

LIVING NOW

Issue 4: **12-18 months**

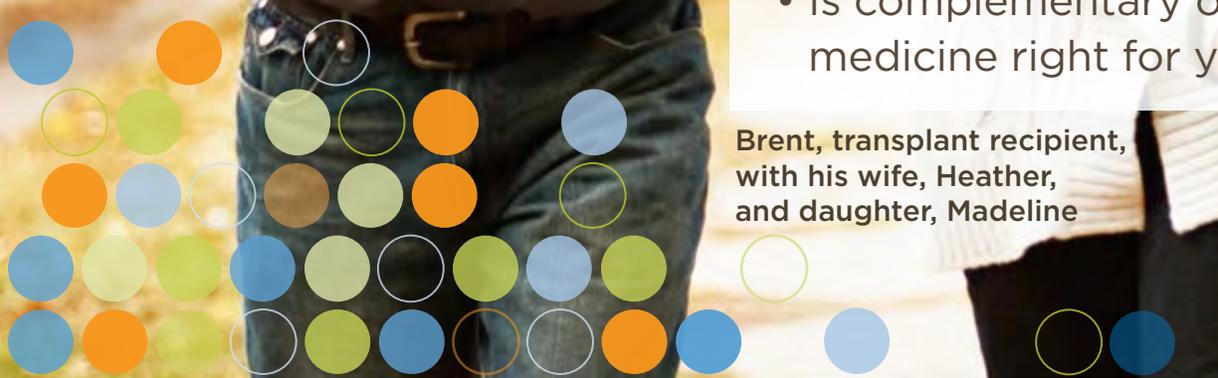
BE  THE MATCH®



A GUIDE TO LIFE AFTER TRANSPLANT •

- Take charge and manage your stress
- When GVHD just won't go away
- Is complementary or alternative medicine right for you?

Brent, transplant recipient,
with his wife, Heather,
and daughter, Madeline



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FOR CAREGIVERS AND
PARENTS: PHYSICAL AND
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Brent, transplant recipient,
with his daughter, Madeline

One year and beyond

However challenging your journey has been, you can celebrate passing your 1-year milestone. It's a good time to think about how far you've come, both physically and emotionally.

Some transplant recipients say their quality of life is similar or even better than their life before transplant. Others find their quality of life is much different than before transplant as they learn to cope with the ongoing side effects of their treatment. Whatever your recovery has been like, you likely feel that the experience has been life-changing.

This issue includes information on:

- Coping with the emotional impact of chronic GVHD
- Understanding what's causing your stress and tips for managing it
- The basics of complementary and alternative medicine
- Reminders for caregivers and parents, and more

The challenges we face as survivors of this experience will be a benefit in our lives and the lives of others. Keep taking the next steps forward and upward! I am getting there and won't ever quit!

—Brent, transplant recipient



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

Managing complications after transplant

You've passed your 1-year after-transplant milestone, and that's something to celebrate. But, it's also important that you continue to have checkups with your health care team—whether it's with your transplant team, your hematologist or oncologist or your primary care doctor.

Why? Even if you're feeling well, your checkups are important to staying healthy because late complications can happen. Late complications are health problems that can start 100 or more days after transplant.

During your checkups, your doctor will:

- Look for signs and symptoms of problems from your treatment, like graft-versus-host disease (GVHD) if you had an allogeneic transplant
- Talk with you about what cancer screenings you may need
- Watch for signs of the disease coming back (relapse)
- Ask you about your quality of life, including your emotional health and sexual health

When problems are found early, there may be more options for treatment, and those treatments can be more effective.

