SECOND WIND
LUNG TRANSPLANT ASSOCIATION, INC.

AirWays

SERVICE THROUGH EDUCATION AND SUPPORT

JULY - OCTOBER 2024

Tired of Hearing/Thinking About COVID?

You're not alone: "COVID Complacency", like the virus itself, is on the rise.

"COVID Complacency" describes the public's growing attitude that the danger presented by the virus is significantly less than it was at the height of the pandemic. We see this all around as fewer people mask up, stay socially distant, isolate themselves if they test positive, or even bother to test at all.

A Gallup poll revealed that 59% of respondents believed the pandemic was "over" in the United States, and the proportion of people who said they felt concerned about catching COVID has been declining for two years. Among people who rated their own health positively, almost 9 in 10 said they were not worried about getting infected.

As reported in the New York Times, Michael Osterholm, the director of the Center for Infectious Disease Research and Policy at the University of Minnesota, said the rising complacency can be attributed to confusion as well as fatigue. COVID variants are still evolving faster than influenza variants, and the idea that COVID is a seasonal virus is rebutted by the fact that the 10 surges in the United States so far have been evenly distributed throughout all four seasons.

It seems that there is a growing collective psychology among the populace that it is time to move on. Even at a recent meeting of 200 infectious disease experts in Washington hardly anybody donned a mask. "We've decided, 'Well, the risk is OK.' But nobody has defined 'risk,' and nobody has defined 'OK,'" Dr. Osterholm said. "You can't get much more informed than this group."

Despite the rise in so-called COVID Complacency, the virus remains a clear danger to certain populations, and because of the powerful immune suppression drugs that they must take each day, organ transplant recipients are at the top the list.

But there is help on the way.

Pfizer and Moderna have both released a new vaccine that is aimed at attacking the latest COVID variant. The questions are: will anyone take it, and who pays the bill?

In theory, these new versions come at a crucial time, as the U.S. saw another summer surge. More than 700 people in the U.S. per week had been dying in early August, and by one count, the U.S. just had two straight weeks of more than 1,000 deaths. These rising infection numbers have been driven by a combination of new variants and the public's waning immunity, assisted by an extremely hot summer that kept people indoors.

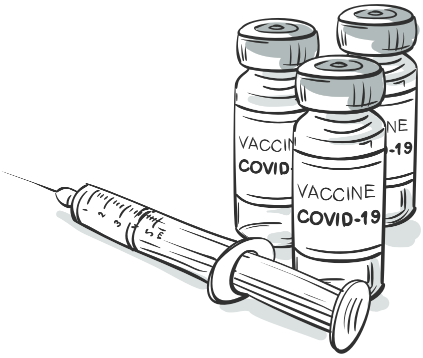
However, in light of the fact that only 22% of adults and 14% of children took last fall's COVID vaccine, there is plenty of reason to doubt that there will be much interest in the newest ones.

Another issue tending to drive down acceptance of the new vaccines is cost.

Private insurers, along with the Medicare and Medicaid, are required to pay for coronavirus vaccines, and the federal Bridge Access Program offered a backup option for those who don't qualify. However, the program ran out of funding, and now adults without insurance are finding that shots are no longer free, instead costing up to $200.

As we face the prospect of a Fall-Winter surge of COVID infections, transplant patients continue to be at great risk, surrounded as they are by an unvaccinated and unmasked population.

Now is not the time to give in to COVID Complacency.



AirWays

SERVICE THROUGH EDUCATION AND SUPPORT

AirWays is published three 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.

Articles printed in this newsletter are for general information only and are not meant to be taken as professional medical advice. Each individual's situation is different and information in the newsletter may or may not apply to you or your circumstances. It is your responsibility to discuss any information herein with your physician to determine whether it is beneficial or deleterious to your health.

We welcome contributions; however, we reserve the right to edit submissions for length and content. Any changes made will be reviewed with the author whenever possible.

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

To join or change your address please contact Second Wind via email to phenry2ndwind@gmail.com.

