

Research Shows Transplants Possible Without Use of Anti-Rejection Drugs



For decades, immunologists have been trying to train the transplant recipient's immune system to accept transplanted cells and organs without the long-term use of anti-rejection drugs. New University of Minnesota preclinical research shows that this is now possible.

In a study published in "Nature Communications", researchers at the University of Minnesota Medical School's Department of Surgery and Schulze Diabetes Institute, collaborating with

colleagues at Northwestern University, have maintained longterm survival and function of pancreatic islet transplants despite complete discontinuation of all anti-rejection drugs on day 21 after the transplant. This study was performed in a stringent preclinical

transplant setting in nonhuman primates, one step away from humans.

To prevent transplant rejection, organ recipients must take medications that suppress the "Our study is the first that reliably and safely induces lasting immune tolerance of transplants in nonhuman primates."

body's immune system. These immunosuppressive drugs are effective at preventing rejection; however, because anti-rejection drugs suppress all of the immune system nonspecifically, people taking these drugs face the risk of serious infections and even cancer. Additionally, non-immunological side effects of immunosuppression, such as hypertension, kidney toxicity, diarrhea, and diabetes diminish the benefits of transplantation. Finally, immunosuppressive drugs are much less effective at preventing transplant rejection over a long period of time, thereby leading to organ loss in many recipients.

Because a growing population of chronically immunosuppressed transplant recipients face that impasse, which might adversely affect their survival, generations of immunologists have pursued immune tolerance as the primary goal in the field of transplantation medicine. Inducing tolerance to transplants would eliminate the need for chronic immunosuppression and enhance transplant and patient survival. Proof that immune tolerance of transplants can be achieved was first demonstrated in mice by Peter Medawar in his Nobel Prize–winning "Nature" article more than 65 years ago. Yet, despite its immense significance, transplant tolerance has been achieved in only a very few patients.

This new study capitalizes on the unique attributes of modified donor white blood cells, which were infused into transplant recipients one week before and one day after the transplant, thereby recapitulating nature's formula for maintaining the body's tolerance of its own tissues and organs. Without the need for longterm antirejection drugs, islet cell transplants could become the treatment option of choice, and possibly a cure, for many people burdened by type 1 diabetes.

"Our study is the first that reliably and safely induces lasting immune tolerance of transplants in nonhuman primates," said senior author Bernhard Hering, MD, Professor and Vice Chair of Translational Medicine in the Department of Surgery at the University of Minnesota. "The consistency with which we were

> able to induce and maintain tolerance to transplants in nonhuman primates makes us very hopeful that our findings can be confirmed for the benefit of patients in planned clinical

trials in pancreatic islet and living-donor kidney transplantation - it would open an entirely new era in transplantation medicine."

This study was funded by the National Institute of Allergy and Infectious Diseases of the National Institutes of Health. The study was also supported by the Diabetes Research and Wellness Foundation, the Transplant Division in the University of Minnesota's Department of Surgery, and philanthropy through the University of Minnesota Foundation.

For more information, contact Krystle Barbour | Media Relations Manager, University of Minnesota Medical School: kbarbour@umn.edu.

Ed. Note: The method described in this study involves treatments given <u>prior to and just after</u> an organ is transplanted, and thus would <u>not</u> be effective in patients who already received a transplant.

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AirWays is published four times per year by the Second Wind Lung Transplant Association, Inc. by and for lung transplant candidates, recipients, caregivers, and transplant professionals worldwide.

Every attempt is made to print accurate technical/medical information, but because of time and technical constraints it is not possible to check all submitted information.

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To submit an article for publication in *AirWays*, send an MS Word document as an attachment to: phenry2ndwind@gmail.com.

General Information

Membership in Second Wind includes a subscription to *AirWays*. To join or change your address please contact Second Wind via email to phenry2ndwind@gmail.com or by phone, toll free at 1-888-855-9463.

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President's Notes

Jane M. Kurz, President - Second Wind Lung Transplant Association, Inc.



The season has changed to fall and with it comes renewed hope—for better health, for more donated lungs, and for a reduced need for lung transplants. We are thankful that you are part of our transplant community. We welcome your wisdom with suggestions and offers to help. As for us, the Directors on the Board have been working diligently on

many projects. Let me tell you of some changes.

