

Post-Transplant Nutrition

Nutritional needs following a lung transplant can be quite different to pre-transplant requirements. Once you have recovered from your transplant you will not require as many daily calories due to the decreased work of breathing and rate of infections. At the same time, it is likely you will experience an improved appetite due to anti-rejection medications and improved overall wellbeing.

Maintaining a Healthy Weight

Achieving a healthy weight after transplant is very important to help you to heal and stay healthy. Gaining too much weight can put you at risk of other health complications. Weight gain may be caused by a range of factors including the body not burning as many calories post-transplant, and from steroid use. Therefore, dietary intake may need to be modified to achieve a healthy BMI of between 20 and 25 kg/m.

To stay healthy, focus on a balanced diet which includes fruits, vegetables, whole grains, milk and milk products and meat and meat alternatives. Talk with your dietitian if you have questions about healthy eating, your healthy weight range and/or your daily nutritional needs.

Food Safety

Immunosuppressive therapy required post-transplant can put you at increased risk of food poisoning. Symptoms of food poisoning may include fever, headache, tiredness, aches and pains, diarrhoea, nausea and abdominal cramps. Symptoms may progress to more serious forms of the illness, such as meningitis and septicaemia.

Diarrhoea and vomiting can cause poor absorption of anti-rejection medications and increase your risk of rejection, so food safety is extremely important.



Here are some tips to ensure your food is safe to eat:

- Check packaging is intact and observe 'use-by' dates.
- Once food is opened use within the recommended time frame, usually two to three days.
- Refrigerate or freeze foods immediately after a meal and eat leftover foods within 24 hours.
- Keep your fridge at 5.0 C, freezer not above -18.0 C.
- Wash knives, cutting boards and food preparation surfaces with hot water and soap after contact with raw meat.
- Use separate chopping boards and knives for raw and cooked foods.
- Wash hands well before preparing food, after touching raw food, after touching animals, and after going to the toilet.
- Cook all food thoroughly.
- Only reheat foods once and ensure it is piping hot all the way through.
- Keep your kitchen clean.
- Wash dishcloths daily.
- Wash all fruit and vegetables before eating.

High risk foods include:

- Unpasteurized milk
- Cheeses (Brie, Camembert, Stilton, Ricotta, Cottage Cheese), 'blue'/mouldy cheese
- Raw or lightly cooked eggs and foods containing them (caesar dressing, cookie dough, other batters)
- Raw fish/shellfish/cold smoked fish
- Rare meats
- Pate
- Rotisserie cooked chicken
- Deli meat
- Soft-serve ice cream

CFRD

The chance of developing cystic fibrosis related diabetes (CFRD) after transplant is high. This is in most part due to the use of steroids, which can reduce insulin production. To monitor for CFRD, your BGLs will be checked as part of your transplant bloodwork. It is important to watch for symptoms and let your transplant team know if you experience them as it may indicate you have developed CFRD.

Symptoms of CFRD include:

- Unexplained weight loss
- Feeling more tired
- Feeling very thirsty
- Change in appetite
- Urinating more often
- Blurry vision
- Skin infections

If you are diagnosed with CFRD, it is important to follow a healthy diet to manage the diabetes. The above symptoms may reduce as steroid dose is reduced over time.

If you already had diabetes prior to transplant, continue to monitor your BGLs and adjust your insulin doses with the help of your medical team. Poor BGL control can increase the risk of infections, organ rejection and other health conditions such as kidney disease.

Bone Health

After transplant, bone health continues to be very important in CF. Steroids can thin your bones further and increase your risk for fractures.

To maintain a healthy bone status, it is important to:

- Maintain a healthy weight.
- Consume a healthy, balanced diet including calcium rich foods in addition

to a calcium supplement.

- Take recommended amounts of calcium and vitamin D.
- Include weight-bearing exercise in your daily activity (as prescribed).
- Receive regular bone mineral density screening.

Kidney Health

High BGLs, and some of the transplant medications, can cause kidney damage.

To help prevent kidney damage:

- Drink plenty of fluid to help your kidneys remove the remainders of drugs from your body (unless advised otherwise by your doctor).
- Keep your BGLs under good control.

Bowel Health

It is important to remember that your bowels still have CF. That means if you are pancreatic insufficient you will still need to take enzymes and watch for signs of a bowel obstruction, which may include abdominal pain and cramping, bloating, constipation and loss of appetite.

The chance of a bowel obstruction could be higher after transplant because of pain medications (which are constipating) and not getting enough fibre and fluids.

To minimise chances of a bowel obstruction, you should:

- Drink adequate amounts of fluids.
- Take your enzymes regularly and correctly.
- Monitor your bowel movements.

Many thanks to Lauren Mills and Louise Hesketh, Dietitians, Fiona Stanley Hospital, for input into this factsheet.

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