Comments or suggestions? Email us at airwaysfeedback@gmail.com

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President's Notes

Tom Nate, President
Second Wind Lung Transplant Association, Inc.

Hello Members and Friends,

One of the highlights in the life of a double lung transplant survivor is the anniversary of his or her lung transplant surgery and the beginning of new life.

Back in May, I celebrated the 17th anniversary of my first double lung transplant and, by the grace of God, last month I celebrated the 14th anniversary of my second double lung transplant.

Each additional year that I get to celebrate these anniversaries, I am excited, but also extremely humbled and grateful to my donor families, and to my transplant team at Barnes Hospital - St Louis.

There is no way to express the tremendous appreciation I have for family and friends who traveled this journey alongside me since 2007, especially my wife/ caregiver Irma. She has been by my side through it all and literally would not allow the doctors to give up on me when they were expecting my demise in 2009. And, of course, God gets all the glory for keeping me here in this life a bit longer!

* * *

As Fall is upon us, Second Wind is looking toward January, when we'll be voting on Board membership. As a volunteer organization with no paid staff, we rely on volunteer board members to accomplish our mission. And, due to the recent passing of board members and normal turnover, we are seeking candidates to join the board.

Board membership requires only that you: 1) be a member of Second Wind; 2) attend six virtual (zoom) board meetings per year; and 3) join one of the committees that help meet our mission.

My commitment to Second Wind is a result of my great fortune to have received two lung transplants, and the obligation I feel to "pay it forward" by helping other patients and families. If your heart also tells you that this is the right thing to do, we would welcome your joining us on the board.

If you are interested in serving, simply drop me a line at tnate1254@gmail.com. I can answer any questions you have, and explain the application process. Hope to hear from you soon.

* * *

Now I have some sad news to share about the passing of one of our longest surviving members, Gregory Briggs. Greg had been a member of Second Wind since his lung transplant surgery in 1996, 28 years ago! We expect to have a tribute to Greg in a future *AirWays* edition.

Also, we recently lost another lung transplant friend, Gary Gobble. You may remember we featured Gary and his wife Carrie in the July 2023 issue of *AirWays*. This couple started their relationship when Gary acted as Carrie's mentor while she was waiting for her transplant surgery.

We send our deepest sympathy to Greg's family and friends, as well as to Carrie and Gary's family and friends.

* * *

Ending on a positive note, I want to offer Second Wind's congratulations to Jessi Nienke, a double lung transplant survivor transplanted in 1992 at St Louis Children's Hospital, who is celebrating her 32nd Lung Transplant anniversary!!

Jessi was recognized by the Guinness Book of World Records as the official longest living lung transplant survivor! Big shoutout to Jessi, and we hope to see her story in an upcoming issue of *AirWays.*

Breathe Easy!
Tom Nate, *President*

Editor's Notes

- A highlight of this issue is Eric Harned's article describing his adventures at the 2024 Transplant Games in Birmingham, Alabama, an event that brings together a community of individuals who have been touched by the miracle of donation and transplantation. Congrats to Eric on his achievements!
- While events like the Transplant Games, where large crowds gather together, are happening more these days, COVID remains a concern for transplant patients, and the cover article describes the current state of the public's response to what is now more often described as "endemic", as opposed to a pandemic.
- Many thanks again to our (as yet, unofficial) Assistant Editor, Bonnie Parsons, who contributed two articles and helped to edit others in this issue.
- If you have a personal story to share, please send it to me at the address shown below. Sharing your experiences often provides comfort and helpful strategies to others facing the same challenges that you did.

\- Patrick Henry (Phenry2ndwind@gmail.com)

Steps In Place to Modernize the Nation’s Organ Transplant System

On September 19, 2024, the Health Resources and Services Administration (HRSA) at the Department of Health and Human Services (HHS) announced an historic new program to modernize and upgrade the organ transplant system, and to potentially improve services for people on the organ transplant waitlist.