Tom Archer, a 2006 bilateral transplant recipient, resigned from the national board this past spring. He was a member of the board for almost 15 years and served as president from 2005 until January 2015. Tom led Second Wind through many challenges and his efforts helped make us a robust organization today. He continues to work with the St. Louis chapter on projects that benefit organizations that focus on lung health, and will work with us in an advisory role. He will also continue maintaining our toll-free Help line, an important position as the first contact for people with questions about transplantation and caregivers in distress. We are in his debt.

Maria Molina, a nurse practitioner who joined the board this year, also serves in another position within the International Transplant Nurses Society. Due to a potential conflict of interest, she has resigned from the board but will continue to serve in a consultant capacity.

Patrick Henry has changed positions and is now second Vice President on the board as he assumed the editor's position for *Airways*. Damian Neuberger, the previous editor, and Patrick worked on the transition and Damian, a 1997 lung transplant recipient, will continue to share his wisdom as a board member.

Frank Shields has submitted a foundation grant application for funds that would help our Financial Assistance Program. Other directors are maintaining the work with the listserv, Financial Assistance Fund, membership fund, peer support program, and Facebook page.

Our membership recruitment campaign continues so please invite others to join as members. The application form is on the web site—www.2ndwind.org. We still have a need for an advisor who has expertise with Microsoft Access to help maintain our database. If you have a desire to be on the front lines making decisions about this organization, consider volunteering as a board member. We "meet" by telephone only 6 times a year. We are also looking for a more diverse geographical representation on the board and currently have no members from the Southwest or Southeast. Transplant candidates, recipients or caregivers, this is your opportunity to make Second Wind stronger!

Recognizing that change is a constant part of our lives, it's easy to miss advances and progress in lung transplantation as we focus on our daily activities. This issue of *AirWays* provides a lot of good information about the latest efforts in this field. In closing, I note that Second Wind is approaching our 25th anniversary. Twenty-five years of service to the lung transplant community is an event worth recognizing! Watch the listserv and website for more information about upcoming celebrations and commemorations.

Best wishes for good health & happiness, Jane

Editor's Notes

As the new editor of *AirWays* I'm excited to see this issue become a reality. I hope you enjoy it as much as I've enjoyed working on it.

We are always looking for contributions and feedback from our readers. If you have a personal story to tell, a recommendation for a topic we should cover, or a reaction to something you've read here, please email me at phenry2ndwind@gmail.com.

Putting *AirWays* together is <u>not</u> a one-person job. Everyone on the Second Wind Board of Directors, along with many of our members, helped to put this issue together, and we are grateful for their contributions.

Thanks also to Evenhouse Printing of Hamburg, NY for their staff's guidance in producing what you now hold in your hands.

Most of all, I thank Damian and Judy Neuberger, for their help and guidance during this process. The Board of Directors is especially grateful to Damian for his many years of service as the *AirWays* editor.

Patrick Henry *Editor*

The Gentle Genius

(In memory of Joe Matheis – June 4, 1963 – June 19, 2019)

The first thing you need to know about Joe is that he was a lung transplant survivor and that was how we had the privilege of meeting this amazing man. My husband, Ron, had only recently been diagnosed with Idiopathic Pulmonary Fibrosis and had completed his first two phases of pulmonary rehabilitation when Josh Henry of UPMC (University of Pittsburgh Medical Center) Hamot's Cardiopulmonary Rehabilitation team asked us to join a local support group for IPF and related pulmonary diseases. Even before attending the meetings, Ron had a chance to meet Joe and have conversations with him during their rehab sessions. Ron would come home and marvel at the knowledge and wisdom Joe had accumulated and was willing to share about transplants, pulmonary diseases, and life in general.

And sharing is what he did!

During the meetings Joe spoke about his disease, entitled PPFE or Pleuroparenchymal Fibroelastosis, and his transplant experience at the Cleveland Clinic. Joe and Jeanne, his devoted wife, distributed and shared: detailed fact sheets about



the transplant process, personal anecdotes about his wait for "the call"; the lifestyle changes he made after the transplant and journals that he had devised to track his health vitals and medications. It was so interesting to talk to Joe and Jeanne, and we left with a treasure called "peace of mind", one of the most important benefits of our support group.

Joe's quiet confidence, impressive knowledge, and unending optimism lifted everyone's spirits. We also were able to witness Joe's sharing with a larger audience at a Lung Force Expo conference in Pittsburgh, where the whole room stopped for an extended moment to ponder the profound statement he made on the quality and purpose of life itself.

