk or display signs of gang activity. Despite several medical obstacles she has encountered, Hendricks is still going strong.

Hendricks was being treated for Hodgkin's Lymphoma, a type of cancer that develops from cells in the lymph system, when the chemotherapy she was undergoing weakened her heart and eventually caused heart failure. Last year, she received an LVAD

and just three months later, returned to the work she loves.

In remission now, Hendricks will be listed for heart transplant when she lives a few years cancer-free. In the meantime, Hendricks can expect her LVAD to continue helping her heart for years, thanks to advances in the device. Ever optimistic, she says she'll be ready when the time comes.

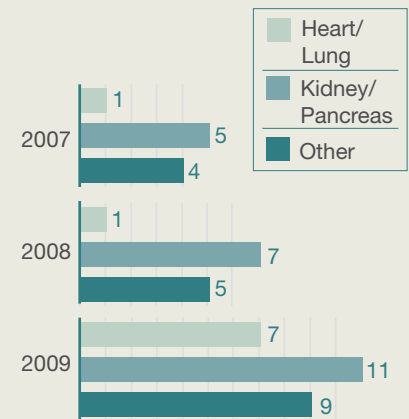
Multi-Organ Transplant



FOR PATIENTS FACING THE PROSPECT OF A MULTI-ORGAN TRANSPLANT, experience with its complex medical and surgical challenges is critical. The Methodist Transplant Center continues to lead advancements related to multi-organ transplants, especially in the areas of heart/lung and kidney/pancreas.

Methodist's multidisciplinary collaboration has made the heart/lung transplant program the third most prolific in the nation. The program has benefited from an intense focus on collaboration among disciplines — and thus has saved more lives and achieved better quality of life for numerous patients. This comprehensive approach includes utilizing proven medical protocols pre- and post-transplant, infectious disease expertise, advances in pathology, research, and follow-up treatment, among others.

MTC Multi-Organ Transplants by Year



The team at Methodist is also dedicated to treating patients with extremely rare transplant needs. In 2009, a 35-year-old male patient underwent a heart/double lung/liver transplant after years of suffering from congestive heart failure that eventually led to other organ failure. There are only 10 documented cases of this in the nation.

The Methodist Transplant Center is poised to continue its leadership in saving the lives of all patients, despite the complexity of their illnesses.

Cynthia's Story



Last year, Cynthia Larson became the first patient to undergo a lung/liver transplant at Methodist. For 18 months, Larson suffered from symptoms of scleroderma, an aggressive autoimmune disease of the connective tissue.

Eventually, her white blood cell count began to diminish and the disease interfered with the function of vital organs.

"I was completely dependent on oxygen," Larson said. "I couldn't do anything without it."

Now, a year after her transplant, Larson is no longer oxygen-dependent. She is back to work as a full-time MRI technician and enjoys life as a mother and avid bike rider.

Lung Transplant

METHODIST TRANSPLANT CENTER DIRECTORS

Matthias Loebe, M.D., Ph.D., FACC
 Associate Professor of Surgery,
 Baylor College of Medicine
 Chief, Division of Transplant and
 Assist Devices, Methodist DeBakey
 Heart & Vascular Center
 Surgical Director, Thoracic
 Transplant

Harish Seethamraju, M.D.
 Associate Professor of Medicine,
 Baylor College of Medicine
 Medical Director, Lung Transplant

Scott Scheinin, M.D., FACS
 Diplomat, American Board of
 Thoracic Surgery
 Director, Thoracic Organ
 Procurement

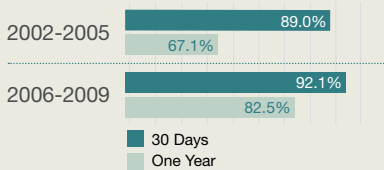


THE METHODIST TRANSPLANT CENTER can point to one of its most noteworthy accomplishments in the lung transplant area, being one of the top four largest programs of its kind in the United States. The oldest lung transplant program in the nation, Methodist has seen tremendous growth in the past five years, achieving national recognition for treating patients with pulmonary disease. In fact, the program transplants more patients with primary pulmonary hypertension than any other program in the country and three times more than the national average.