The Organ Procurement and Transplantation Network (OPTN) was established by the U.S. Congress in 1984. After 40 years, it became apparent that a transformation was imperative for patient care. Critiques have included a lack of transparency, possible conflicts of interest, IT reliability, and various structural challenges.

“With the life of more than 100,000 Americans at stake, no organ donated for transplantation should go to waste,” said HHS Secretary, Xavier Becerra. “For too long, our organ transplant system has fallen short, mired in monopoly. The Biden-Harris Administration has reformed OPTN to require accountability in the operation of organ procurement that our transplant patients and their families demand.”

A first ever multi-vendor program will replace the former OPTN single vendor program. Multiple vendors will provide their expertise and experience to improve the national organ transplant system. “This transition from a single vendor to multiple vendors to support OPTN operations is a critical step in advancing innovation in the transplant system to better serve patients and their families and implement the bipartisan *Securing the U.S. Organ Procurement and Transplantation Network Act*,” said Mr. Becerra.

In addition, the HRSA, along with bipartisan leaders in Congress, worked to substantially increase funding to support these modernization efforts.

“One person is added to the waitlist every 10 minutes. Each one relies on and deserves the best care possible,” said HRSA Administrator Carole Johnson, adding, “Today’s action marks a significant advancement in the Biden-Harris Administration’s commitment to doing what it takes to make sure the nation’s organ matching system works for patients, donors, and the families who depend on the OPTN for that life-saving call.”

HRSA has awarded five separate contracts to reform the organ procurement and transplant network.

1. **Improving Patient Safety** – Award given to Arbor Research Collaborative for Health. Support will be given for patient safety and policy compliance systems and processes. This will be overseen by the OPTN Board of Directors and the Membership and Professional Standards Committee to improve surveillance of the many entities in the OPTN.

2. **Supporting OPTN IT Modernization** – Award given to General Dynamic Information Technology (GDIT). GDIT’s goal is to improve the organ matching IT system and inform HRSA’s Next Generation IT procurement and development programs.

3. **Increasing Transparency and Public Engagement in OPTN Policy Development** – Award given to Maximus Federal. Opportunities will be advanced to improve public visibility and involvement in the OPTN policy making process. This will include improving transparency regarding OPTN policy making committees’ deliberations and actions.

4. **Strengthening Patient-Centered Communications** – Award given to Deloitte. Deloitte’s primary focus will be communications improvement from the OPTN, within the OPTN, and especially with patients and families.

5. **Improving OPTN Financial Management** – Award given to Guidehouse Digital to improve OPTN’s budget development and management systems and processes.

As recently as August 2024, the HRSA announced a new hierarchy for the OPTN Board of Directors—the governing board that develops national organ allocation policy. The OPTN Board of Directors is now separately incorporated and independent from its former contractor, the United Network for Organ Sharing (UNOS). The OPTN Board Support contract was awarded to the American Institutes for Research to support the newly incorporated OPTN Board of Directors.

Further information and data are available on the HRSAorgandonor.gov website. For example, as of March 2024, 103,233 men, women, and children were on the national waiting list, and over 46,000 transplants were performed in 2023.

An important reminder from the
Health Resources and Services Administration:

More Donors, More Hope

Every registered organ donor offers hope to people who need transplants – and to the families who love them.

HRSA
Health Resources & Services Administration

UNOS
UNITED NETWORK FOR ORGAN SHARING

CBD, THC and Immune Suppression Drugs

By
Patrick Henry, *AirWays* Editor

There was a recent discussion on the Second Wind Email Support Group that centered on the use of CBD and/or THC for sleep or pain relief, and whether or not either is safe to use.

CBD is an oil derived either from hemp or from cannabis, with most all of the THC removed. It is available in gummies and topical ointments.

THC, the active ingredient in cannabis—what gives the user a "high"—is rapidly becoming legally available in many states in smokable or edible forms.

One member started the conversation by noting that his doctor had okayed his use of CBD gummies to deal with the severe pain and insomnia he was experiencing. He was told he had to consistently use the same brand and strength so that any effects on his tacrolimus (Prograff) levels could be monitored.

