Living Donor Kerato-Limbal Stem Cell Transplant

For patients who want to learn more about living donor kerato-limbal stem cell transplant

This pamphlet includes information for both the donor and recipient.

Read this pamphlet to learn more about:

- The benefits and risks of the surgery
- The living donor assessment process
- · What happens during the surgery
- How to take care of the eye after the surgery
- Who to contact if you have questions



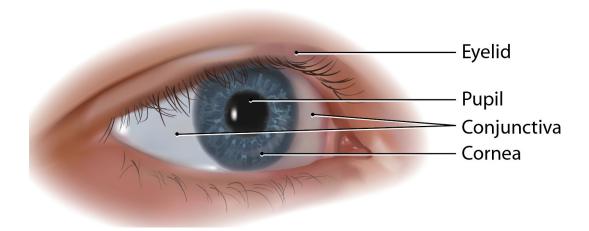


What is a living donor kerto-limbal stem cell transplant?

This surgery is done to treat limbal stem cell deficiency.

The limbal stem cells are found around the cornea (the clear dome that covers the coloured iris of the eye). When the cells are damaged or don't work properly, you may have:

- trouble seeing
- eye pain, redness or tearing that does not go away
- a feeling that you have something in your eye
- light sensitivity (bothered by bright light)



What are the benefits of having this surgery?

After having this surgery, the outer layer of the cornea should grow back normally. Also, your symptoms should get better.

What are the risks of having this surgery for the recipient?

A 'risk' is the chance that something might go wrong after the surgery.

The risks of the surgery for the **recipient** and how to help prevent the risks include:

Infection

• We will give you antibiotic drops for your eye.

Inflammation (red and swollen)

• We will give you topical steroid drops for your eye.

Cornea takes longer to heal

- How to help prevent infection:
 - You may need to wear a bandage contact lens.
 - You may need to use eye drops.
 - Your surgeon may need to sew a special protective thin covering over the eye.

Rejection of the living donor cells

- How to help prevent infection:
 - We will give you pills that lower your immune system's ability to attack the donor cells.
 - If the living donor cells are rejected, we will give you a higher dose of the anti-rejection pills and stronger topical steroid eye drops.
 - If the rejection is not reversible, you may need to have the transplant done again. Your organ transplant specialist will talk to you about the risks when you meet with them.

What are the risks of having this surgery for the donor?

Donating your limbal stem cells is done with local anesthesia because only a small area of the surface of the eye (which contains the stem cells needed) is removed. The surgeon does not enter the inside of the eye.

The risks of this surgery for the **donor** and how to help prevent the risks include:

Infection

• We will give you antibiotic drops for your eye.

Inflammation (red and swollen)

• We will give you topical steroid drops for your eye.

Eye takes longer to heal

- How to help prevent infection:
 - You may need to wear a bandage contact lens and use more eye drops.
 - Or, your surgeon may need to sew a transparent special protective thin covering over the eye.

Nausea or fatigue from the anesthesia given through the intravenous (IV) line

• How to help prevent infection: The anesthesia doctor will give you more information.

Note: Serious complications, such as vision loss, are very unlikely after this surgery.

What is the Living Donor Assessment Process?

- **Step 1:** An ophthalmologist (eye surgeon) examines your eye. If there are no problems with your eye and you are a good candidate to donate your corneal limbal stem cells, the ophthalmologist gives you more information.
- **Step 2:** You call the living donor office at 416 340 4800 extension 6581 to let them know you want to be a donor.
- **Step 3:** You fill out a Donor Health History Questionnaire.
- **Step 4:** You have blood tests (including blood typing and testing for any infections). You may also need to do other tests such as a chest x-ray, ECG and urine tests.
- **Step 5:** A different ophthalmologist then examines your eye.

This assessment process protects the donor. It ensures the donor fully understands the surgery and that there will be no harm done to their eye.

What can I expect when having the living donor surgery?

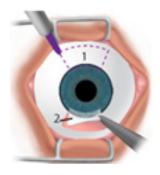
This surgery usually lasts about 30 to 60 minutes. Most patients leave the hospital on the same day.

On the night before your surgery

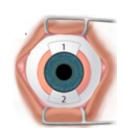
• Do not eat any food or drink any fluids after midnight

On the day of your surgery

- Please come at the Toronto Western Hospital at the time your coordinator asked you to arrive.
- In the pre-operative waiting room area, a nurse will put an IV into your arm and check your blood pressure and vital signs.
- The anesthesia doctor or assistant will speak to you about the type of anesthesia you will have (either general anesthesia or sedation) and how to cope with any discomfort after the surgery.
- We will transfer you to the operating room. We give you medication through the IV to help relax.
- We give you eye drops to completely numb (freeze) the eye which will be providing the donor tissue.
- Your ophthalmologist will take 2 small pieces of tissue from the eye that are about 6 mm by 4 mm. Or, about this size: This tissue has the limbal stem cells. The tissue are stored in a special solution for the recipient's surgery.



- The surgeon closes the wounds with a few stitches or tissue glue and puts antibiotic drops into the eye. You may need to wear an eye patch for a few hours or overnight.
- For the recipient's surgery, the ophthalmologist will remove any scartissue over the surface of the cornea.
- Then using a few stitches and/or tissue glue, the ophthalmologist secures the small pieces of donated tissue with the limbal stem cells.



It is normal to have:

- a scratchy and burning feeling in the eye
- tearing of some bloody tears
- mild pain

We will give you pain medication to take if needed. Your ophthalmologist may give you more information about how to cope with your pain.

On the morning after your surgery:

- Your ophthalmologist will examine the operated eye.
- It is normal for the eye to:
 - be red, or feel scratchy or burning
 - have blurry vision (this will go away)
 - have increased tearing
 - have some eyelid swelling

1 or 2 weeks after your surgery:

- Your ophthalmologist will give you instructions about when you can stop taking the eye drops.
- Your ophthalmologist's office will arrange a follow-up appointment with you.
- Once the donor has recovered, you may continue to see your local optometrist or ophthalmologist for routine eye care.

Who can I call if I have questions?

Recipients and donors can contact their coordinator:

Elena West

Phone: 416 340 4800 extension 8617

Email: eyetransplant@uhn.ca

Or send a message through myUHN Patient Portal



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