When we read Joe Matheis' obituary, it became clear why Joe was the way he was. I am going to take the liberty of summarizing his life story to share with others the way he shared with us.

He is survived by his wife, Jeanne, a daughter, four brothers, a sister and a large extended family. He earned a Bachelor of Arts and Philosophy degree, an Associate degree in Mechanical Engineering, and a Masters of Divinity. He graduated first in his class from his Navy machinery repairman school and worked at a submarine repair facility in Connecticut. He rose from a Machinery Repairman First Class to the rank of Lieutenant JG, and in the Naval Reserves, he was a chaplain's candidate. After the Navy, besides working as a fabrication man designing and manufacturing tow truck bodies, he taught at two well known universities. He also was employed at a bookstore (two of his loves were reading and researching) and eventually worked as an Unemployment Claims Examiner for the Department of Labor.

So you can see why we believe Joe was a "genius". Now for the "gentle" part. Always quiet and unassuming, but full of optimism and exhibiting a wonderful joy for life, he made each day special for himself and those around him. He also was appreciative and respectful of his doctors, his caretakers, and all those who had the privilege of knowing him.

Most of all, Joe was grateful for the courage and generosity of the organ donor and their family who gave him a second chance at life.

Rest in peace, our special friend.

Ronald and Mary Zimmer

AIRWAYS JUNE 2019-OCT 2019

Second Wind to Celebrate Milestone Birthday

In the spring of 1995 a group of 30 people gathered at Shands Hospital in Gainesville, Florida to discuss the need for a statewide support group to assist lung transplant patients, and from that discussion emerged a national organization. Today that organization, which came to be known as "Second Wind", continues to provide service and support to lung transplant patients and their caregivers.

On April 17, 2020 we will celebrate our 25th birthday, a significant accomplishment for an organization that is all volunteer driven and funded primarily through individual contributions. Second Wind received absolutely no government funding, and only limited foundation dollars.

We would love to hear suggestions from our members about how we could best celebrate this milestone, as well as individual stories about how Second Wind made a difference in the lives of transplant patients and their families.

Suggestions and stories can be sent to *AirWays* by email to phenry2ndwind@gmail.com.

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Transplant Anniversaries

JUNE			
Name	Transplant Date	Years	
Michael Olson	6/4/2014	5	
Denise Jacobs	6/4/2017	2	
Brian Conley	6/5/2015	4	
Teffy Chamoun	6/8/2019	0	
Paul Woods	6/10/2013	6	
Diane Desiderio	6/11/2001	18	
Jim Powers	6/23/2009	10	
Brittany Patrick	6/23/2017	2	

JULY

Name	Transplant Date	Years
ivume	Transpiani Dale	rears
Anita Tracey	7/3/2005	14
Michael Pazen	7/9/1999	20
Steven Hargrave	7/9/2019	0
Cathy McGill	7/13/1985	34
Donald Samkas	7/14/2018	1
Frank Shields	7/16/2012	7
John Curtin	7/20/2007	12
John Douglas	7/20/2009	10

AUGUST

Name	Transplant Date	Years
Beth Mitchell	8/9/2011	8
Gwen Herron	8/11/2012	7
Kale Willis	8/18/2019	0
Harlan Halvorson	8/24/2006	13
Patrick Henry	8/25/2015	4
Michele O'Guinn	8/26/2004	15
Julie Martin	8/29/2005	14

SEPTEMBER				
Name	Transplant Date	Years		
Kevin Gargan	9/5/2016	3		
Cheree Peirce	9/16/2012	7		
Mindy Meyers	9/18/2018	1		

OCTOBER

Name	Transplant Date	Years
Katie Moyer	10/2/2017	2
Alan Schwenck	10/6/2009	10
Mikey McCabe	10/17/2017	2
Jerry Gray	10/18/2017	2
Damian Neuberger	10/19/1997	22
Beth Davenport	10/20/1995	24

Volunteers Sought for Pulmonary Research Studies

COPD/IPF

The Pulmonary Trials Cooperative (PTC) was established by the National Heart, Lung, and Blood Institute to facilitate efficient "real world" research into chronic lung diseases.

The PTC brings together research protocol leaders, clinical centers, and research participants to develop new treatments and test existing clinical management strategies. The focus is on pragmatic research studies and clinical trials in real world settings.