Another member noted that for a long time she would extract THC oil from cannabis herself, and had been using it successfully. She explained:

"I had my double lung transplant almost 10 years ago, but I've lived with Rheumatoid Arthritis for 35 years. It's a very unforgiving disease. For about 5 years I extracted the oil out of the real thing and made cookies. I had one at night to help me sleep. It was either use it for pain or sleep and I needed to sleep. After needing more and more I finally had to give that up."

I too had great difficulty sleeping, blaming it on the five months I spent in hospital post-transplant (no one sleeps in a hospital!), so I asked a younger relative for a THC gummy. I took a very small dose prior to bed one night, and it did help me sleep. The problem was, the effects lasted well into following day, so I decided it wasn't worth it. I considered trying it again a few weeks later when pain was keeping me awake, but first checked with my transplant team's pharmacist, who said:

"THC (regardless of the dose/amount) can increase tacrolimus levels in your body by slowing the clearance of the medication and increasing the absorption. So THC can increase the amount of medication absorbed and also slow the metabolism/clearance resulting in higher and potentially dangerous levels. "

I listened to my transplant team and, as always, encourage you to do the same before trying any new supplement, legal or otherwise.

And if you're interested in joining the discussion, contact Tom Nate at 1254tnate@gmail.com and he'll add you to the Second Wind Email Support Group.

Photo Credit: Anakkml/Dreamstime

Second Wind Board Member Goes For The Gold!

By
Eric Harned,
Bilateral Lung Transplant,
Ohio State-Wexner Center, 2014

Are you seeking the excitement of competition in a true Olympics format? Are you excited to visit a different city/state every two years? If so, then join me and thousands of other transplant recipients from around the country at the 2026 Transplant Games, destination not yet announced.

Truth be told, I first participated in the 2016 Transplant Olympics in Cleveland Ohio, but thanks to work conflicts and a lil' old thing called COVID, I missed competing in the 2018, 2020 and 2022 events. But after missing the games, I was determined to compete again in 2024 in Birmingham, Alabama and the trip south from Columbus, Ohio did not disappoint.

It's hard to overstate how much fun I had at the six-day event July 5-10th. It not only was well organized and executed by the hundreds of volunteers, it also allowed me to interact with transplant recipients and family members representing nearly all 50 states.

Simply stated, the Transplant Games are designed for people of all ages. In fact, I think the age range at this year's event was 14 – 76, so there really is no excuse not to participate in 2026.

As I mentioned prior, the six days of competition were well orchestrated, including the many hotels close to the Convention Center providing rooms to the many participants, and custom buses constantly picking up participants and taking us to the events. Thank goodness, because each day had temps in the mid to high 90's and high humidity—a real scorcher.

As for the rules, each participant was allowed to register to compete in as many as five different events, including multiple track events if you choose that as one of your events. As for me, I was able to max out my participation as I'm a very competitive 61 year old double lung transplant recipient, competing in Cornhole, ping pong/table tennis, darts, pickleball and TEAM OHIO Volleyball.

As to my personal results, I managed to bring home the gold medal in one of those events, Cornhole, where I was paired up with Mark Slater, a younger man from Cleveland, Ohio. During the Cornhole competition we were undefeated against six different pairings, coming back from a 16-4 deficit in the final match to win the Gold medal. It was so much fun meeting guys from all over the country and systematically defeating two-man teams, each of which felt they could win the Gold. But in the end Mark and I were able to claim we were the best Cornhole players in the country, at least within the transplant community. Woot! Woot!

Besides the Cornhole Gold medal, I competed effectively in each of the other events, but I failed to garner any additional medals to add to a TEAM OHIO medal count that ended with 31 Gold, 21 Silver and 14 bronze. The key takeaway, however, was all the fun I managed to have and all the great people I got to meet. People just like me from around the country who have been blessed to receive a transplant of an organ or two—a true blessing and miracle.