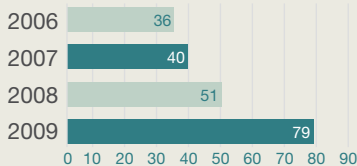
The dedicated team breathes life into Methodist's caring and healing culture, individualizing treatment protocols for each patient's specific needs. The center collaborates closely with its partners in pathology and currently participates in a national clinical trial to help prevent early rejection. The team is also hopeful about a study investigating the effectiveness of inhaling cyclosporine that will continue to improve patient outcomes and, ultimately, long-term survival.

Always the good stewards of the gift of life, the lung transplant team looks for ways to maximize the opportunities for transplant through donated organs.

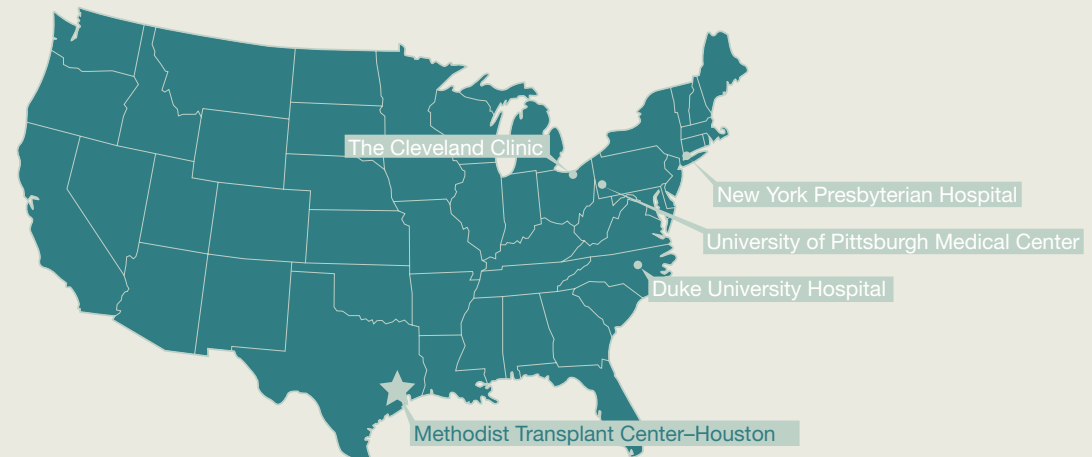
MTC Lung Transplant Patient Survival Rates



MTC Lung Transplants by Year



Top Five Lung Transplant Programs in U.S. by Volume





Phil's Story



Phil Langford was diagnosed 10 years ago with emphysema and suffered from COPD. Over the years, Langford's lungs deteriorated, eventually requiring full dependence on an oxygen machine. By last year, the failing organs kept him from doing everyday activities — even a quick trip to the grocery store required too much energy.

But in November, he became the 75th patient in 2009 to undergo a lung transplant at the Methodist Transplant Center — more than twice the average number in one year. Just eight hours after receiving this second chance

at life, Langford was removed from oxygen and breathing on his own.

After a short stay in the hospital, Langford's physicians sent him home, where he has returned to his normal activities and enjoys time with his family.

PATIENT SUPPORT

No therapy is better than sharing stories with others who are undergoing similar situations in life. In 2009, Methodist established a weekly thoracic transplant support group to provide patients and caregivers an opportunity to share their experiences and feelings.

Once a month, these support groups include a physician lecture for lung patients about numerous important or newsworthy topics. Lectures range from the importance of patient compliance to steps to take to prevent H1N1 flu as an immune-suppressed patient.

Liver Transplant

METHODIST TRANSPLANT CENTER DIRECTORS

R. Mark Ghobrial, M.D., Ph.D., FACS, FRCS (Ed.)
 Director, Methodist Center for Liver Disease & Transplantation
 Chief, Liver Transplantation Surgery, The Methodist Hospital
 Director, Immunobiology Research Center, The Methodist Hospital Research Institute

Joseph S. Galati, M.D., FACC
 Medical Director, Methodist Center for Liver Disease & Transplantation

Howard P. Monsour, M.D.
 Chief, Hepatology, The Methodist Hospital



FOR INDIVIDUALS WITH END-STAGE LIVER FAILURE, Methodist can quickly help change their outlook based on the unparalleled expertise of the liver program's faculty and staff. Methodist's prolific experience in treating even critically ill patients has helped the program gain national recognition for successful outcomes.

In 2009, the center welcomed Dr. Howard Monsour as Chief of Hepatology at The Methodist Hospital.