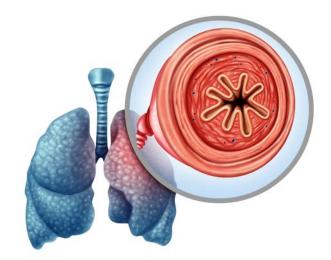
The PTC currently has four clinical studies – three in COPD and one in IPF (idiopathic pulmonary fibrosis). Together, they aim to develop new treatments for these conditions, test existing management strategies, and breathe new life into lung research.

If you have COPD or IPF and are interested in participating in one of these studies, go to www.pulmonarytrials.org to learn more about them.

Chronic Rejection

Lung transplantation brings much hope to individuals with severe lung disease. However, long term outcomes are limited due in part to the potential development of chronic rejection. The medical term for this is "bronchiolitis obliterans syndrome", or BOS. Nearly 50% of patients develop BOS within 5 years following lung transplantation.

BOS is a lung disease caused by inflammation that leads to scarring and blockage of the small airways. It is most commonly seen in people who have had a lung transplant or allogeneic hematopoietic stem cell transplant. BOS can also be associated with autoimmune diseases, lung infections, or exposure to environmental contaminants.



Breath Therapeutics is a small company founded in 2016 by a group of people with expertise in aerosol therapy, drug development and rare diseases. The company is currently developing a drug being studied to treat BOS. It is a formulation of cyclosporine that is inhaled through a nebulizer and delivered directly to the lungs.

The drug is currently being tested in two adult lung transplant recipient studies. These studies, known as BOSTON-1 and BOSTON-2, are being conducted at roughly 35 hospitals in the United States and Europe.

The studies are currently recruiting individuals with BOS. Individuals are encouraged to discuss these studies with their transplant doctors to see if they might qualify.

Questions regarding the BOSTON studies can also be sent via email to patients@breath-therapeutics.com.

Financial Assistance Program Update

The Second Wind Financial Assistance Program (FAP) is intended to be a charitable provider of limited financial assistance to members of Second Wind who are lung transplant patients. The program is designed to help pay for the many medical and non-medical expenses incurred by transplant patients that are not covered by insurance. These can include the costs of temporary lodging, travel and/or drugs.

In the calendar year 2018 the FAP provided a total of \$14,250 to transplant patients. As of September 30th a total

of \$7,778.00 has been granted in 2019, with another halfdozen applications still being processed.

Note that the FAP has specific dollar limits and a formal application process that must be followed in order to determine a transplant patient's eligibility. You can learn more about these requirements by going to our website: www.2ndwind.org and clicking on "Financial Aid" at the bottom of the home page.

Lung Transplant: A First Person Account

By Ruth Magnus



I was always aware of keeping myself healthy. In my early 20s I started going to the gym and eating right. When I met my soon to be husband Stan, I taught him about eating healthy too. All went well until...I got pregnant!! I put on a lot of weight. After working hard to lose it I became a weight loss counselor and did that for 20 years.

The time came when I was puzzled as to why my nails were turning blue and my fingers had started clubbing.

I went to the doctor and he immediately sent me for a chest X-ray! It seems both are symptoms of lung disease. I was diagnosed with Idiopathic Pulmonary Fibrosis and put on medication. I was 55 years old.

On a trip to Mexico in December of 2007, I ate a weird shrimp and got sick. That was when I began to use oxygen. The oxygen tube at home was long enough to allow me to play in our pool with our grandchildren and I was able to walk on my treadmill. And, because of my previous training, I was able to maintain a relatively small weight gain despite heavy doses of Prednisone.

However, I deteriorated quickly and couldn't believed it when, about two and a half years since being diagnosed, I was told I should consider a lung transplant! Stan and I were dumbstruck, but I said to my pulmonologist, "Let's do it! I'll be the poster person for lung transplants!"

I was very lucky to get "The Call" only 9 days after being listed. On July 20, 2008 I was organizing my niece's baby shower and waiting for the guests to arrive when it came. I asked if I had to go in right away and my family chased me right out of there. My daughter drove me to UCLA while I made calls to friends telling them I hoped it wasn't a dry run. Later that day I received two lungs from a wonderful male donor.

