A new study, 'Combined heart-kidney transplant after CardioWest total artificial heart bridge,' is now available. According to recent research from the United States, "Combined, single-donor, heart and kidney transplant (HKTx) recipients have survival rates comparable with those after heart transplantation alone. Although HKTx provides superior outcomes in patients with dual-organ failure, appropriate single-donor organ pairs are very scarce."

"Mechanical circulatory support thus seems an attractive option as a bridge to HKTx. We report the case of an adult with end-stage cardiomyopathy and renal failure who was successfully bridged to combined, single-donor HKTx with a total artificial heart. Infectious complications associated with the CardioWest cavity were encountered prior to transplantation. The patient recovered and was discharged 14 days after transplantation. At 4 months post-transplantation, the patient required single-vessel coronary stenting for a high-grade stenosis. At 1 year, he has had no further complications and has excellent function of both transplanted organs," wrote A.J. Hansen and colleagues, University of Arizona, Division of Cardiothoracic Surgery (see also ).

The researchers concluded: "Despite limited availability of same donor organ pairs, patients with combined cardiac and renal failure can be bridged effectively to transplant with the CardioWest total artificial heart."

Hansen and colleagues published their study in the Journal of Heart and Lung Transplantation (Combined heart-kidney transplant after CardioWest total artificial heart bridge. Journal of Heart and