

Living **now**

A guide to life after transplant

Issue 2: 6-9 months



A time of
adjustment



On the cover: Valerie, transplant recipient

Contents

Issue 2: 6-9 months



Physical challenges
page 4



Expectations during recovery
page 7



Regain your strength & self-image
page 8



Sexual health
page 10

Welcome to *Living Now*

This newsletter is the second of six issues produced by Be The Match® patient services. Each issue addresses various aspects of life after transplant, from three months post transplant, to two years and beyond. Every person's experience is unique. This is not a timeline against which to measure yourself. This collection of observations, tips, and resources is designed to help you make the most of living now.

Note: Information in this newsletter is based on input from marrow and cord blood transplant experts and represents general principles and recommendations. This information is not intended to replace, and should not replace, your doctor's medical judgment or advice. Always consult your own medical team regarding your specific situation.

Information for caregivers

A special caregiver issue of *Living Now* is available for spouses, partners, parents, or anyone else who helps care for a loved one after transplant. It includes valuable information and resources on self-care, getting help from family and friends, finding emotional support, and more. If you have not received a copy, you may order it online from BeTheMatch.org/request, or by calling 1 (888) 999-6743. Caregiving information is also available online at BeTheMatch.org/caregiver

To unsubscribe

We make every effort to keep our mailing list current. If you have received this newsletter in error, or do not wish to receive future issues, you may unsubscribe by calling 1 (888) 999-6743 or e-mailing patientinfo@nmdp.org.

Oversight of medical content provided by:

Dennis Confer, M.D., chief medical officer,
National Marrow Donor Program/Be The Match

Willis Navarro, M.D., vice president and medical director,
National Marrow Donor Program/Be The Match

Mary Horowitz, M.D., M.S., chief scientific director,
Center for International Blood and Marrow Transplant Research

J. Douglas Rizzo, M.D., M.S., senior scientific director,
Center for International Blood and Marrow Transplant Research

A time of adjustment

At this point, your recovery may still feel like a roller-coaster ride, but the rhythm of highs and lows may be more familiar. Maybe your recovery is going better than you had expected. Maybe the challenges are greater than you were prepared for. Either way, you will continue to adjust to changes in your life. These include changes in your roles and responsibilities that might have been affected by your physical and emotional health.

This issue addresses some of the most common challenges during this post-transplant period, and offers helpful strategies to maximize your recovery. ■



Valerie, transplant recipient

“

I had to start dealing with the fact that life after transplant, with all of its complications, could be and probably was my new reality. I did this by surrounding myself with a great support system, turning to my faith, and by also reaching out to others who had gone through the same thing I had gone through.”

—Valerie

Your physical challenges



It often takes a year or more for people to feel physically recovered from transplant. Recovery of the immune system is gradual, and can take years. The timing of recovery varies a lot from person to person. This is affected by many different factors; including the intensity of chemotherapy and what kinds of problems you might experience. Preventing and treating infection or graft-versus-host disease (GVHD), a common problem after allogeneic transplant, are important aspects of your recovery. The most important thing you can do to help yourself during recovery is to follow the instructions you received from your medical team.

Prevent and control infection and GVHD

After an allogeneic transplant, it is important to stay on the lookout for warning signs of infection and GVHD. You are still at risk for infection as long as you are on immunosuppressants (medicines that hold back your immune system). Even patients who are not taking immunosuppressants are at risk for a year or more until their immune systems have fully recovered.

Mike, transplant recipient

Be on the lookout for early warning signs of infections such as fever or rash. See the purple box below for a list of signs and symptoms to watch for. Even if you might be feeling better, it's still important to watch for infections.