After surgery I told the doctors that I could not breathe. Puzzled, they did a bronchoscopy and discovered that I had a reperfusion injury (damage caused when blood supply returns to lung tissue after a period of lack of oxygen). My team of doctors were upset and felt that there was no hope. But I fought hard and, to their amazement, improved daily. It took nearly a month in ICU to recover enough to go home. However, lying in the bed for that long resulted in my body atrophying. Even with physical therapy it took me many months to recover.

My wonderful husband did not want me to return to work. He told me that my job was now to look after myself. He did everything he could to make my life easier, and still does. He is my rock and I truly couldn't do this without him. I have two very wonderful daughters who do whatever they can to help. I also have a son in law and two grandchildren who are very special and help to fill my life with joy. My amazing friends were there to help give Stan a break (and a chance to work).

Ten months after my surgery we went to Copenhagen to take a cruise on the Baltic Sea. I got sick before the cruise while in Copenhagen and landed in a lung transplant hospital where I received the best of care. I recovered fast and was given the go ahead for the cruise.

Today I am able to exercise, which I do regularly. I had to give up Zumba classes due to a sore back, but now take Pilates to strengthen my core. Stan and I travel a lot and I can go everywhere, including to Europe, and we love to entertain at home. We are in a card group one night a week and I play mahjong one day a week.

I believe I have been successful because I am compliant, extremely aware of anything and everything around me and do what's necessary to remain as healthy as possible.

One downside is that, because of medications, I have skin cancer and have to stay out of the sun. This is very difficult in California where we do everything outdoors. I have special clothing to protect me and use a special sunbrella.

But I won't complain because everything else is so good.

I'm lucky to live such a good life. I feel truly blessed.

Latest News: Lung Health

By Jane Kurz, Ph.D., RN

The US Food and Drug Administration recently approved use of the German drug maker Boehringer Ingelheim's "Ofev" (nintedanib) capsules for adults with interstitial lung disease associated with systemic sclerosis. The drug is aimed at slowing the rate of decline in pulmonary function in adults with the disease. Ofev was originally approved in 2014 for idiopathic pulmonary fibrosis, another interstitial lung condition. You can read more about it by going to the FDA's website: Fda.gov and searching under the term "ofev scleroderma." The top result leads you to the FDA's press release on this topic.

Scientists from Tel Aviv University have created a small, 3D-printed heart using human cells, complete with chambers, blood vessels and ventricles. The study team said in the "*Journal of Advanced Science*" that the findings demonstrate the potential that personalized cardiac patches and full transplants may one day be possible. It is the hope of many that lungs will also be produced this way in the future.

<u>Alpha-1:</u> If you have been diagnosed with alpha-one antitrypsin deficiency and have thought about other family members' need to be tested, consider this offer. The Alpha One Foundation through the "ACT Study" provides free, confidential testing. The test is administered through a research study that evaluates the perceived risks and benefits of genetic testing. The study provides a way for family members of Alpha-1 patients and others at risk to learn their Alpha-1 genotype at no cost. For test kits or for more information, call the Alpha-1 Foundation at (877) 228-7321 ext. 245, or contact them via email at gettested@alpha1.org.

The American Lung Association (www.ALA.org) has partnered with the CDC (Centers for Disease Control) to increase resources available to support ending the epidemic of e-cigarette



(vaping) use among youth. While still under investigation, there is developing evidence that vaping can cause irreversible lung damage and lung disease. A new media campaign to educate teens about the dangers of vaping focuses on their becoming their own advocates and leaders of the e-cigarette cessation movement.

<u>Congressional COPD Coalition</u>: the Congressional COPD Caucus has a strong record in introducing, supporting, and passing legislation that improves the lives of those with COPD. The COPD Caucus has been successful in easing air travel for those with supplemental oxygen, growing access to pulmonary rehabilitation for Medicare beneficiaries, and encouraging enhanced data collection to understand more about COPD's impact. They are currently collecting data about the challenges of using oxygen equipment. You can find more about this effort by emailing them at: CBID.Pulmonology@jhu.edu.

<u>American Thoracic Society (ATS)</u>: the ATS will hold their annual international meeting in Philadelphia from May 15-20, 2020. This meeting is for professionals in the pulmonary, critical care, and sleep medicine fields, and will showcase the latest research and clinical innovations. The advance program will be available in January, 2020.