In addition to competing in the many events offered, one of the true pleasures was trading pins, as each state created a custom state pin and each participant had 50+ pins to trade with other participants from competing states. During the six

day event I traded pins with participants from nearly 40 different states, be it in the hotel lobby, the elevator, the events themselves or on the morning bus rides. This was its own form of competition, as everyone worked hard to get as many new pins as they could, while making many new friends along the way.

In summary, I am writing this article to do two things; 1) share my personal experience and how much fun I had making new friends from across the country and; 2) to encourage those of you who are healthy enough to participate to not miss out on a most fulfilling event by making the commitment to participate in 2026. If you are interested in learning more, you can research all the details at: www.transplantgamesofamerica.org

In closing, my hope is that each of you reading this article will give thought to participating in the 2026 Transplant Games, and if you do you will come up to me and introduce yourself. I will look forward to meeting you, but realize that if you are competing in one of my events my goal will be to defeat you and take home more medals in 2026. Be so advised!

Finally, thanks to my donor, Rita, for my new lungs as without her I would not be here to compete in the Transplant games.

Blessings,
Eric Harned (Team Ohio)

Second Wind Board Adds Two New Members

The Second Wing Board of Directors elected two new members at its August meeting: Anthony Zaccaglin and Mark Henry. Here is a bit about their backgrounds and the talents and experience they bring to the board:

Anthony Zaccaglin

Born and raised in Los Angeles, California, Anthony worked in healthcare for 25 years. In 2022 he was diagnosed with Interstitial Lung Disease and received a double lung transplant on September 13, 2023.

After receiving his gift of life he knew he wanted to become involved in the lung transplant community, and his transplant team suggested that he contact Second Wind. Impressed by its work in supporting and educating the lung transplant community, he applied to join the board.

Anthony currently lives in Murrieta, California with his wife and caregiver, Lisa. They have two adult children Bret and Alexandria, and four grandchildren. He credits them all for being an incredible support team throughout his transplant journey. A published author and musician, he collects exotic drums and percussion instruments and plays them daily for exercise and meditation. He stresses that, "Learning to calm your mind is an important component for both emotional and physical healing."

Mark Henry

Mark Henry, a native of Western New York, lives with his wife, two daughters, two female dogs, and two female cats, and enjoys shouting at the TV during both Buffalo Sabres and Buffalo Bills games.

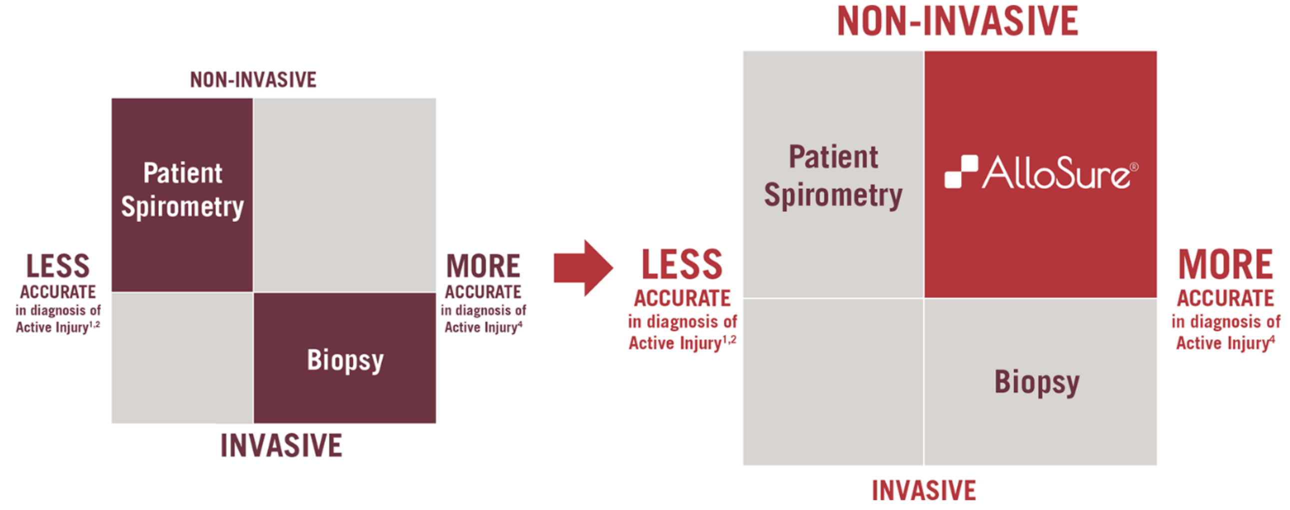
A professional touring musician in his early 20's, Mark has now been an employee of Univera Healthcare, a not-for-profit health insurance company, for the past 17 years. He started there doing data entry for Medicare applications, and has worked his way up to a position where he now manages multiple teams of Software Engineers who support the company's various websites.

