

Dear Patient:

Welcome to the University of Chicago Hospitals Transplant Program. We trust that this will be the beginning of a long and successful relationship.

Thousands of patients have walked out of our doors with a new kidney or pancreas—to begin a healthier life. When these patients first came to us, they too were suffering from kidney disease, severe type 1 diabetes, or both. Most were coping with frequent dialysis sessions or daily insulin shots. Many were on a restrictive diet and were constantly tired.

Years after receiving a transplant, many of our patients say they have never felt better. If your transplant is successful, you too will probably experience a major increase in energy. In fact, the operation probably offers you the greatest chance at a more “normal” lifestyle, free from dialysis and/or insulin shots.

You have signed on for a journey that has a high likelihood of success. What was “risky” 30 years ago is now considered a standard procedure. National data show that almost 90% of transplanted deceased donor kidneys are still functioning at one year. The success of living donor transplants is even better with over 95% of these kidneys functioning at one year. The success rates for combined kidney-pancreas transplants and pancreas-only transplants are also high. Patients who remain free of rejection for the first year have

a high likelihood of keeping their organ for one or more decades. Right now, the record for a deceased donor kidney is more than 40 years.

The odds of a successful transplant are high at a premier transplant center like the University of Chicago Hospitals. Your decision to come here means that you will receive medical treatment from a very experienced, dedicated team. Combined, we have more than 250 years experience in transplant care, and our surgeons perform hundreds of kidney and pancreas surgeries each year.

Because the University of Chicago Hospitals is an academic medical center, our patients have access to the latest therapies and medicines—sometimes before these treatments are available elsewhere. Many of our transplant physicians and surgeons are also active researchers. In fact, some of the major discoveries in transplant care, including new and better anti-rejection therapies, have been made right here at the University of Chicago. Currently, our physicians and researchers are busy finding ways to prevent and treat problems that sometimes develop in patients after a transplant, such as high blood pressure and viral infections.

So, you have great reason to hope for a healthier future. However, we want you to enter into this relationship with a complete understanding of what's involved. As medical experts, we will be leading you through this journey. But you and your family play a vital role in the success of your transplant.

You will probably feel overwhelmed with all of the information that you will receive about your upcoming transplant. That is why we have put together this manual: to explain the very complex transplant process in relatively simple terms. The transplant team will provide more information as you go through the phases of preparation, surgery, and recovery.

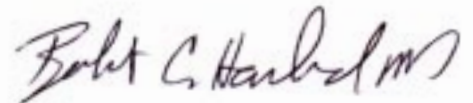
We realize that getting an organ transplant is not an easy journey. It might mean having to wait years for a suitable organ. You'll need to undergo major surgery that requires days in the hospital. And it means taking some anti-rejection medicine for the life of your transplant. But our patients who have successfully made it through the journey say it's worth it in the end. Good health, after all, is priceless.

We encourage you to think of the transplant team as a resource for information and to ask us any questions you may have. Please, think of us as your partners or your teammates. We are all working toward the same goal: a healthier future for you.

Cordially,



J. Michael Millis, MD
Chief, Section of Transplantation



Robert C. Harland, MD
Director of Renal & Pancreas Programs