> International Transplant Nurses Society: The Society's 2019 Symposium, "Transplant Nursing for the 21st Century", will be held November 15-18 in Orlando, FL. Topics will include pharmacology, genomics, medication adherence, immunology, rejection, electronic patient education, mobility programs, employment following thoracic transplantation and others.



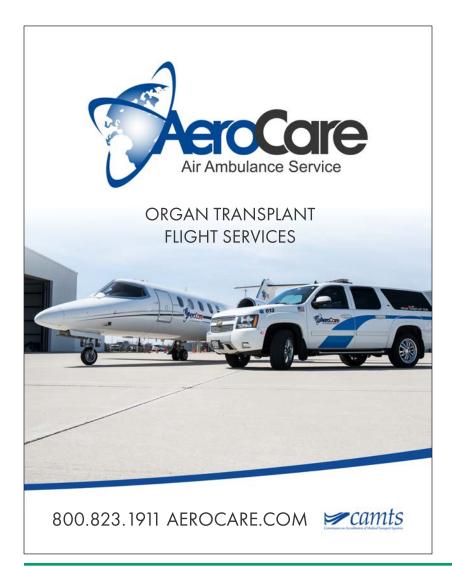


Flu Season Is Upon Us

The CDC (Centers for Disease Control) has kicked off the 2019-2020 seasonal flu vaccination campaign. According to the CDC, getting a flu vaccine is the best thing you can do to protect yourself and those around you, including those who are more vulnerable to serious flu illness. That would include lung transplant recipients.

While some people who get vaccinated do still get sick, there is a growing amount of data showing that flu vaccination makes flu illness less severe, helping to prevent serious outcomes.

As always, we stress the need to consult your transplant team before making any decision about medical treatments.



Donations

General Fund

Maggi Czoty Mary Jo Festle Doris Frick Harlan Halvorson Chuck Schuele Susan Sweeney Paul Woods

Membership Fund

Diane Desiderio Harlan Halvorson Michael Olson

Financial Assistance Fund

Prairie Dell Presbyterian Church Harlan Halvorson Chuck Schuele Frank Shields

Donations *In Memory of...*

Debra Hartles Larry Hartles

Albert Merrill *Charmaine Blazich*

Joe Matheis Ron Zimmer

We would also like to thank those confidential members who made a donation. During the months of June, 2019 through August, 2019 we received two donations from members who previously asked to be listed as a "confidential" member. Thus, we cannot share your information with anyone unless we have your written permission to do so.

We thank all of you for your generous donations to Second Wind Lung Transplant Association, Inc.

Support Groups & Events Calendar

Lung Transplant Support Groups

Dover Campus, St. Clare's Health System

400 West Blackwell Street, Dover (Morris County), NJ For information, call (732) 412-7330

Cincinnati Support Group

Second Thursday of each month at 6:30pm, hosted at the home of Robert and Cynthia Lohstroh; 4120 Beamer Ct., Cincinnati, OH 45246. Phone: (513) 752-0451.

Covers Cincinnati, Dayton, and Northern Kentucky.

St. Louis Second Wind Lung Transplant Association

Second Wind of St. Louis is now available on Facebook by searching that name.

Second Sunday of each month, 2pm at Chris' Pancake and Dining, 5980 Southwest Ave, St. Louis, MO 63139

Contact person: Ken Schanz, President (618) 974-3971, kenschanz@secondwind.org.

Loyola University Medical Center

Pre-transplant, post-transplant patients, & support person(s). First Tuesday every month, 11 AM - 12:15 PM

Third Tuesday every month, 6:30 PM

All meetings: EMS building, 3rd floor, Rm 3284

2160 S. First Ave, Maywood, IL 60153

For information, contact Susan Long (708) 216-5454, slong@lumc.edu

Emory Lung Transplant Support

First Monday of the month at 12 noon on the Emory Campus. Location Changes.

Contact Julia Bucksot at jsbucksot@gmail.com for more information

Shands Hospital Lung Transplant Support Group

Shands Cancer Hospital, South Tower, 5th Floor 1515 SW Archer Rd., Gainesville, FL 32610 Contact: Micki Luck, nodurm@shands.ufl.edu Phone: (352) 519-7545

University of Washington Medical Center Seattle, WA

Pre- and post-transplant Support Group

Support group meets the second Tuesday of the month, 12:30 - 2:30 PM in a conference room off of the cafeteria. Many people meet in the cafeteria to have lunch before the meeting.

