This disease is epidemic and the number of patients in Nova Scotia will grow," says Schlech. "In the future I can see much more space at the VG devoted to AIDS patients."

Rozee agrees. He says AIDS will doubtlessly become one of the "major plagues of humanity." He points out that in Africa, where the disease originated, it has spread from being a disease primarily limited to homosexual males to become a disease of newborns and young adult heterosexuals.

"If the disease progresses like this in North America, we can look forward to a serious problem," says Rozee.

Organ transplants leaping forward

Early last month the Victoria General Hospital reached a milestone. It performed its 100th kidney transplant of 1986. Never before had the VG's kidney transplant team achieved so many transplants in one year. In fact, never before had any Canadian hospital. And of course, before the end of 1986, the number of kidney transplants at the VG climbed even higher.

Kidney transplantation is but only one element of the Victoria General Hospital's growing and dynamic Multi-Organ Transplant Program. Patricia J. Houlihan, Organ Procurement Officer, profiles the program.

For many members of the general public there are few medical procedures which appear as dramatic and awe-inspiring as organ transplants. The notion that the untimely death of one individual can actually give a new life to another, is somewhat humbling.

The fact is however, that organ transplantation is a widespread treatment of choice for patients suffering from end-stage organ failure. For patients whose kidneys, livers or hearts have ceased, or will soon cease to function, an organ transplant is the only hope for a normal life or in many cases any life at all.

The Victoria General Hospital has been a major force in organ transplantation in Canada for many years. After a quiet beginning in 1969 when Dr. A. S. MacDonald and Dr. S. G. Lennon performed the VG's first kidney transplant, the program has grown considerably. Today, the Victoria General performs more kidney transplants than any other centre in the country. More than 100 kidneys were transplanted by VG surgeons in 1986, making last year a record year for kidney transplants.

In addition, the VG, under the direction of Dr. Henrich Bittersuermann, surgeon, and Dr. Bernard Badley, gastroenterologist, began liver transplants in 1985. To date, the VG has performed eight liver transplants.

Currently, the VG's Multi-Organ Transplant Program is involved in a variety of activities. Staffed by a multi-disciplinary group of health professionals, headed by Dr. Philip Belitsky, the Transplant Program is deeply committed to providing every potential transplantation patient in Atlantic Canada with the best possible organ transplant. To accomplish this, nurses, doctors, transplant coordinators, computer operators, lab technicians, educators, administrators and a variety of others have roles to play.

The Program provides retrieval and exchange of organs in conjunction with other organ procurement agencies across Canada and throughout the United States. The Kidney Transplant Unit, under the medical direction of Dr. Allan Cohen, provides inpatient care for the largest number of kidney transplant patients in Canada. An extensive outpatient follow-up program for both kidney and liver transplant recipients is also a part of the activities. Most of the patients who are transplanted at the VG are not metro-area residents and thus, a well coordinated liaison with the home hospitals of these patients is vital.

In addition to the patient services currently provided, the Multi-Organ Transplant Program, as a regional activity, takes seriously its responsibility in community and professional education. The program's educational activities take many forms from lectures to community groups and nursing students, to outpatient educational sessions.
AIDS research at the VG is the study of antigens and their importance in the immune suppression. Scientists are using gene cloning systems to provide pure antigens used in these experiments. Rozee says to his knowledge nobody else is using this particular approach to AIDS research.

The VG's lab also confirms diagnoses for all AIDS patients in Nova Scotia, New Brunswick, and Prince Edward Island. Newfoundland has set up a study of antigens and their diagnoses for all AIDS patients for that province.

Although other reference labs are funded by the federal government, the VG's lab is supported entirely by the hospital itself. Rozee estimates set-up costs were in excess of $150,000 and will be three times this annually.

"There's no question research is very important," says Rozee. "Without a proper research base such as we have here, people can't make judgement calls on what the next important step will be in providing quality patient care."

Schlech says the challenge to the VG when it comes to AIDS patients is the time and money these patients require. He estimates a half million dollars has already been spent on AIDS care.

Dr. Walter Schlech (standing), AIDS treatment specialist, works closely with Dr. Ken Rozee who heads up AIDS research at the VG.

In any event, Schlech hopes to soon establish a multidisciplinary outpatient service at the VG for AIDS patients and others with HIV infection. "Right now they are seen through our regular outpatient service," he explains. "I'd like to see a special AIDS clinic where they will be seen by nurses, dieticians, social workers, psychologists, and so on. The idea would be to treat the whole AIDS patient. And it would mean only a rearrangement of currently available programs with little additional investment."

Schlech says eventually Canada must look to the current emphasis in the US on home care for the AIDS patient. According to Rozee, if the numbers are only "half right" home care will become essential.

At the moment, about 100 people in Atlantic Canada are infected with the AIDS virus, says Rozee. More than 1000 kidneys were transplanted by VG surgeons in 1986, making last year a record year for kidney transplants.

In addition, the VG, under the direction of Dr. Henrich Bitter-Suermann, surgeon, and Dr. Bernard Badley, gastroenterologist, began liver transplants in 1986. To date, the VG has performed eight liver transplants.

For more than two years the Victoria General Hospital has also been performing bone transplants at the rate of about one per month. Approximately half of these transplants involve the internal amputation of a tumor avoiding the amputation of a limb. The remainder are performed to revise previously failed hip and knee operations. Largely due to the efforts of the late Dr. Pat McDermott, orthopaedic surgeon, the VG acquired a bone bank in 1985 and has since been building a supply of donor bones.

With the impending acquisition of a skin bank, the VG can also begin building a supply of donor skin which will be used to increase chances of survival and recovery for burn victims.

There have been spectacular improvements in organ transplantation over the past five years. Kidney transplants are successful in 80 - 85% of cases, liver in 70% and hearts in about 75%. The greatest boon to organ transplantation has been the development and marketing of what has been termed a "miracle" drug - cyclosporin. This drug has decreased the incidence of organ rejection without most of the unpleasant side-effects encountered with other older drugs used for suppressing the immune system. The VG was one of the major centres for the extensive multi-centre trial of cyclosporin - prior to its approval by the Food and Drug Directorate.

In addition to the patient services currently provided, the Multi-Organ Transplant Program, as a regional activity, takes seriously its responsibility in community and professional education. The program's educational activities take many forms from lectures to community groups and nursing students about organ donation, to teaching intensive care unit medical and nursing staff about the technical aspects of caring for organ donors.

The VG's Transplant Program is currently providing assistance to community hospitals to develop their own organ/tissue donation policies to fulfill requirements recently established by the Canadian Council on Hospital Accreditation.

The future of the Multi-Organ Transplant Program promises to bring more and more varied organ transplants to Atlantic Canadians. Plans are moving ahead for the inclusion of heart and pancreas transplants in the services provided by the Program.

As medical research increases the likelihood of more successful transplantation for an even wider variety of organs, the one limiting factor continuing to plague the VG as well as other transplant centres throughout North America, is the availability of donor organs. However, with the increasing success rate in transplantation, coupled with public and professional education programs on the topic of organ donation, the Victoria General Hospital's Multi-Organ Transplant Program anticipates organ donation will continue to increase to meet the need of waiting patients.

Patricia J. Houlihan