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AFTER-TRANSPLANT GUIDELINES

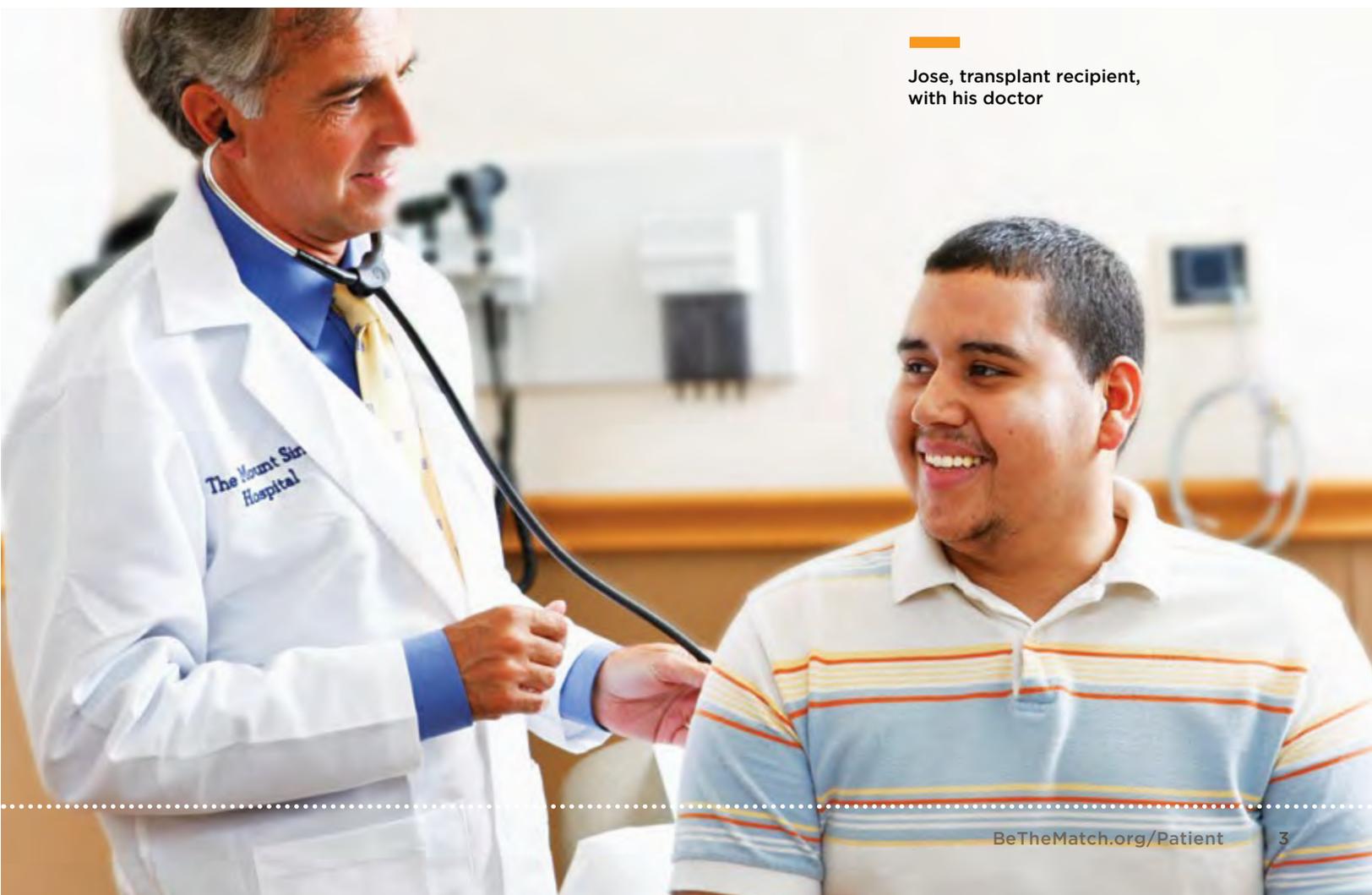
Be The Match® offers free after-transplant guidelines that you can share with your doctor. The guidelines give information on the recommended tests and exams for your checkups. The guidelines are available in a free mobile app, online or print:

BeTheMatch.org/careguide

There's a version for your health care team, too. Point them to

BeTheMatchClinical.org/guidelines

Jose, transplant recipient, with his doctor



Managing complications after transplant *(continued)*

Signs and symptoms that may be related to chronic GVHD

GVHD is a common late complication after allogeneic transplant. Even if you haven't been diagnosed with GVHD before, you can still get it now.

Continue to watch carefully for any of the following changes, and report them to your doctor right away:

- **Hair:** Thinning
- **Eyes:** Dryness, itching, irritation, redness, change in vision
- **Mouth:** Dryness, pain, sensitivity, difficulty swallowing, mouth or tongue sores
- **Temperature:** Any fever
- **Lungs:** Shortness of breath, dry cough
- **Digestive system:** Nausea, vomiting (throwing up), diarrhea, loss of appetite, unexplained weight loss
- **Vagina:** Dryness, irritation
- **Joints:** Stiffness, swelling, inability to fully extend or flex fingers, wrists, elbows, ankles or knees
- **Skin:** Rash, discoloration, tightness, thickening, texture changes
- **Nails:** Changes in texture, brittleness
- **Energy level:** Unusual tiredness (fatigue) or tiredness that gets worse

If you have no signs or symptoms of GVHD, your doctor may slowly lower the dose and eventually stop your immunosuppressants (medicines that hold back your immune system). When that happens, it's not unusual for new symptoms of GVHD to start. Tell your doctor right away if you have any new or worsening symptoms.

