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Retrospective Study

Long Term Outcomes of Cardiac Transplant for AL Amyloidosis: The Mayo Clinic Experience

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Abstract

Heart failure due to immunoglobulin light chain amyloidosis (AL) portends a poor prognosis. Orthotopic heart transplantation (OHT) is controversial due to the risk of disease progression and recurrence in the transplanted heart. The medical records of patients with AL who underwent OHT from 1992 and 2011 were reviewed. Patients met at least one of the following at: NYHA class IV heart failure, ventricular thickness > 15 mm, ejection fraction < 40%. Selection guidelines included age < 60 years, absence of multiple myeloma and significant extra-cardiac organ involvement. Twenty-three patients (median age 53 years) with AL received OHT. There were no deaths in the immediate perioperative period. Median survival was 3.5 years following transplant. One and five-year survival was 77 and 43% respectively, compared to 95 and 85% for non- amyloid patients of the same era. The most common cause of death was progressive amyloidosis (n=12) followed by infection and malignancy (n=4 each)

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