



Lung Transplants Through the Patients Eyes **by Gerald Ullrich, Dr. rer. biol. hum., Dipl.-Psych.**

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This book, *Lung Transplants Through the Patients Eyes*, was written expressly for the purpose of preparing a person for lung transplant. Whether they have cystic fibrosis or other underlying diseases, the book focuses on both groups. The author illustrates the process of transplantation; first through what is usually experienced as it has been documented and then through the patients' experience by using direct quotes from his subjects. The text guides a person through being told a transplant is a possibility, getting listed, the waiting period, the recovery period, and life post-lung transplant

Even though this book is written about the German lung transplant experience, in Hanover, Germany, and uses interview subjects from that lung transplant center, it is universal in the psychological aspect of preparation and what to expect pre-and post-transplant.

This book goes into the slight differences some patients may experience. The interviewees were split into two groups, one made up of people who had cystic fibrosis and the other group consisted of other primary diseases such as primary pulmonary hypertension, anti-trypsin deficiency emphysema, idiopathic pulmonary fibrosis, and COPD. Findings were varied in most situations by group. One example of big differences in the groups was that most people with CF grew up with the illness and knew eventually, once their disease progressed, a lung transplant might be an option for extending their life. With the second group, who mainly were diagnosed later in life, around their 50s as indicated herein, were less receptive initially to lung transplantation. This group was at times informed by their medical professional of a lung disease and the next sentence was, you may need a lung transplant to survive. The mental and emotional processes of these two groups differed for obvious reasons, as for shock value. Therefore the CF group eased into the decision at a faster rate but all interviewed subjects eventually underwent surgery and had different outcomes. These two groups were used to illustrate different psychological and emotional dilemmas that were presented to them.

The interviewed subjects were asked numerous questions regarding their expectations, health status at the time of interview, their fears and hopes post-transplant, and their survival. Their direct quotes are useful in expressing actual emotions instead of more clinical data. Reading their exact comments, with pauses and exclamations, one feels their hesitancy and their unease at processing their feelings towards transplant. The subjects are then interviewed post-transplant and one can sense their relief that the worst is over, for most. Mainly the subjects were glad that they underwent the transplant and would do it again. As a bonus for the English edition, included is a case study of a man who has CF and had complications but his was still a success story.

Having personally been a recipient of a bilateral lung transplant nine years ago, I recommend this book to anyone considering a transplant. This book made many good points, mainly that every experience is different and one must be prepared to go through some rough patches. I thought that the recovery period covered, mainly the ICU, medications, the rehabilitation and then being home were very informative. I enjoyed reading this book as it brought back memories of the waiting period to post-surgery that I had not thought of in years. It also made me realize how far I had come.

If you are looking for an informative, easy-to-read guide to the transplant stages, what will happen before, during and after lung transplant, this book is a good place to start.