How are late complications taken care of?

If you have late complications after transplant, there are treatments available. If it's chronic GVHD, the first treatment is often immunosuppressant medicine. Talk to your doctor to learn more about the best treatment for you. Depending on the problem, your doctor may have you try 2-3 different treatments before finding a medicine or combination of treatments that work best.

Here are some tips to manage symptoms of common late complications:

Eyes

- **Cataracts:** For early or mild cataracts, try new glasses or better lighting. If your sight gets much worse, ask your doctor about cataract surgery.
- **Dryness, itching, irritation:** Avoid eye strain and rest your eyes. Use preservative-free artificial tears, a humidifier or warm compresses. For more difficult symptoms, ask your doctor about medicines for your eyes or "punctal plugs," which help your tears last longer.
- **Severely dry eyes:** If you suffer from severely dry eyes and other treatments haven't helped, ask your doctor about specially made serum eye drops or bandage contact lenses.

Heart and blood vessels

- **High cholesterol or high blood pressure:** These can be common side effects of some transplant medicines. Eat a well-balanced diet with less fat and follow an exercise program. Take any medicines as prescribed by your doctor.

Mouth

- **Pain and dryness:** Avoid eating very spicy and acidic foods. Ask your doctor about special rinses and lubricants, which may relieve mouth sores.

Skin, bones and joints

- **Rashes:** When going out into the sun, wear hats and long sleeves to protect your skin. Check with your doctor before using any new skin creams or lotions.
- **Scleroderma (hard, tight skin):** Scleroderma affects the skin and joints, making them less flexible. Medicines, exercise and physical therapy may help increase circulation, strength and flexibility.
- **Avascular necrosis (also known as osteonecrosis):** With avascular necrosis, a bone in a joint doesn't have enough blood flow. This causes the bone to break down and you may feel joint pain. Your doctors may treat this with medicine, crutches or braces, and range of motion or stretching exercises. In more severe cases, surgery can repair or replace the joint.
- **Osteopenia:** The transplant therapies can cause bones to become weak. Ask your doctor if you should be taking calcium and vitamin D supplements or have a test for weak bones. Weight bearing exercise, such as walking, can build bone strength.

*"There are many stages of recovery.
The one you're in now ... it's temporary."*

—James, transplant recipient



Which doctor should I call?

You likely still have many doctors involved in your care, from your transplant doctor to your hematologist or oncologist to your primary care doctor. That can sometimes make it hard to know who you should call if you have a concern about your health.

“Your primary care doctor will likely take care of your general health, like checking for and treating heart disease or diabetes. Your transplant doctor will handle transplant-specific issues, like GHVD,” explains transplant doctor Navneet Majhail, M.D., Blood and Marrow Transplant Program, Cleveland Clinic.

Asking your care team these questions can help clear up confusion on who to call:

- Who will manage which parts of my care?
- How are your roles different?
- How will my transplant center share information with my primary care doctor?
- How will my primary care doctor communicate with my transplant center team?
- How will information be shared with me?

If you have any concerns about your health, don't delay talking to a doctor. If you have doubts about who to call, Dr. Majhail says, “Contact whomever you're most comfortable with. Primary care doctors will usually talk to your transplant doctor to find out who should take care of your question or concern.”



Brent, transplant recipient



SCREENING FOR CANCER

A new cancer could be a complication from your treatment. During your regular checkups, talk to your doctor about your risk for new cancers. Be an advocate for your health by:

- Learning how to do self-exams for cancer
- Following cancer prevention recommendations (go to [aicr.org](https://www.aicr.org) and click on Reduce your Cancer Risk)
- Asking your doctor if you need cancer screenings (like a mammogram if you are a woman)

As with other complications, when a new cancer is caught early, there may be more treatment options available and those treatments can be more effective.



When GVHD just won't go away

COPING WITH EMOTIONS RELATED TO CHRONIC GVHD

Everett has been managing chronic GVHD of the skin for years. It's been an ongoing challenge not only physically, but emotionally, too.

He experienced a defining moment many years ago with his doctor. "After a frustrating episode with my GVHD, I asked if she could just fix it and she said, 'No. You have this.' That's when I really understood that this is something I would have to manage for life," he says.

It's a realization that can be difficult for many people.

"Chronic GVHD may flare up then go away then flare up again. You're trading the illness that brought you to transplant for a chronic illness that may cause you to lose some of the things you wanted to have in your life. That's true not only for people with chronic GVHD, but for their caregivers, too. For some people, there is a sense of loss of the life you expected you would have after transplant," shares Kathy Roundtree, LCSW, ACM, clinical social worker, University of North Carolina Hospitals.