Tips for preventing infection

- Wash your hands with soap and water often. Always wash your hands:
 - after using the bathroom
 - before you eat
 - before and after preparing food
 - after touching animals
 - after sneezing, coughing, or blowing your nose
- Insist that family and friends practice good hand-washing
- Take showers daily
- Take medicines as directed
- Avoid contact with plants, soil and cleaning up after pets as directed
- Wear your mask as recommended
- Cook food thoroughly. Don't eat raw or under-cooked meat or seafood
- Ask your medical team about prepared foods and dining out

Tips for controlling GVHD

Chronic GVHD can begin any time after an allogeneic transplant, but typically develops during the 3rd to 6th month. Sometimes patients have their first symptoms of GVHD when their immunosuppressive medicines are stopped. Patients who had acute GVHD are more likely to have chronic GVHD. Symptoms of chronic GVHD can involve the skin, joints, mouth, intestines, and other organs. How much GVHD you experience, and how serious it is, varies widely from patient to patient.

Be sure to take your GVHD medicines as directed. If you think a change in medicines is needed, check with your doctor.

Some drugs used to treat infection, GVHD, and other symptoms have side effects of their own. Your doctor will watch for and treat any side effects.

Take care of your mouth and skin

Good skin and mouth care are also important aspects of your recovery.

Protect yourself from the sun whenever possible. Wear a hat, long sleeves and pants, and use sunscreen with a minimum SPF 30 on all exposed skin.

Use lotions recommended by your doctor to soothe dry, irritated skin. If you suspect a rash, tell your medical team.

Clean your teeth at least 2 times a day to prevent decay. Avoid mouthwashes that contain alcohol. Your doctor may recommend other mouth treatments such as fluoride trays and rinses, pilocarpine rinses, and steroid rinses. It is important to use these as directed. If your mouth is dry, you can try sucking on ice chips. Ask your medical team about saline rinses or other products that can offer relief for dry mouth. Ask your doctor when it's safe to start flossing again.

Watch for early warning signs and take action

Do not ignore or underestimate early warning signs of infection, GVHD or side effects from treatment. Getting treatment early may prevent more serious problems. Call your medical team to report any symptoms you experience.

* may represent a medical emergency

Whole body

- Fever (above 101°F)*
- Bleeding*
- Severe or long-lasting (more than 24 hours) headache*
- Confusion*
- Changes in memory or concentration
- Changes in weight
- Stiff, painful joints
- Weakness or fatigue

Stomach/digestive

- Difficulty swallowing*
- Stomach upset
- Sudden or severe nausea/vomiting*
- Sudden or severe diarrhea*

Skin, mouth, nails

- Dry mouth, chapped lips
- Mouth sores*
- Changes to skin or nails
- Dry, irritated eyes

Lungs

- Dry cough, coughing*
- Shortness of breath*

Urinary/genital

- Painful urination*
- Blood in urine*
- Painful or difficult intercourse
- Symptoms of early menopause (hot flashes, mood shifts, etc.)

Not everyone experiences all of these warning signs or problems, but most people experience some of them. Some of these symptoms might develop into long-term challenges. Most are temporary and will go away with close medical attention.

Recognize fatigue (tiredness)

Many people are not prepared for how tired they feel when they return home. Fatigue is a complicated symptom. It can be brought on by the added stimulation of visitors or the increased physical demands of life at home. Do not get discouraged. Almost all transplant recipients feel tired, weak, exhausted, or slow at some time during recovery.

Fatigue after transplant is different from the fatigue you may have had before transplant. Fatigue is not typically caused by too much activity, but from changes in your body due to transplant. It can also be caused by physical or emotional stress. Fatigue is common for people recovering from transplant. If left untreated, fatigue can last for a long time and get worse. Fatigue can affect how you feel physically, mentally and emotionally. Tell your doctor about your fatigue, how long it lasts, and how severe it is. Your doctor can help you get the best treatment and feel better.

Fight fatigue

Alternate periods of activity with rest, but try to avoid too much rest or sleep during the daytime hours. Inactivity can actually make fatigue worse. Rest and fatigue can become a vicious cycle. Plan activities requiring more energy early in the day or after you have rested. Set a daily goal to be as active as you can. Get on a schedule and slowly increase your activity each day. Your energy will return gradually. Rather than comparing your progress from day to day, consider the improvements you see from one week to the next.

