Cleveland Clinic has one of the highest-volume lung and heart-lung transplant programs in the United States. It is the leading center in Ohio.

**Lung Transplant Procedures, Volume and Type**

**2014 Volume (N = 106)**

2010 – 2014

<table>
<thead>
<tr>
<th>Volume</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart-lung</td>
<td>120</td>
<td>120</td>
<td>120</td>
<td>120</td>
<td>120</td>
</tr>
<tr>
<td>Double lung</td>
<td>80</td>
<td>80</td>
<td>80</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td>Single lung</td>
<td>40</td>
<td>40</td>
<td>40</td>
<td>40</td>
<td>40</td>
</tr>
</tbody>
</table>

Cleveland Clinic surgeons performed the second largest number of lung transplants in the United States in 2014 — 106 transplants, which includes 2 heart-lung transplants.

**Primary Disease of Lung Transplant Recipients**

**2014 Volume (N = 104)**

July 2013 – June 2014

- 67% Idiopathic pulmonary fibrosis (N = 70)
- 15% Emphysema/chronic obstructive pulmonary disease (N = 15)
- 18% Other (N = 19)

Idiopathic pulmonary fibrosis was the most common primary disease among patients who had lung transplant procedures at Cleveland Clinic in 2014.

*These data include only patients who had lung transplants. It excludes the 2 heart-lung transplant procedures performed in 2014.

Source: Scientific Registry of Transplant Recipients, December 2014. srtr.org
Patients who undergo lung transplantation at Cleveland Clinic have survival rates as expected and not statistically different from national rates.

*Expected survival rate based on risk adjustment.

Source: Scientific Registry of Transplant Recipients, December 2014. srtr.org

The median wait time for lung transplantation at Cleveland Clinic is shorter than in the region as well as throughout the United States.

Source: Scientific Registry of Transplant Recipients, December 2014. srtr.org

The mortality rate among Cleveland Clinic patients on the wait-list for lung transplant is not statistically different from the national rate.

*Expected survival rate based on risk adjustment.

Source: Scientific Registry of Transplant Recipients, December 2014. srtr.org

Ambulatory ECMO

Patients waiting for lung transplantation can become poorer candidates while waiting because of the use of extracorporeal membrane oxygenation (ECMO). This is a method used in very ill patients to add oxygen to and remove carbon dioxide from the blood.

Traditionally, ECMO requires the patient to stay in bed. This causes the muscles to weaken, and patients become less likely to be eligible for transplantation.

Cleveland Clinic is aggressively developing ambulatory ECMO technology to improve transplant candidacy, save lives, and improve outcomes.