Your emotional response to chronic GVHD can come from the GVHD itself, as well as everything else that is impacted by it.

I had a patient tell me, 'You kind of have to reinvent yourself in a way that fits with managing chronic GVHD.' It's not always easy, but this is a great opportunity to find a new you.

—Kathy Roundtree, LCSW, ACM,
clinical social worker

"When you have chronic GVHD, you and your caregiver are likely going to the doctor more often, for example. You may be changing medicines often. Some of the treatments can cause side-effects like weight gain and puffiness. The GVHD itself may cause your appearance to change. If you're on an immunosuppressant medicine, you might not be able to get back to being as social as you would like. All of these things can cause people to feel emotions like frustration, impatience, isolation, worry, sadness and even anger," Kathy says.

Everett works in sales and often interacts with clients face-to-face. He says that the appearance of his GVHD—a loss of pigment (dark and light spots) on his face, legs and feet—can be uncomfortable at times. "It can be an issue," he says, "People can tell something is going on. But, I'm grateful that I have the type of personality that allows me to stay positive and not sweat the small stuff."

No matter the emotions you're experiencing, "Give yourself permission to feel the feelings that go with the challenges of living with chronic GVHD. At the same time, look for ways to manage your emotions so you can move beyond them," Kathy shares.



Managing emotional challenges

Here are some tips on how to cope with the emotional challenges of chronic GVHD:

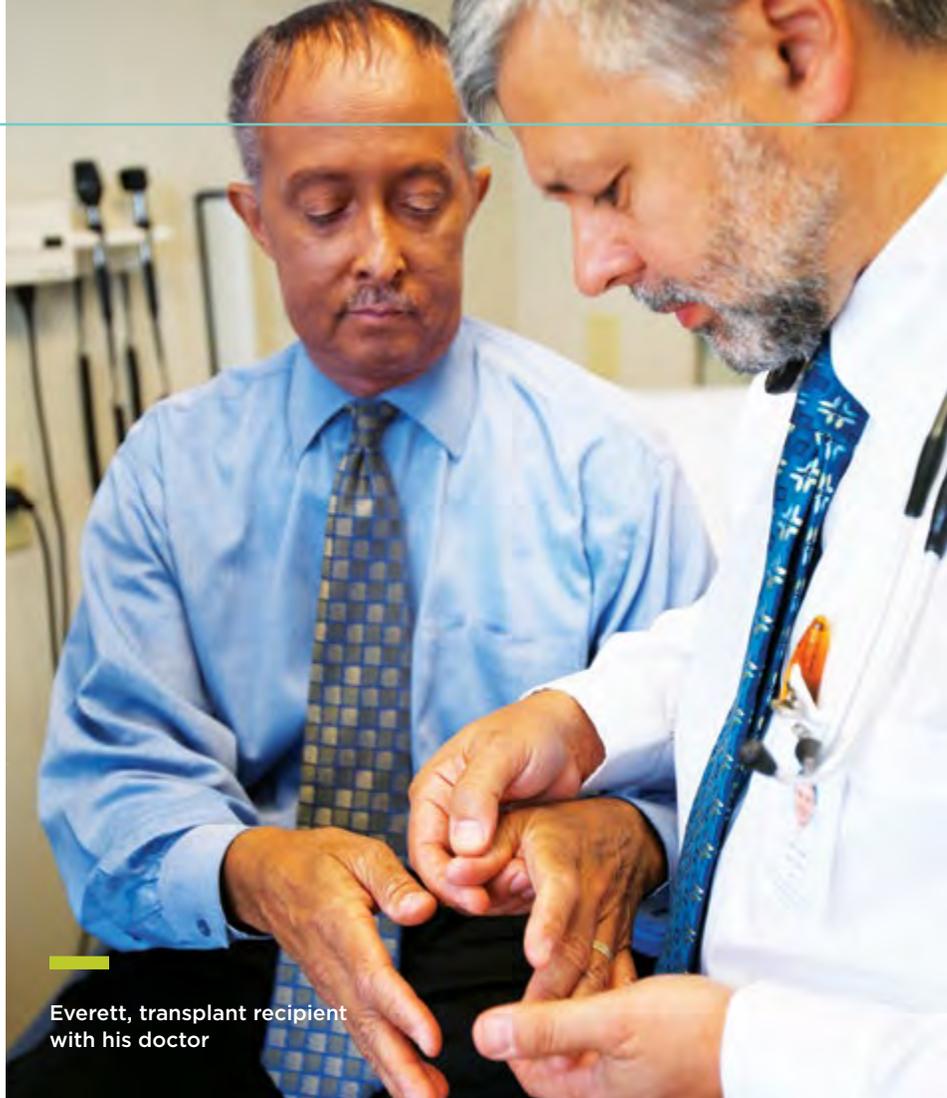
- Talk to your health care team and learn as much as you can about both the physical and emotional challenges of GVHD. Sometimes knowing what may be ahead can help you prepare emotionally.
- Talk with other people who are dealing with the effects of chronic illness and treatment. You may be able to find a support group online or through your transplant center.
- Connect with another transplant recipient or caregiver through the Be The Match® *Peer Connect* program. Learn more at [BeTheMatch.org/patient-peerconnect](https://www.BeTheMatch.org/patient-peerconnect).
- Find ways to stay connected to friends and family, like phone calls and video chats online, even if you can't be in social settings.
- Talk with a mental health professional, like a counselor or psychiatrist, or a chaplain, clergy member or trusted friend, and work together to find coping strategies that work for you.