Make exercise a priority

It may be hard to exercise if you are tired, but the benefits are worth it. Follow your medical team's recommendations, and try different activities to find what you like. Many people have benefited from weight and strength training, stretching, yoga or aerobic activities. Encourage a friend or family

member to exercise with you. Whether you prefer to exercise alone or with a group, find a routine that you enjoy and keeps you motivated. Start with small goals—like walking to the end of the driveway, down the street and back, then around your block. Increase your activity level gradually. Pace yourself and remember that if you walk away from home, you will need enough energy for the return trip.

Many people who initially feel tired and reluctant to start exercising feel energized and refreshed afterward. It can help to keep an exercise journal, noting how you feel before and after. You may also want to ask your doctor about working with a physical therapist.

Regular physical activity can make you feel better and help your immune system. Benefits of exercise include improved strength and endurance, reduced pain and fatigue, and improved quality of life. ■

Get the most out of exercise

- Try a variety of activities
- Exercise with a partner
- Set small goals and increase your activity level gradually
- Keep an exercise journal



Kelsey, transplant recipient (right), with her mom and caregiver, Stacy

Expectations during recovery

As you continue through the recovery process, you may move back and forth between dependence on your caregiver, family and friends, and independence. As you become increasingly independent in your self-care, you may become frustrated by setbacks, and find it harder to ask for help when you need it. On the other hand, you might feel that family and friends are expecting too much (or too little) from you. It is not unusual for words of encouragement to sound like nagging if you are not up to the task. It is also easy to mistake comforting words of assurance for being talked down to.

Keep communicating about your changing abilities and what others expect from you. When stress or fatigue gets in the way of understanding, try to remember the other person's intention. Focus on shared goals—your recovery and the maintenance of a peaceful and positive home life. Work toward your goals and chart your progress, but remember that the path to recovery is seldom a straight line.

Many patients benefit from learning structured relaxation techniques. Ask

your medical team more about this.

Adjusting to independence

As you recover, you will rely less on others and be able to do more for yourself. Reclaiming independence is an important goal, but time apart can cause anxiety for both you and your caregiver. Talk about your concerns and make arrangements to help put both of you at ease. Work out a communication plan and a schedule to stay in touch. Develop a plan for back-up care and keep a list of emergency contact numbers. Write out information and post it where it is easy to find and use. Continue to focus on self-care and celebrate your growing independence.

It is also important to monitor your emotional well-being and develop coping strategies. A positive attitude is a powerful tool for healing, but you cannot rush it. You will need time to adjust to all the changes you are going through.

A positive attitude is not about denying your anxiety or minimizing your challenges. It is about putting your life in perspective and shifting your focus to the positive aspects of your life that will help you heal. ■



Mary, transplant recipient

Tips for positive healing

- Avoid images or information that upset you (newscasts, intense movies, etc.)
- Stay mindful of your mood
- Use your relaxation techniques as needed.
- Do what you can and push yourself when possible
- Accept your limitations
- Give yourself permission to ask for help
- Rest as needed

Regain your

✓ strength
✓ self-image



Joe, transplant recipient

Being proactive can help you recover faster. You can become stronger, healthier, and happier by taking action to feel better.

Good nutrition and exercise build strength and can benefit your mood and energy level. And you can improve your self-image by taking positive steps to address changes to your body, memory, and concentration.

Eat healthy foods to build strength

It can be hard to eat when you're dealing with nausea or when food does not taste right. Remember that your tastes and appetite might continue to change. Keep trying and do not give up on old favorites. Make sure to follow the food guidelines you received from your medical team and continue to work with your dietitian to make healthy eating enjoyable.