Contact person: Angela Wagner, MSW (206) 598-2676; email: wagnera@uw.edu

University of California San Francisco

Lung Transplant Support Group, Third Thursday of every month, 1-2:30 pm,, 505 Parnassus Ave., Room 1015. Moffitt San Francisco, CA 94143-0307

Contact: Andrea Baird, LCSW Andrea.Baird@ucsf.edu / (415) 353-138

St. Joseph's Hospital & Medical Center

Lung Transplant Support Group 500 W. Thomas Rd. , Phoenix, AZ 85013 2nd Tuesday of every month, 11:45 am – 1:00pm Mercy Conference Room Contact: Kathy Lam, LCSW Kathy.Lam@DignityHealth.org ,Phone: (602) 406-7009

University of Chicago Medical Center

Lung Transplant Support Group for transplant recipients and those who are listed. Third Wednesday of every month, 5-6:30 pm. Center for Care and Discovery (CCD),

7th Floor Conf. Rm. 7710

5700 S. Drexel Ave., Chicago, IL 60637

Contact: Fran Hammon, LCSW frances.hammon@uchospitals.edu or call (773) 702-4608 Pager 6720

continued on next page

Support Groups & Events Calendar

continued...

St. John Medical Center

A Second Chance Lung Transplantation Support Group 26908 Detroit Rd. Second Floor Conference Room Westlake, OH 44145

Second Tuesday of most months 6-8pm

Group Discussion: Recipients, Caregivers, & Families

Contact: Kathy Lewis (kathy2lungs@yahoo.com)

University of Texas Southwestern Transplant Support Group

St. Paule Auditorium, 5939 Harry Hines Blvd.,

Dallas, TX 75390.

Pre-lung transplant patients and caregivers are also welcome.

Contact: Jodie C. Moore, MSN, RN, ACNP-BC jodie.moore@utsouthwestern.edu, Phone: (214) 645-5505

Second Chance for Breath Lung Support Group St. Luke's Medical Center

2900 West Oklahoma Ave., Milwaukee, WI 53201 For pre & post lung transplant patients

Contact Person: Ed Laskowski laskowskiedward@att.net or call (414) 231-3013

Ohio State University Lung Transplant Support Group

Comprehensive Transplant Center

770 Kinnear Road, Columbus, OH 43212

For directions assistance call: (614) 293-8000 medicalcenter.osu.edu

Please call our office with any questions at (614) 293-5822 Meeting last Tuesday of the Month 6:00 p.m. to 7:30 p.m.

UCLA Lung Transplant Support Group

Ronald Regan UCLA Medical Center

757 Westwood Plaza Drive, Los Angeles, CA 90095 8-120 Conference Room

12:00 to 1:30 pm

Stephanie Aguirre, MSW, ACSW Phone: (310) 267-9728, saguirre@mednet.ucla.edu

New Members

In addition to the names listed below, during the months of June, 2019 through August, 2019 we had five new members who asked to be listed as a "confidential" member. Thus, we do not share their information unless we have written permission to do so. By being "confidential" we are not allowed to list their names as a new members, renewing members, or their transplant anniversary date.

We do thank all of you for joining Second Wind Lung Transplant Association, Inc.

Marla Brown Teffy Chamoun Edgardo Diaz Margie Everett Teresa Figueredo Dan Griggs Steven Hargrave Johnathan Lausell James Layne Maurice Lippert Laticia Long Jennifer McGrain Justin Stanley Jimmy Williams

Membership Renewals

In addition to the names listed below, during the months of June, 2019 through August, 2019 we had seven renewals from members who had previously asked to be listed as a "confidential".

We thank all for your membership renewals with Second Wind Lung Transplant Association, Inc. We greatly appreciate that.

Sandra Anderson Marc Chelap Cathy Cuenin Maggi Czoty Diane Desiderio Mary Jo Festle Doris Frick Robert Glim Harlan Halvorson Patrick Henry David Kiefer James McClure Bernadette Mullins Michael Olson C. Lorenzo Pope Chuck Schuele Frank Shields Susan Sweeney Robert Tharp Paul Woods



Please share this issue of AirWays with friends, family and colleagues.

Second Wind Lung Transplant Association, Inc. 2416 Covert Road Glenview, IL 60025 **RETURN SERVICE REQUESTED**

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12% of the purchase price goes to Second Wind to help continue our mission of providing service to the transplant community.