Finally, look for ways to celebrate the life you have today. It's easy to see the challenges of GVHD, but try not to lose sight of the good things in your life.

"I had a patient tell me, 'You kind of have to reinvent yourself in a way that fits with managing chronic GVHD,'" Kathy shares, "It's not always easy, but this is a great opportunity to find a new you. When you look for the silver linings, what new opportunities will you find?"



If you had an allogeneic transplant, make sure you continue to watch your body closely for any new GVHD symptoms.



Everett, transplant recipient with his doctor



RESOURCES FOR YOU

Be The Match offers webcasts on medical issues (like the signs, symptoms and triggers of chronic GVHD) and emotional concerns (like coping with anxiety or changing relationships) that transplant recipients may experience. You can find the Living Now webcasts at [BeTheMatch.org/patient-webcasts](https://www.BeTheMatch.org/patient-webcasts).

nbmtLINK offers several webcasts about coping with chronic GVHD. You can find webcasts for patients and caregivers, as well as for parents of children and adolescents coping with chronic GVHD. Learn more at [nbmtLINK.org](https://www.nbmtLINK.org) in the Resources and Support section. Click on Webcasts/Podcasts.

If you'd like to talk with other people who have chronic GVHD or their caregivers, BMTSupport.org offers a hosted online chat room 3 nights a week. Learn more at [BMTSupport.org](https://www.BMTSupport.org).

BMTinfonet provides many resources for caregivers, including a webcast for BMT family caregivers. Learn more at [BMTinfonet.org](https://www.BMTinfonet.org). Go to *After*, then *Caring for Transplant Survivors*.



Penny,
transplant recipient

Is complementary or alternative medicine right for you?

During your treatment and recovery, you may have heard about complementary or alternative medicine (sometimes called CAM) and wondered if it's right for you. The answer? It depends.

From "all-natural" supplements and special diets to meditation, massage and more, CAM can take a lot of different forms. Some are generally safe, while others can be dangerous. The risks are especially high when you have a weakened immune system, graft-versus-host disease (GVHD) or are taking prescription medicines.

Before you try anything new, be sure to talk to your doctor. Your doctor can help you decide if it's safe or not.

What are complementary and alternative medicines?

While the words "complementary" and "alternative medicine" are usually used together, they're not exactly the same:

- Both complementary and alternative medicine refer to practices or medical products that aren't part of standard care (the care your medical doctor, nurses, physical therapists and other members of your health care team provide).
- Complementary medicine is used **along with** your standard care.
- Alternative medicine is used **instead of** your standard care.

When used with your doctor's recommended care and advice, some people say their complementary care helps them:

- Manage their symptoms
- Lower stress
- Improve their sense of well-being

Other people have reported no benefit.



QUESTIONS TO ASK YOUR DOCTOR

Your doctors know that many people explore CAM, so you can bring it up without fear of being judged.

"It's important that you ask your doctor questions about CAM. Your doctor can tell you which approaches are safest and best for your particular situation," says Linda Burns, M.D., medical director, Be The Match®.

Here are some questions to ask your doctor when you're thinking about using complementary or alternative medicine as part of your treatment:

- What benefit could I expect?
- What are the risks?
- Do the known benefits outweigh the risks?
- Are there any potential side effects?
- Would it interfere with my current treatment?

Is CAM safe for me?