Changes in memory and concentration

You might experience problems with memory and concentration. You might notice these problems immediately after treatment ends or not until later. Either way, you might not be able to focus the way you used to. These memory changes can be caused or made worse by chemotherapy, medicines, hormone changes, depression, or anxiety. Talk to your medical team to help identify causes, treatments, and coping strategies.

Sudden changes in mental ability or confusion are not expected and should be reported to your medical team immediately.

Concentration and driving

Concentration problems, medicines, and fatigue can all affect your ability to drive a car. Driving is not recommended as long as you are weak or taking medicines that make you drowsy. Long-term steroid use can weaken leg muscles, which could interfere with braking. Do not attempt driving until your transplant doctor says it is okay. Practice driving in a parking lot with a friend or family member before getting back on the road.

Body changes

Some body changes caused by your disease and treatment are short term. Others might last a long time. Either way, how you look—and how you feel about how you look—can affect your self-esteem, your overall attitude, and your recovery.

It is normal to sometimes feel bothered about scars, skin changes, weight changes, or hair loss. Even if your body changes do not show, they can still bother you. These changes affect your sense of self. How others respond to the changes can also affect how you feel. Body changes can also affect your sex life. These feelings are natural. Acknowledging them and working

through them is another part of the recovery process.

Keep in mind that you are more than your appearance, more than just a body. Spend time with people who appreciate you for who you are, not how you look.

Body changes in children

The effects of the preparative, or conditioning, regimen vary from person to person and with each type of treatment. Decreased growth (height) is a common problem for children who have received chemotherapy or radiation therapy. Depending on the treatment, some catch-up growth may occur, but not always. Very young children are most affected. Delays in

growth are usually seen within 5 years of treatment. The preparative regimen can also affect the endocrine system, which controls the body's hormones. Hormone changes can cause early puberty, decreased fertility, or under-functioning of the thyroid gland.

Treatment with human growth hormone (HGH) may reverse some of these effects. Talk to your child's doctor about the risks and benefits of HGH treatment.

It is important for your child to continue regular post-transplant follow-up visits until he or she reaches adulthood. Doctors will continue to watch your child's development, and treat any problems that develop. ■

Ideas to help with:

Memory and concentration

- Bring someone with you to doctor appointments to take notes
- Use a notebook, calendar or electronic organizer
- Use lists, notes and signs around the house to jog your memory
- Talk yourself through tasks step-by-step
- Practice relaxation techniques to ease worry and stress

Body changes

- Acknowledge your feelings
- Give yourself permission to mourn your losses
- Talk to doctors, nurses and other survivors about how you feel and how to cope
- Attend a support group

Summary of some common post-transplant medicines

In addition to treating infection and GVHD, you may also begin treatment for bone loss or early menopause. Children may receive hormone treatments to promote growth and development. Medications at this time may include:

Calcium Calcium is essential for bone health, especially in people taking steroids and adult females with hormonal changes. Eat a calcium-rich diet and exercise to minimize bone loss. Your doctor may recommend a calcium carbonate supplement.

Magnesium Some common medicines increase magnesium loss from the body. Some people also lose magnesium due to other medicines or after surgery or illness. Your doctor may prescribe a supplement with magnesium.

Hormone replacement therapy (HRT) HRT can help lessen or stop many of the menopausal symptoms that may occur prematurely in women after a transplant. HRT can sometimes improve sexual function in both men and women. Talk with your doctor about the risks and benefits of HRT.



It was difficult to read, watch TV or concentrate in the hospital. When I went home, I began reading again and doing crossword puzzles and brain teasers to improve my alertness and memory. It worked.”

—**Sandra,**
transplant recipient

Sexual health

► If this content does not apply, skip it or set it aside for later.

Serious illness and its treatment can have a big impact on sexual health. Although not all recipients experience difficulty with their sexual relationships, many do.

Feelings about sexuality may affect:

- Your emotional health
- Your self-image
- Your relationship with your partner

Intimacy during the healing process

Learning to cope with these changes and finding new ways to express your sexuality is an important aspect of your recovery.