Liver transplantation continues to be an effective option for many patients, and in 2009 the program grew 24 percent over the previous year. Many patients benefited from a liver patient support group as well as the "My New Life" series, which provides information about handling the daily challenges of life after transplant.

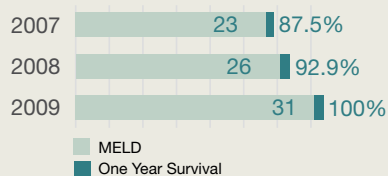
Methodist physicians work alongside experts in other disciplines to ensure all the patient's medical challenges are addressed.

There may be pharmacological remedies for some diseases and conditions; last year, the liver program participated in more than 30 clinical trials of new medications that ultimately could benefit patients.

In the treatment of hepatitis C, improving the chances of being cured has never been better. Our physicians have conducted studies with a new class of drug called protease inhibitors, which thus far are showing exciting promise in eradicating hepatitis C, saving lives and reducing deadly complications like cancer.



MTC Liver MELD Score by Year





PATIENT SUPPORT

With patients and caregivers alike in mind, the Methodist liver team established a weekly support group in 2009. Many patients remain on the waiting list for liver transplant for months and even years, so sharing with and encouraging one another as a team is critical.

The support group provides a forum for those feeling distressed to open up about their concerns, at the same time allowing others to give hope by sharing their stories of receiving second chances at life or caring for a loved one who was transplanted and is doing well.

Vanessa's Story



Just hours after seeing her children to school and her husband to work, Vanessa Derks was rushed to The Methodist Hospital with acute fulminant liver failure. In the operating room, surgeons had to remove her dying liver to prevent circulatory failure. Derks clung to life for several hours without a liver while the team waited on her donor liver to arrive for emergency transplant.

After surgery, Derks' physicians predicted a five percent chance of survival. Miraculously, she spent just a month in recovery and went home, where she has regained a full life, caring for her family and even returning to work.

Kidney and Pancreas Transplant Overview

METHODIST TRANSPLANT CENTER DIRECTORS

Horacio J. Adroque, M.D.
Professor of Medicine, Renal
Division, Baylor College of
Medicine
Co-Medical Director, Kidney
Transplant

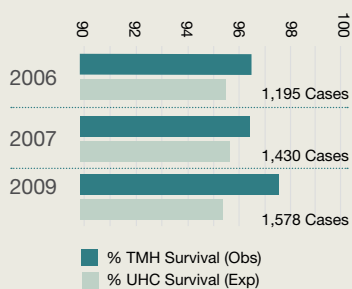
Wadi Suki, M.D., FACP
Clinical Professor of Medicine,
Baylor College of Medicine
Co-Medical Director, Kidney
Transplant

Richard Knight, M.D., FACS
Surgical Director, Kidney and
Pancreas Transplant



Horacio J. Adroque, M.D., left, George Noon, M.D., Wadi Suki, M.D., and Graham Guerriero, M.D., have each been a part of the Methodist family for more than 40 years.

MTC Observed Survival Rates for Patients with Renal Failure



THE METHODIST TRANSPLANT CENTER'S accomplishments were numerous in the treatment of end-stage kidney disease during 2009. Yet, it's the patients entering 2010 with renewed health that makes the team most proud!

A staggering 141 men and women were transplanted during 2009, a 20 percent increase over 2008.

The center responded to patient needs in a key way with the opening of a kidney-evaluation clinic at Methodist Sugar Land Hospital this year. Now, individuals in southwest Houston and beyond can benefit from services previously available only at our Texas Medical Center campus.

For individuals with insulin-dependent diabetes and hypertension, a kidney/pancreas transplant can mean a life free of dialysis and daily insulin injections. During 2009, kidney/pancreas transplants rose by 60 percent over the previous year. The pancreas transplant program has grown by 300 percent since 2007, with innovations in anti-rejection regimens resulting in a 100-percent year-long survival rate.

While many transplant programs continue to prescribe prednisone to prevent rejection, Methodist patients receive an immunosuppressive regimen free of this powerful steroid. These patients avoid difficult side effects of chronic steroid use, such as cataract disease, osteoporosis and hypertension. And patient outcomes have remained strong.



Candace's Story



Candace Wathan was diagnosed with Type 1 diabetes at just eight years old, and for almost 40 years fought the extremely debilitating fatigue and other complications associated with the disease. Wathan eventually suffered renal failure and her kidney function declined to 15 percent, which made a transplant her best option.