Mark got involved with Second Wind through a very personal connection—his father, Patrick Henry, who happens to be a single lung transplant recipient, as well as the Second Wind VP and editor of our newsletter *Airways*. Pat reached out to Mark back in 2020, mentioning that Second Wind was looking for someone to manage our membership database.

Mark readily took on that role and, when an opportunity came up to join the Second Wind board in 2024, he agreed without hesitation. After seeing his own father's struggles during his transplant journey, and the wide variety in ages, locations, backgrounds and medical histories of the people who have become members of the organization over the past four years, he was anxious to see if there was more he could do to contribute to Second Wind's mission.

Newer Blood Test Reliably Picks Up Lung Transplant Injuries

(Editor's Note: We strive to keep you informed of the latest advances in lung treatments and testing, but Second Wind does not endorse any specific products.)



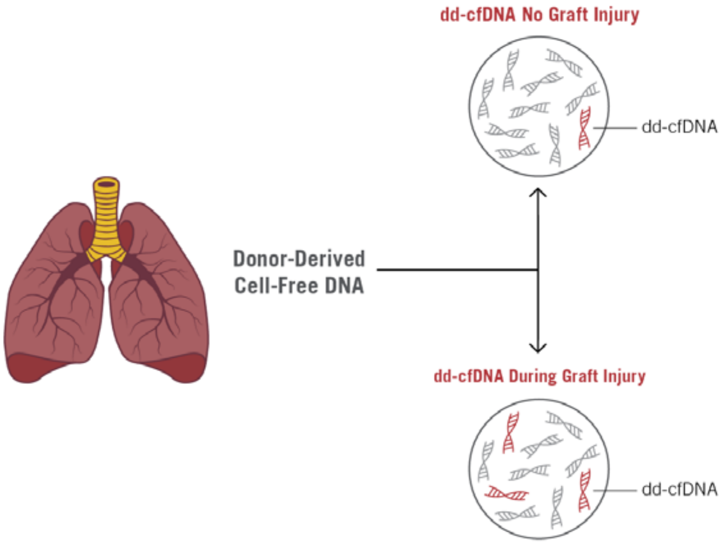
Lung transplant injury remains a life-threatening problem for patients who receive a lung transplant. "AlloSure Lung" a CareDx product, seeks to detect these problems with a simple, non-invasive blood test.

Current tests for injury after lung transplant carry gaps and can have risks. Spirometry is a common study of lung function, which is also non-invasive, but it does not detect lung injury as accurately as AlloSure. Lung biopsies are highly accurate, but unfortunately more invasive, carrying more risk of complications than a blood test. As summarized above, when compared to spirometry and biopsy, AlloSure, shows more accuracy and less invasive properties in the diagnosis of active lung injury.

How does AlloSure work? The answer lies in the donated organ, donor-derived, cell-free DNA or "dd-cfDNA." Our cells normally release strands of DNA continuously into our bloodstream. In transplant recipients, the question is, whose DNA is it, the patient's or the donor's? AlloSure distinguishes between donor and recipient DNA and quantifies the two different sources of DNA. Increasing levels of DNA from the donated organ have been shown to indicate injury, as illustrated in the diagram to the right.

