A National Leader in Heart Transplantation

Seattle Children’s is one of the busiest pediatric heart transplant centers in the country. We are regarded for managing the most-complex cases, particularly those involving neonates and infants — a large number of our patients are less than one year old. Our surgeons performed a heart transplant on an infant less than two weeks old, the youngest person to have this procedure in the Pacific Northwest. With some of the best survival rates in the nation, we have performed 21 ABO-mismatched transplants and successfully accomplished a combined heart-kidney transplant.

Improving Survival Rates and Quality of Life

Since 2005, Children's specialists have performed over 150 pediatric heart transplants. Most of these children would not have survived without transplantation. Seattle Children’s heart transplant survival rates are among the nation’s best. Current statistics show that children less than 1 year old at transplant who survive the first year have a more-than-95% chance of survival to age 4. Our family-centered care approach focuses on working together to help patients grow, thrive and participate in everyday childhood activities.

Common Causes of Heart Failure

- Cardiomyopathy
- Irreparable congenital heart defects
- Hypoplastic left heart syndrome
- Myocarditis

Leadership

Yuk Law, MD
Medical Director, Cardiac Transplant and Heart Failure

Michael McMullan, MD
Surgical Director, Cardiac Transplant
Director, Mechanical Cardiac Support and ECLS Services

Learn More: www.seattlechildrens.org/transplant/heart
Technological Breakthroughs Serve More Children

A pioneer in the field of pediatric heart transplant, Children’s is on the forefront of technological advancements that make successful transplants a reality for more children. Our heart transplant program was the first, and remains the only, of its kind in our region to offer innovative treatments including:

• Implantation of two-ventricle pacing devices (CRTs) to improve a child’s heart performance
• Ventricular assist devices (VADs) as a bridge to transplantation
• A highly successful extracorporeal membrane oxygenation (ECMO) program to provide life support when a child’s heart or lungs fail
• The hybrid approach: catheterization intervention combined with minimally invasive surgical techniques to stabilize children while they await transplant
• State-of-the art medical management that includes advanced tissue typing, blood banking and immunological treatment so children who otherwise would not qualify for the procedure can undergo successful transplantation
• ABO-mismatch heart transplants for infants

“Programs don’t distinguish themselves by doing the transplant better, but by supporting the patients, families and their local care-takers better afterwards. The Seattle team has always been great to work with.”

— Michael S. Womack, MD, FACC Pediatric Cardiology
Boise, Idaho