It is important to focus on your own needs, wishes, and desires. As you adjust to the changes you are experiencing, your sexuality might also change. Your goal is to feel good about who you are, and how you choose to share that with others.

As with most of the side effects you may be experiencing, sexual problems can vary and can be temporary. Your illness and treatment don't need to be the end of your sexual life. Help is available.

You may find it helpful to write down your questions before meeting with your doctor.



Talking about your sex life might be embarrassing, but remember that most doctors are used to dealing with this subject and should be able to answer your questions. Nurses can also answer your questions and provide reassurance.



Common sexual problems and solutions

Changes in sex drive

Fatigue, feeling ill, or hormonal changes can lead to temporary loss of interest in sex. Talk to your doctor or nurse about your concerns. Chemotherapy and radiation can affect hormone levels in both men and women. Estrogen supplements may be prescribed for women after transplant. Medicines for erectile problems and testosterone replacement therapy may be appropriate for some men. As you recover your health and strength, your sexual desire is likely to return to normal.

Vaginal issues

Vaginal dryness can cause discomfort or pain during intercourse. In addition to medicines, various lubricants are available to help with vaginal dryness. Your doctor or nurse can prescribe or recommend a product that is best for you.

If you have sore areas in your vagina, or any unusual bleeding after intercourse, you need to tell your doctor and ask to be checked.

After transplant, some women may have vaginal infections. Symptoms include a creamy-white discharge, or itchiness that gets worse if you scratch. This is easily treated. If you have had sexual contact, your partner may also need treatment.

Erectile issues

Many men have difficulty achieving or maintaining an erection during their recovery. The cause may be physical or psychological. Talk to your doctor about options for dealing with erectile dysfunction. You might also rely on a wider range of sexual activities for pleasure, including oral sex, masturbation, or use of a vibrator.

Pain during intercourse

Pain can reduce sexual feelings and reduce desire. Fear of pain can lead to tension, which inhibits arousal, prevents lubrication and can cause more pain. Talk to your partner about what is painful so that you can explore other positions or ways of sharing intimacy. Tell your doctor if you have pain. Pain can be an early sign of GVHD. Often the cause can be treated simply.

When you are ready, you might experiment with less strenuous activities, such as mutual masturbation, side-by-side positions, or quicker rather than prolonged sexual encounters. Plan to make love after pain medicines have been taken. Use pillows and cushions to get more comfortable. Allow the person who has the pain to control the depth, speed, and duration of penetration.

Body image

Changes in body image can cause feelings of distress that go far beyond the physical effects of your treatment and recovery. Sudden and dramatic changes in body image can lead to feelings of shame, embarrassment, inferiority, and anger. These feelings can be reinforced by other people's reactions.

You might start by making love in a darkened room, partially clothed, or facing away from your partner. Most people find their partners are much less concerned by their body changes than they imagine. Open communication can help you feel more relaxed and accepting of body changes.

Communicate with your partner

It is important to let your partner know how you feel so that he or she doesn't feel rejected. Explore alternatives to help maintain intimacy—such as cuddling or massage. Be flexible about times of day, so you can make love when you feel your best.

Sometimes a person's sex drive increases, especially if intimate touch helps to relieve stress. It is important to acknowledge these changes and talk through them with your partner. You can reduce frustration by accepting and encouraging self stimulation. This can be a useful way for both of you to meet your needs and respect the fact that any mismatched desire is real and acceptable.



It's not like before, but that part of our lives returned to a comfortable, acceptable place after about a year."

—Anonymous

You may also find that your partner is afraid of hurting you. He or she may incorrectly believe that sex with you puts him or her at risk. Your partner might believe that his or her desire for sex is selfish or demanding. Your



partner may lose desire because of the changes you have undergone. He or she may feel rejected or not understand that your reduction in sexual desire is due to the physical and emotional effects of your treatment. Again, open communication is essential to working through these problems.