There are studies besides those from the manufacturer that support the use of AlloSure to measure lung transplant injury. For example, "*Molecular monitoring of lung allograft health: is it ready for routine clinical use?*" is a summary article from Prodere et al. published in the European Respiratory Review. The study cited AlloSure for high capacity for donor injury detection in its summary of molecular monitoring tools.

Reliable, non-invasive strategies for detecting lung transplant injury are needed. Evidence suggests AlloSure Lung is an effective, non-invasive method to measure organ injury after transplantation.



Honoring A Life

You may have noticed that many of the donations listed in each issue of *AirWays* came to Second Wind as a way to recognize the loss of a close friend or family member.

These "In Memory of" donations are a wonderful way to both help Second Wind serve the transplant community, while honoring the memory of someone close to you who was either the recipient of a lung transplant, or acted as a caregiver for another who had been fortunate enough to have received this gift of life.

One way that individuals can generate donations in memory of a loved one is by listing Second Wind in the deceased's obituary as the recipient of donations to be given in that person's name. To do so, one need only refer such donations to be mailed to:

Second Wind Lung Transplant Assoc.
1177 San Marino Dr.
Apt 2212
Sam Marcos, CA 92078-4633

Anyone who sends a donation in will receive a thank you letter from Second Wind and, upon their request, we will send a list of all donors to the deceased's family.

* * *

We thank the following individuals who made a donation to Second Wind during the period July 1 – October 31, 2024:

General Donations

Doris Frick
John & Alida Becker
Leslie Casey
Julie Yoshida
Benjamin Calimbas
John & Mary Ann Della Jacono

In Memory of Joe Ruth

Mike Bushnell

In Memory of Sarah Ridder

Charles & Peggy Matthews

In Memory of Jim Withers

Brenda Withers

In Memory of Etta Milton

Robert Milton

Financial Assistance

Richard Williams

In Memory of Greg Briggs

Shellie Scruggs
Shane G. Hood
Louanne Ambrose
Ernest & Mona Masters
Scott J. Frendt

NEW MEMBERS

The following individuals became members of
Second Wind during the period July - October 2024.
We welcome and thank you for your support of our mission.

Natasha Alston
Holly Daniel
Wilfred Deane
Bridget Fallins
Abha Ganeriwal
Connie Goldman
Patricia Hilton
Edward Hobbs
Mike Joslin
John Martin
Lori Nagel
Gary Shuman
Julie Yoshida

In Memoriam

Second Wind wishes to
recognize the recent loss of the
following member:

Gregory Briggs
Transplanted 1996

Transplant Anniversaries

Second Wind congratulates the following members who have celebrated the anniversary of their lung transplant this Summer and Fall. Special recognition **(bold type)** is given to those members who have reached or exceeded their 10th year post-transplant.

NOTE: if you received a transplant after joining Second Wind, your name may not appear in these newsletter listings. If you send an email to Phenry2ndwind@gmail.com including your date of transplant, we'll be sure to include you in the future.

JULY 2024

Name	*Transplant Date*	*Years*
Steven Bahm	7/7/2022	2
Catherine Brosnan	7/7/2020	4
Terri Christenson	**7/9/2014**	**10**
Alejandro Gonzalez Castano	7/21/2023	1
John Della Jacono	7/19/2019	5
Thomas Hayes	7/17/2018	6
Daniel Kolopajlo	7/4/2019	5
Jon Levario	**7/24/1997**	**27**
Patrick Libens	7/27/2019	5
Ruth Magnus	**7/20/2008**	**16**
Darcy Ode	**7/18/2014**	**10**
Michael Pazen	**7/9/1999**	**25**
Ralph Rhodes	7/21/2021	3
Chuck Schuele	**7/19/2010**	***14**
Anita Tracey	**7/3/2005**	**19**
Karen Vollten	7/23/2016	8
Ina Williams	7/14/2020	4