Again, the answer is, it depends. CAM practices that are **generally safe** include those that promote relaxation, well-being and movement like:

- Meditation and prayer
- Guided imagery
- Massage
- Art and music therapy
- Yoga
- Tai chi
- Reiki

continued on next page>



Is complementary or alternative medicine right for you? *(continued)*



Stacey, mother and caregiver of Kelsey, transplant recipient

Potentially dangerous practices include those that go against your health care provider's advice like:

- Quitting or substituting a doctor-recommended medicine or treatment.
- Taking certain vitamins, supplements or herbs. They could make your prescription medicines not work, or increase the chance of dangerous side effects.
- Taking testosterone or over-the-counter hormonal products.
- Using certain lotions or getting too much light or sun, which could make GVHD of the skin worse.

Be careful when considering self-care practices outside of those recommended by your doctors:

- Special diets. Certain foods or diets could actually be harmful. For example, even something that seems harmless, like grapefruit or grapefruit juice, can actually cause problems with some medicines.
- Acupuncture. When not performed in the right way, acupuncture could hurt you and cause infections and bleeding.
- Special products or equipment, such as suspension exercise devices.
- Chiropractic care. While often safe, it can be harmful for patients whose disease has affected their bones or for those with weakened bones from the transplant. Talk to your doctor before having any chiropractic care.

Remember, if you have a weakened immune system, GVHD or are taking prescription medicines, you need to be careful about CAM. No matter which CAM practices you're considering, do your research and talk with your doctor before you start.



RESOURCES FOR YOU

To learn more about the safety, benefits and risk of CAM, visit the National Center for Complementary and Alternative Medicine (NCCAM) website at nccam.nih.gov.

You can find information on CAM safety, research and symptom management on the Office of Cancer Complementary and Alternative Medicine (OCCAM) website at cam.cancer.gov/CAM.

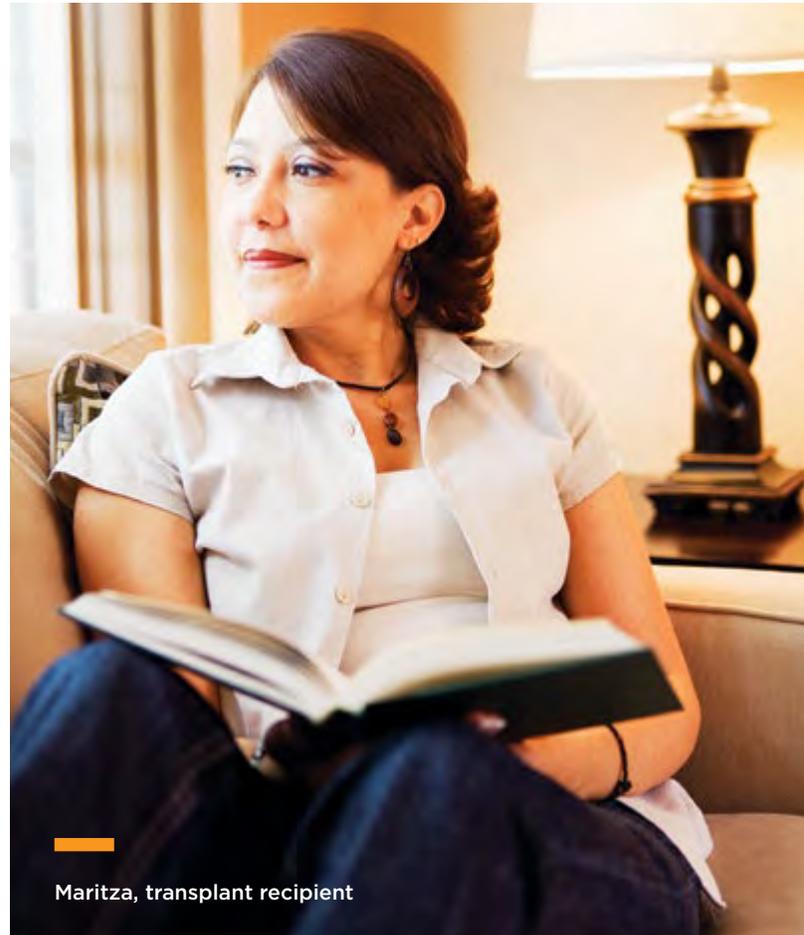
Take charge and **manage your stress**

Throughout your transplant recovery, you've likely felt stress along the way. And today, your stress may be very different than it was before your transplant.

Too much stress can be a serious strain on your physical and emotional health. The following tips can help you identify and reduce or manage your stress.