Infertility

Although infertility is common after transplant, it is not universal. The likelihood of regaining fertility depends on the particular transplant regimen used. You should discuss this with your transplant physician and, if you are a woman, with your gynecologist.

While unlikely, it may still be possible for men and women to have a child after transplant. Tell your doctor if you want to have a child after transplant. Your doctor can help you learn about your best options. If you and your partner do not want to become pregnant, you should use condoms regularly or ask your doctor about safe birth control.

Professional help

If you have trouble working through your difficulties on your own, consider seeing a professional sex therapist or counselor. It is better to seek help sooner rather than later.

Open, honest communication can improve emotional intimacy even when sexual intercourse is not possible. Managing all the changes in your life can be difficult, but the changes can also help to grow and improve your relationships. Many people report:

- Increased honesty with their partner
- Greater commitment to trying new things, sexually and otherwise
- Becoming more assertive about what they want out of life
- Renewed interest and greater appreciation for all aspects of life ■



It's important for both you and your partner to talk through your fears, rather than hiding them and letting them grow. Together, you can plan on ways to manage fears and help build your confidence.

Tips for reclaiming your sexuality

- Tell your partner how you feel physically and emotionally
- Ask your doctor or nurse about ways to overcome physical difficulties
- Focus on intimacy
- Talk to a counselor or therapist

Information for caregivers



Joan, mom and caregiver of transplant recipient, Joe

At this point, your family is probably adjusting to a new way of life. But getting used to it is not the same as liking it.

Make time for yourself

Being a caregiver is hard work, physically and emotionally. Fatigue and frustration affect everyone in the house. Maybe you are tired of trying to be “up” all the time, tired of having your encouragement mistaken for nagging or unfair demands. Maybe you are tired of having to do more than your share, or tired of feeling guilty about your frustration.

It is okay. These feelings are normal and there are ways to cope. It is not uncommon for your support network to dwindle as things seem to return to “normal.” But as your situation continues to change, your needs for support change, too. Make a point to recon-

nect with people who nurture you. Let them know what you need: time away from home, time alone, help around the house, or maybe just company for moral support. Consider joining a caregivers’ support group, or look for other opportunities to share your experience and get support from people who understand your situation and will not judge. Keep in mind that most people attend support groups to share their experiences with peers, not because they feel they are not getting enough support from friends and family.

Remember to be a good role model by taking good care of yourself. Eat well, exercise, rest, and continue to enjoy your own hobbies and interests, and ask for help when you need it. Taking time for yourself is not being selfish!

See page 2 for information about a special caregiver issue of *Living Now*. ■

Choosing a support group

Ask yourself:

- Do I enjoy being part of a group?
- Am I ready to talk about my feelings?
- Do I want to hear other people’s stories and advice?
- Would it make me feel better to offer support to other caregivers?

Ask a group leader:

- How many people attend?
- Is it just for caregivers? Are others welcome?
- How often does the group meet?
- What is a typical meeting like?

Post-transplant support & resources

One of the most important things to remember throughout the recovery process is that you are not alone. Be The Match® is dedicated to supporting patients, caregivers, and families. We offer you confidential one-on-one support, financial guidance, and free educational resources. We're here for you.

Call: 1 (888) 999-6743 **Learn:** [BeTheMatch.org/patient](https://www.bethematch.org/patient)

Order: [BeTheMatch.org/request](https://www.bethematch.org/request) **Email:** patientinfo@nmdp.org

In addition to the national organizations below, you can also explore local community resources or online communities.