“Getting out of bed was so difficult,” said Wathan, who had to quit working in 2001. “When doctors told me I needed to put my name on the transplant waiting list, I realized I had to decide what I was going to do.”

Because she was diabetic, she was also eligible for a pancreas transplant to combat the disease. Just days after being placed on the list, a very sick Wathan received her second chance at life through a new kidney and pancreas.

Now, Wathan is diabetes-free. Her health has improved tremendously and she is looking forward to returning to work.

LIVING DONOR AWARENESS SESSIONS

Methodist enhanced its Living Donor Center last year by offering information sessions for potential donors across Houston. Each quarter, Methodist invites all its kidney patients, along with anyone interested in living kidney donation, to hear from previous living donors and transplant staff as they further increase their knowledge about this important decision, as well as have the opportunity to ask personal questions about others' experiences.

These events were established to educate, inspire and support anyone who wants to know more about living donation, and to help prepare potential donors for the first step, which is an extensive evaluation process examining their physical, social and psychological health.

Living Donor Center

METHODIST TRANSPLANT CENTER DIRECTORS

Richard Link, M.D., Ph.D.
Associate Professor of Urology,
Baylor College of Medicine
Director, Living Donor
Procurement

Brian Dunkin, M.D., FACS
Professor of Clinical Surgery, Weill
Cornell Medical College
Co-Director, Living Donor
Procurement



Son to father transplant

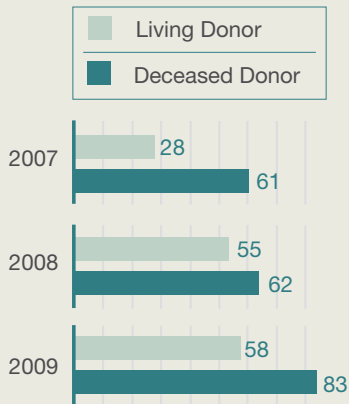
WHILE KIDNEY TRANSPLANT PATIENTS BENEFIT from Methodist's state-of-the-art medicine, the health of each living donor is also paramount. Of all Methodist's kidney transplants in 2009, 41 percent resulted from living donation.

Medical advancements have benefited Methodist kidney donors, as well. In fact, surgical teams recovered all donated kidneys last year with a laparoscope. This device makes a significantly smaller incision in the body than the traditional open-flank technique, which can cause major scarring and lengthen a hospital stay.

The Methodist Transplant Center reinforced its dominance by launching both an internal and external paired matching program. Recipients with medically incompatible donors are matched with other incompatible donor/recipient pairs so both are able to be transplanted.

In 2010, the liver team will look forward to performing living liver transplants, providing an advanced level of service and an additional option for patients in need of liver transplants.

MTC Living vs. Deceased Kidney Donor Transplants by Year



Dawn's Story

FOR MORE THAN 40 YEARS, Dawn Dupree watched her mother struggle with polycystic kidney disease, an illness characterized by multiple cysts in both kidneys. Dupree knew that she could inherit this genetic condition, which four out of her five siblings also struggled with. Over the course of 24 years (age 20 to 44), her kidney function slowly declined to less than 20 percent, which made a transplant her best opportunity for a life free of illness.



For Dupree, the road to transplant became a complex maze of twists and turns that few hospitals have the capabilities to resolve. After three pregnancies, her antibodies had built up and she was sensitized to transplant, a situation that can cause a body to reject an organ. Living in England, she and her husband James researched options across the United States and chose The Methodist Hospital for the transplant.

After undergoing a state-of-the-art desensitization protocol developed by Methodist physicians and finding a strong donor match in a compassionate acquaintance named Barbara Ward, Dupree was transplanted in November. Today she lives a full life with excellent renal function. "My donor and my physicians at Methodist gave me a new life," she said at her most recent follow-up, a huge smile lighting her face.

Pathology/HLA



METHODIST TRANSPLANT CENTER DIRECTORS

Katafan Achkar, M.D., FASN
Clinical Assistant
Professor of Medicine,
Weill Cornell Medical College
Medical Director,
Desensitization Program

Geoffrey Land, Ph.D., HCLD
Professor of Clinical Pathology, Weill
Cornell Medical College
Director, Histocompatibility &
Transplant Immunology,
The Methodist Hospital

Luan Truong, M.D.
Professor of Pathology,
Weill Cornell Medical College
Adjunct Professor of Pathology &
Renal Medicine,
Baylor College of Medicine
Director of Nephropathology,
The Methodist Hospital



METHODIST'S PROGRESS IN TRANSPLANTATION is the culmination of unceasing dedication by medical, surgical and laboratory partners. Many of the advances stem from collaborations among teams in medicine and pathology, perennially developing new approaches for diagnosing and treating disease.