- **Keep a journal.** When you feel stressed, write down what's causing your stress, how it makes you feel and what you're doing to feel better. Are there any patterns or themes? This can help you find out what triggers your stress and what helps you relax.
- **Talk to someone.** It may be a friend, loved one, counselor or support group. Just talking about your stress can sometimes help you let it go. Or, the person you're talking to may help you find ways to reduce your stress.
- **Get moving.** Exercise, like walking, helps many people manage stress. Find a physical activity that you enjoy, check with your doctor to make sure it's safe and make it a routine. Even a little each day can help.
- **Express your creativity.** Activities such as drawing, painting, dancing, playing a musical instrument or singing can help relieve stress, even if you've never participated in these activities before. Always wanted to take up a hobby? Maybe now is the time.
- **Set aside relaxation time.** Yoga, meditation and deep-breathing activate your body's relaxation response, even if you only have time for 10 minutes a day.
- **Rest your body and feed it well.** Feeling tired can be a source of stress. Get a good night's sleep by limiting caffeine and alcohol. Eat a healthy breakfast. Well-nourished bodies are better prepared to cope with stress. Trying a new recipe or visiting a farmers' market could help you add fruits and vegetables to your meals.
- **Tell your story.** Sharing your experience with other recipients, and hearing their stories in return, may help you feel more hopeful by connecting with others in a meaningful way.

Do your best to understand what's causing your stress, and find a coping strategy that works for you.



Maritza, transplant recipient



RESOURCES FOR YOU

The *Time For You: Your guide to stress management and exercise during transplant* booklet offers tips and tools to help you lower stress and start or continue exercising. Download the booklet at [BeTheMatch.org/patient-plan](https://www.BeTheMatch.org/patient-plan).

BMTSupport.org offers an interactive chat area and online support groups for transplant patients and recipients and caregivers. Learn more at [BMTSupport.org](https://www.BMTSupport.org).



Susan, mother and caregiver
of Betsy, transplant recipient

For caregivers and parents

KEEPING YOUR PHYSICAL AND EMOTIONAL HEALTH TOP OF MIND

The most intense period of your loved one's or child's treatment and recovery is likely over at this point. But, that doesn't mean all of the physical or emotional aspects of caring for someone who's received a transplant have gone away for you.

As the caregiver or parent of a transplant recipient, it may surprise you to suddenly find yourself overwhelmed by the stress that's built up. Know that you're not alone. These feelings are common among people who have cared for someone through transplant, even a year or more later.

To help you stay physically well:

- Make exercise a routine. Get a friend or family member to walk with you.
- Eat healthy. Set a goal to have a vegetable or fruit with every lunch and dinner.
- Get enough sleep. Limit caffeine and alcohol to help you sleep better.
- Spend time with positive people. Their energy can be contagious.
- Carve out "down time." Give yourself 10 minutes a day to recharge. Take time for deep breathing, meditation or listening to music.

Some helpful reminders to feel emotionally well:

- All feelings are okay. It's normal to have a range of emotions.
- You don't need to hide your feelings.
- Let the little things go.
- It's okay to take some time alone.
- There are people who can help you.
- Talk with your family or friends about how you're feeling or the help you still need.

Our *Living Now* Caregiver and Parent issues have more tips and strategies to help you stay well. You can find a copy online at [BeTheMatch.org/patient-survive](https://www.bethematch.org/patient-survive).



ADVICE FOR PARENTS

Your child's illness and recovery can sometimes be as hard on you and your family as it is on your child. You, your spouse and your other children may still be feeling a range of emotions. It's okay for each member of your family to give themselves permission to take care of "me" so you can all be there for one another.

"As a mother of a sick child, I felt like I had to take on the world to make sure that everything was done correctly. But I actually had to take a step back and talk to someone. A good friend of mine helped me by being a great listener and giving me positive feedback," says Tennille, mother of Jaiden, age 9 months at transplant.

If you have a spouse or partner, look for ways to continue to stay connected or reconnect. Carve out time to talk each day. Go out to dinner. Spend time together, just the two of you.

Tennille, mother and caregiver to Jaiden, transplant recipient



RESOURCES FOR CAREGIVERS AND PARENTS

Sometimes it can help to talk with someone who's been where you are. The *Be The Match Peer Connect* program connects you with a trained volunteer who is also a transplant caregiver. These volunteers can answer your questions and share their own experiences. Learn more and request a connection at [BeTheMatch.org/patient-peerconnect](https://www.bethematch.org/patient-peerconnect).

My children are my future

As a lieutenant in the New York City Fire Department who responded to the 9/11 attacks on the World Trade Center, Robert understands crisis. But rescuing others didn't prepare him for the challenges he was about to face. After receiving a transplant for myelodysplastic syndrome (MDS), Robert needed to retire from the fire department early because of physical limitations. That meant he's had to redefine how he sees himself and what he wants for his future.