AUGUST 2024

Name	*Transplant Date*	*Years*
Kandi Bastianelli	8/27/2019	5
William Bostick	**8/15/2007**	**17**
Christine Capriati	8/4/2022	2
Jan Chicoine	8/16/2020	4
Wilfred Deane	8/15/2023	1
Arthur Donovan	8/12/2021	3
Tamara Geunther	8/15/2020	4
Harlan Halvorson	**8/24/2006**	**18**
Dave Harris	8/12/2016	8
Patrick Henry	8/25/2015	9
Gwen Herron	**8/11/2012**	**12**
Jack Hollenbach	**8/3/2007**	**17**
Frencesca Magee	8/23/2020	4
Aldo Mancilla	**8/13/2010**	**14**
Julie Martin	**8/29/2005**	**19**
Ruben Ogando	8/18/2018	6
Michele O'Guinn	**8/26/2004**	**20**
Toni Perez	8/15/2021	3
Jesse Ramos	8/26/2018	6
Chris Stocks	8/5/2023	1
Michelle Takemoto	8/15/2020	4
Chris Towe	8/26/2018	6

SEPTEMBER 2024

Name	*Transplant Date*	*Years*
Tim Calkins	9/29/2018	6
Paul Enslin	9/21/2019	5
Kevin Gargan	9/5/2016	8
Linda Grubb	9/17/2021	3
Karina Hallinan	9/13/2019	5
Brian Jenkins	**9/2/2009**	**15**
Nancy Lee	**9/23/2011**	**13**
Veronica Lobo	9/5/2020	4
Daryl Long	9/4/2019	5
Michael Long	9/26/2019	5
Albert Arapata McKay	9/29/2020	4
John McNamara	**9/18/2006**	**18**
Tom Nate	**9/20/2010**	***14**
Cheree Peirce	**9/16/2012**	**12**
Nayano Taylor-Neumann	9/15/2021	3
Pamela Thorkelson	9/17/2019	5
Lloyd Turner	9/27/2020	4
Carolyn Vega	**9/1/2013**	**11**
Julie Yoshida	9/21/2023	1
Anthony Zaccaglin	9/13/2023	1

OCTOBER 2024

Name	*Transplant Date*	*Years*
Lofti Ben Abdallah	10/28/2020	4
Beth Davenport	**10/20/1995**	**29**
Julia Flatt Cohn	10/5/2020	4
Courtney Harris	10/16/2020	4
Sonia Joseph	10/23/2019	5
Mike Joslin	10/28/2021	3
David Lischer	10/15/2017	7
Mickey McCabe	10/17/2016	8
Damian Neuberger	**10/19/1997**	**27**
Kay Ryan	10/18/2020	4
Alan Schwenck	**10/6/2009**	**15**
David Somerville	10/30/2017	7
Charles Vigil	10/28/2018	6
Danette Ward	10/24/2019	5
Jennifer Wilcock	10/6/2019	5
Scott Willoughby	10/26/2017	7

*Retransplant Date

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

Second Wind Lung Transplant Association, Inc.
4543 Camp Road
L221
Hamburg, NY 14075
RETURN SERVICE REQUESTED

COTA can assist Adult Patients with Cystic Fibrosis (CF) and Alpha-1

COTA Adult
Kristen Jagodowski
(with daughter)

Double Lung Transplant Recipient

"My hope for the future is to live a long and healthy life with my daughter at my side enjoying all of my favorite things. Doctors' appointments, medications, procedures, travel expenses are all part of my life and all of those come with a cost. I am so thankful COTA's support and guidance continues to be a vital part of my journey, relieving the financial stress still today."

- Call COTA at **800.366.2682**
- Visit **COTA.org/Get-Started**
- Scan **QR Code**

COTA is a 501(c)3 nonprofit and is the largest organization dedicated solely to helping transplant patients and families raise funds for transplant-related expenses.

- COTA never charges a fee.
- 100% of funds raised in honor of transplant patients are available for a lifetime of transplant-related expenses.
- Fundraising websites are provided free of charge.

Children's Organ Transplant Association®
The Trusted Leader Supporting Families … For a Lifetime