Previous blood transfusions, multiple pregnancies and prior transplants increase antibody levels, decrease the chance of finding an organ match, and heighten a patient's possibility for organ rejection. Research performed in Methodist's HLA-Transplant Immunology Laboratory has resulted in clinical protocols that can lower these patients' antibodies and enhance their opportunities for transplantation.

More than 25 additional patients were transplanted in 2009 as a result of desensitization.

At Methodist, radiologists employ the most advanced kidney biopsy techniques to provide tissue for kidney pathologists to examine. The team also provides pathology consultation services for nephrologists throughout Texas and across the country.

The expansion of the transplant program has yielded an opportunity for substantive research into organ utilization. The time lapse between procurement of an organ and its transplant can damage the organ and cause rejection. Methodist pathologists review donor biopsies and help predict when a specific organ could benefit a patient. Their work within the program delivers excellent results and aids the development of new protocols for utilizing all donated organs.

Methodist Kidney Biopsies by Year



Islet Transplant



THE TRANSPLANT PROGRAM AT METHODIST continues to innovate in the area of islet transplants, following the opening of Houston's first islet isolation laboratory two years ago. Three autograft transplants were performed in 2009, along with two nesidioblastosis patient isolations.

Additionally, the treatment of chronic pancreatitis — a painful condition that can lead to diabetes and organ failure — is a mainstay of the program. Research into its causes and treatments remains a focus. In the meantime, islet auto-graft transplants can help eliminate the discomfort of pancreatitis, helping patients live a life free of insulin and anti-rejection medications.

As Methodist physicians and researchers advance islet transplantation, they saw encouraging results from culture experiments in 14 research isolations in 2009.

Susan's Story

For 10 years, Susan Bienduga suffered from chronic pancreatitis. She struggled with extreme abdominal pain and nausea that continuously worsened as her disease progressed.

Bienduga's symptoms became more and more frequent and during a trip to Brazil several years ago, she experienced an extremely painful attack and was told she had no chance of survival. She returned to the States, where she sought help at the Methodist Transplant Center.

Tired of dealing with the painful symptoms and her uncontrollable diabetes, Bienduga underwent an islet transplant last year. She is still taking a small amount of insulin while the transplanted islets are given time to become fully functional, but looks forward to the day when she will require no more insulin.

Enjoying her renewed life, Bienduga is planning a fishing trip to Alaska this summer, a trip she never thought would be possible.



Looking Ahead

FOR PHYSICIANS AND STAFF AT THE METHODIST TRANSPLANT CENTER, the most significant accomplishments are those yet to come. From advances in research to new social work services, we are dedicated to helping save more lives each year.

Methodist's patient-centric focus is the impetus for two operational improvements expected in 2010. Patients will soon be able to visit any of three clinics in the Texas Medical Center, Sugar Land or West Houston, providing convenient care close to home. The transplant center also will initiate a new patient referral center, streamlining the evaluation process for patients and referring physicians.

The Methodist Transplant Center recognizes the significant relationship between a patient and his or her referring physician. That's the foundation for the new Physician Partnership Program, which aims to actively include the referring doctor in a patient's treatment. Plans for 2010 include special events, education and other collaborative opportunities.

We invite you to explore giving options benefiting the Methodist Transplant Center and Nora's Home. We pledge to optimize your contribution and assist you in matching your interests with our current needs. For more information, **please call 832-667-5816.**





While the Methodist Transplant Center remains at the forefront of advances in disease management and organ transplantation, the life-saving decisions by individual men and women make it all happen. Transplantation isn't possible without organ donors — both living and deceased — and we extend our heartfelt gratitude to the families who make the decision to donate.

Methodist collaborates closely with its local recovery agency, LifeGift, and recently was awarded the Silver Medal of Honor for excellence in organ donation.

To register as an organ and tissue donor in Texas, visit DonateLifeTexas.org.

Methodist Transplant Center
6550 Fannin Street
Smith Tower, Suite 1201
Houston, TX 77030

Methodist
Transplant Center
Houston, Texas

LEADING MEDICINE®