As told by Robert, transplant recipient



After the transplant, I experienced acute and chronic GVHD. I'm still dealing with GVHD of the skin, as well as weight gain and mood swings from steroids. I struggle with tiredness and problems with memory and concentration. The hardest part is not being able to keep commitments because I never know how I'll feel from one day to the next. It makes it hard to accomplish the tasks I set for myself.

On the positive side, I'm still getting better. I'm learning my physical limitations, and sometimes I exceed them, but day by day, I'm able to do more and that encourages me to keep trying.

My level of fear about getting sick has also gone down. I don't need blood transfusions anymore and I don't worry about blood tests. And even though I miss working, it's a relief to not have to worry about returning to work and wondering if I'd be able to perform my duties.

I'm grateful for all the help my family has gotten, especially for all the rides and meals from my coworkers, and from my wife's coworkers. And of course, I'm grateful for my doctors and nurses, and all the individuals and organizations who provided both financial and emotional support.

And then there's my donor. I was eager to thank him from the start, but because of confidentiality, it took a long time, and I didn't know if he'd gotten my cards or not. That was frustrating, but we finally got in touch with each other, and he's a great guy.

There was never really a time when I didn't look to the future. I worked toward short-term goals, like getting my central line removed, controlling my GVHD and being able to quit taking steroids.

Today, my 3 children provide all the motivation I need. They're all involved in sports and other after-school activities that require a lot of scheduling and running around. Some days, I might be struggling with tiredness or just feeling down, but if they need a ride somewhere, I get off the couch and do what needs to be done. Once I'm on my feet I'm able to keep going.

I miss working, but I keep in touch with friends from the fire station, attending picnics and community events with them. I'm also able to spend more time volunteering at my daughter's school and helping out my parents, and that is gratifying.



Rob, transplant recipient (center)
with his family

Your sense of the future

During treatment and early recovery, thoughts or fears about the future can be overwhelming. The focus of your life may be just getting through each day. Even though you may live with uncertainty or fear of recurrence, regaining a sense of optimism about the future is essential to your quality of life. As you look to the future, ask yourself:

- How do I learn to accept uncertainty?
- How do I adapt to change in my life?
- How do I live for today and plan for tomorrow?
- What's next for me?
- What is my goal for the next phase of my recovery?

THE LIVING NOW SERIES

Each issue in the Living Now series addresses different aspects of life after transplant—from 3 months after transplant to 2 years and beyond. Each person's experience is different. The articles in the magazine are not a timeline to measure yourself against. They are a collection of observations, tips and resources designed to help you make the most of your life after transplant.

This newsletter is produced by Be The Match® Patient Services. The information is based on input from blood and marrow transplant experts and represents general principles and recommendations. It is not intended to replace, and should not replace, your doctor's medical judgment or advice. Always consult with your own medical team regarding your specific situation.

Be The Match offers many free programs and resources to support patients, caregivers and family members before, during and after transplant. Connect with us in the way that works best for you.

ONLINE: [BeTheMatch.org/patient](https://www.BetheMatch.org/patient)

REQUEST INFORMATION: [BeTheMatch.org/request](https://www.BetheMatch.org/request)

EMAIL: patientinfo@nmdp.org

SUBSCRIBE TO ENEWS: [BeTheMatch.org/patient-enews](https://www.BetheMatch.org/patient-enews)

CALL: 1 (888) 999-6743

Information for caregivers and parents

Special issues of Living Now are available for caregivers and parents who care for a loved one or child after transplant. If you haven't received a copy, you may order it online from [BeTheMatch.org/request](https://www.BetheMatch.org/request) or by calling 1 (888) 999-6743. Information for caregivers and parents is also online at [BeTheMatch.org/caregiver](https://www.BetheMatch.org/caregiver).

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We are here to help



Jill Randall, MSW, LICSW, Be The Match® patient services coordinator

As you continue your transplant journey, you're not alone. Be The Match® is ready to help. We offer many free programs and resources to support you, your caregiver and family members. Help is only a click or a call away.

If you need to talk ...

Our patient services coordinators are available to listen, answer questions and find resources.

If you're looking for resources ...

Our free print, video and online resources can help you manage various aspects of life after transplant.

If you want to connect with someone who's been there ...

Our Peer Connect program will put you in touch with one of many trained volunteers who've also been through transplant. Connect in the way that works best for you.

- **Learn:** BeTheMatch.org/patient
- **Request information:** BeTheMatch.org/request
- **Email:** patientinfo@nmdp.org
- **Call:** 1 (888) 999-6743

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.

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 blood or marrow 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**.

