



Media Statement

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MEDIA RELEASE

WA's first heart-lung transplant

The simple act of taking a leisurely walk with his son is a new and luxurious pleasure for Paul Barratt, who recently became WA's first recipient of a heart-lung transplant.

Mr Barratt had suffered from a rare congenital heart disease from birth and his health and lifestyle were becoming increasingly affected before he received the transplant at Royal Perth Hospital about a month ago.

The double transplant was made possible when the State Government last year funded the expansion of the heart transplant program to include lung transplantation.

The first lung transplant was in about November and since then local surgeons have performed a second.

Mr Barratt, 45, of Carlisle, said he had been sick his whole life and had always been restricted from any physical activity – but he managed to cover it well.

"I ran my own IT business but I gradually had to start closing it down because my health was deteriorating," Mr Barratt said.

"After the transplant I felt shocking but I was so well two weeks later that I was allowed home.

"I feel pretty darn good now and I can walk six kilometres an hour which I have never been able to do in my life."

Mr Barratt said the best outcome of the transplant was being able to spend quality time with his family and knowing he would see his son grow up.

"It is not just that me who benefits from this – my whole family is benefiting from me being able to walk with them and do things with them," he said.

"It is totally mind-blowing – I now have a future with my family.

"The question used to be whether I would survive to our 20th wedding anniversary in July, but now we are planning a holiday next year."

The transplant team was led by cardiothoracic surgeon Robert LARBALESTIER, who said heart and lung transplants were very rare.

This was because donor organs were in such high demand, and because there were very narrow guidelines for matching a recipient to donor organs.

Also, it was important that recipients had a very good chance of survival and health after a transplant.

“Transplant recipients have significant commonalities with the donor such as blood type, height and weight and matching lung size,” Mr LARBALESTIER said.

“Paul was the best candidate for the operation because he looked after himself – he was as fit and healthy as he could have possibly been and was compliant with the doctors’ advice.”

As part of his recovery, Mr BARRATT visits RPH’s physiotherapy gym several times a week for rehabilitation.

Mr BARRATT will have to be on immuno-suppressant drugs for the rest of his life, but he is ecstatic about receiving a new lease on life.

“I would like to honour the work of the Royal Perth Hospital transplant team and DonateWest,” Mr BARRATT said.

Journalists please note:

Media about tissue transplants must be carefully prepared to protect the anonymity and privacy of the donor family and the recipient.

The Human Tissue Transplantation Act (1982) states that people should not give information that could link donor families and recipients. Because of this, some identifying details such as exact dates must be omitted from any media stories.

Heart-lung transplant background information:

- Heart-lung transplants started in Australia in 1985.
- They are very rare
- There are only about five or six heart-lung transplants a year in Australia.
- About 1800 heart transplants since transplantation began in Australia in 1985, but only about 145 heart-lung transplants.
- In eastern states, the average wait for a heart-lung transplant is about two years.
- Heart-lung transplants are rare because doctors have to make a pragmatic decision about who will get the best outcome from any organ transplant.
- Drs must weigh up who is sickest, with who will have the best outcome.
- A recipient of a double-organ transplant has a higher chance of dying during or after the operation.
- Transplant recipients much have significant commonalities with the donor:
 - Blood type
 - Height & weight
 - Matching lung size