Blood & Marrow Transplant Information Network (BMT InfoNet)

BMT InfoNet strives to provide high-quality medical information in easy-to-understand language, so that bone marrow and blood cell transplant patients can be active, knowledgeable participants in their health care planning and treatment. BMT InfoNet's Patient-to-Survivor program links patients to survivors who can share information and provide emotional support.

website: [bmtinfonet.org](https://www.bmtinfonet.org)

CancerCare®

CancerCare is dedicated to helping people face the many challenges of a cancer diagnosis. Provides free professional help to people with all cancers through counseling, education, information and referral, and direct financial assistance. CancerCare has an online forum for post-treatment cancer survivors.

website: [cancercares.org](https://www.cancercares.org)

LiveStrong®

Provides information that helps you to live strong through the physical, emotional, and practical challenges of your survivorship.

website: [livestrong.org](https://www.livestrong.org)

The MAGIC Foundation®

The MAGIC Foundation provides support services for the families of children afflicted with a wide variety of chronic or critical disorders, syndromes, and diseases that affect a child's growth.

website: [magicfoundation.org](https://www.magicfoundation.org)

National Bone Marrow Transplant Link (nbmtLINK)

The mission of the National Bone Marrow Transplant Link is to help patients, caregivers, and families cope with the social and emotional challenges of bone marrow/stem cell transplant from diagnosis through survivorship by providing vital information and personalized support services. Peer Support On Call program offers emotional support through one-on-one conversations with volunteers who are transplant survivors, caregivers, and donors.

website: [nbmtlink.org](https://www.nbmtlink.org)

National Cancer Institute (NCI)

The NCI offers an overview of fatigue, including its causes and information on treatment. Visit NCI online and search "fatigue."

website: [cancer.gov](https://www.cancer.gov)

Caregiver Support



Learn about programs and resources to help caregivers understand and cope with the challenges and feelings that come with being a caregiver.

[BeTheMatch.org/companion](https://www.bethematch.org/companion)

Connect with someone who's been there

Would you like to talk with another transplant recipient or caregiver? Our *Peer Connect* program puts you in touch with a trained peer volunteer.

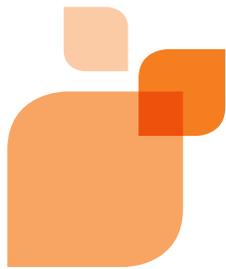
To request a connection, visit:

[BeTheMatch.org/patient-peerconnect](https://www.bethematch.org/patient-peerconnect)

ExploreBMT™

This online tool provides direct access to information and resources from many patient-focused organizations.

[exploreBMT.org](https://www.explorebmt.org)



Living **now**

A guide to life after transplant

Issue 2: 6–9 months



—Astrid, transplant recipient
(responding on Facebook to
a fellow recipient's message
of hope and encouragement)

“Ok, I just had an allo transplant, home yesterday. I have been so worried that I wouldn't be able to do what I used to do, BUT seeing this picture helps me realize that I totally will get to a point where I can hike and climb again. Thank you for posting this.”

Stay Connected

Join us on Facebook

Connect with thousands of transplant recipients, families, and caregivers on Facebook at Be The Match Patients Connect.

Find:

- Stories and photos of hope
- Advice and encouragement
- Transplant information and support

You can also download Be The Match resources, register for events, and share your favorite resources with others right from our Facebook page.

Visit facebook.com/BeTheMatchPatient and join the conversation.

Every individual's medical situation, transplant experience, and recovery is unique. You should always consult with your own transplant team or family doctor regarding your situation. This information is not intended to replace, and should not replace, a doctor's medical judgment or advice.



Patient Services
3001 Broadway St. N.E., Minneapolis, MN 55413

1 (888) 999-6743 | BeTheMatch.org/patient

About Be The Match®

For people with life-threatening blood cancers—like leukemia and lymphoma—or other diseases, a cure exists. Be The Match connects patients with their donor match for a life-saving marrow or umbilical cord blood transplant. People can be someone's cure as a member of the Be The Match Registry®, financial contributor, or volunteer. Be The Match provides patients and their families one-on-one support, education, and guidance before, during, and after transplant.

Be The Match is operated by the National Marrow Donor Program® (NMDP), a nonprofit organization that matches patients with donors, educates health care professionals, and conducts research so more lives can be saved.

Learn more at BeTheMatch.org/patient or call **1 (888) 999-6743**.