



## 医学术语

### 肾脏/胰脏移植

此章为您在移植过程中可能听到或阅读的许多医学术语提供解释

您在学习有关移植时、可能听到或阅读的许多新的医学术语。知道它们的定义、是很有帮助的。请与您的家人、支持者、及活体捐赠者共读此章节。

#### 急性排斥反应 (**Acute rejection**)

对移植器官的快速反应。由于对新器官产生强烈的免疫反应它通常在移植后约一周发生。

#### 异体移植 (**Allograft**)

两个属于同一物种（如人类）但具有遗传差异的个体之间的移植器官。

#### 淀粉酶 (**Amylase**)

由胰脏制成的酶，通常存在于血液中。淀粉酶水平的血液测试显示移植的胰脏的功效。

#### 抗体 (**Antibody**)

一种免疫系统针对外来物质产生的一种蛋白（参看抗原）、抗体可以协助身体抵制抗原并阻止其活动。

#### 抗原 (**Antigen**)

您的身体视为有害的物质、如病毒或细菌或移植的器官。您免疫反应会导致抗体分泌并激活其他细胞来抵制外来抗原。

#### 活检 (**Biopsy**)

一种医疗程序、从移植的器官或组织里抽取小量的样本、并在显微镜下检测是否有任何疾病或排斥的现象。



您和您的护理人员将在您的移植旅程中学习许多新词汇。

### **BK 病毒 (BK virus)**

生存在大多数成年人泌尿系统中的常见病毒。在健康的人群中、它是无害的。在肾移植病者中、它有时会导致肾脏损伤。我们将在移植后测试您的尿液、以确保 BK 病毒水平不会太高。

### **血尿素氮 (Blood Urea Nitrogen, BUN)**

血尿素氮是正常肾脏排泄物之一。血液中的尿素氮值可以反映您肾脏清洁血液的功能。

### **照顾者 (Caregiver)**

在移植过程协助扶持移植病人的支持人员。照顾者必须准备提供病者在移植前后身体及情感的支持。他们可以是家庭成员、伴侣或朋友。

### **导管 (Catheter)**

是塑料或橡胶导管。一种类型是用来将膀胱的尿液排出体外。另一种类型是可以插入血管、使输液进入血流（循环系统）中。

### **同种异体的慢性移植肾病 (Chronic allograft nephropathy)**

移植后移植肾的功能逐渐下降。肾功能逐渐丧失往往有几个原因。也称为慢性排斥反应（*chronic rejection*）。

### **慢性肾病 (Chronic kidney disease)**

两边肾脏有永久性不能逆转的损伤。也称为慢性肾衰竭（*chronic renal failure*）。

### **肌酐 (Creatinine)**

是肌肉产生的废物 由肾脏将身体中的肌酸酐消除。您的肌酐指标表明肾脏保持您血液清洁的功能。移植后将密切观察您血液中的肌酐值。

### **交叉配对 (Cross-matching)**

捐赠者血液与可能的受捐者血液之间兼容性的血液测试。

- 交配结果呈阳性表明捐赠者与患者是不相容的。这表示受捐者的身体会排斥移植的器官。
- 交配结果呈阴性则表示供体和患者之间没有反应、可以进行移植。

### **巨细胞病毒 (Cytomegalovirus, CMV)**

是一般常见的病毒。大多数感染此病毒的成年人不会发生巨细胞病毒（CMV）病。如一个人对感染的抵抗力降低、病毒就会变得活跃（参见“免疫抑制”）。移植患者因巨细胞病毒（CMV）感染；可能会发烧、白细胞指数降低、胃部的问题及其他疾病。

### **遗体捐赠者 (Deceased donor)**

一位死者的家人同意捐献亲人的器官做移植。遗体捐赠者也称为尸体捐赠者。

### **移植器官功能延迟 (Delayed graft function, DGF)**

移植器官恢复缓慢 (“醒来”)。这个过程可能需要几天到几个星期。接受肾移植者在等待肾脏 “醒来” 期间、可能需要透析以保持血液清洁。

### **脱敏作用 (Desensitization)**

一种治疗方案、用于去除血液中抗人类白细胞抗原 (HLA) 的抗体。如您有一组非常高的反应性抗体、脱敏可能让您从更多的捐赠者那里接受肾脏。(参见 “组织匹配” 一章。)

### **心脏舒张压 (Diastolic)**

血压读数下面的 2 个数字 (即下压)。

### **供体特异性抗体 (Donor-specific antibodies, DSAs)**

抗 HLA 抗体可以在移植受体血液中。我们在移植手术后筛查供体特异性抗体 (DSA)。供体特异性抗体 (DSA) 可以是良性的、或可能是排斥移植器官的早期迹象。如移植后在您的血液中发现供体特异性抗体 (DSA)、我们会做更多的血液检查、或者做肾脏活检以确定供体特异性抗体 (DSA) 是否有问题。

### **内分泌专科医生 (Endocrinologist)**

专门治疗糖尿病及其他激素疾病患者的医生。

### **终末期肾病 (End stage renal disease, ESRD)**

慢性肾病已经恶化到肾脏无法足够地保持血液清洁的程度。在肾脏不能再工作的情况下、透析及肾移植是两种方法。

### **葡萄糖 (Glucose)**

用于身体能量的糖类。血液中的血糖水平高时可能是糖尿病的征兆。

### **移植 (Graft)**

移植的组织或器官、如肾脏或胰脏。

### **血肿 (Hematoma)**

移植器官或活检部位附近的集血。

### **人白细胞抗原 (Human leukocyte antigen, HLA)**

存在于所有细胞表面的蛋白质。它们帮助您的免疫系统认知什么部分是属您身体的什么是异物。

### **高血压 (Hypertension)**

血压高。

### **免疫抑制剂或免疫抑制的药物 (Immunosuppressants or immunosuppressives)**

用于抑制人体免疫系统的药物种类。它们也被称为*抗排斥药物*。

### **抑制免疫力 (Immunosuppression)**

减少身体对异物或抗原的免疫系统反应的过程。我们使用免疫抑制来阻止您的免疫系统攻击移植的肾脏。但是、免疫抑制也会使你的免疫系统更难对抗细菌或病毒等外来生物。

### **静脉注射/吊针 (Intravenous, IV)**

经由放置在静脉中的针或导管给患者输液。*静脉注射* 是指“进入静脉”。手术期间及手术后可通过静脉注射液体、药物和营养。

### **活体捐赠者 (Living donor)**

一个健康的成年人、把自己的一个肾脏捐献给获准进行肾移植的人。

### **淋巴囊肿 (Lymphocele)**

淋巴液可能聚集在移植器官的周边。不能将淋巴液送回静脉、它是由淋巴管损伤引起的 (通常是手术造成的)。

### **淋巴瘤 (Lymphoma)**

淋巴系统的一种癌症。

### **恶性 (Malignancy)**

癌症的别称。

### **药盒 (Mediset)**

一个帮助规划药物的系统。药盒 **mediset** 通常是一个每天都有不同隔间的盒子。这个盒子可以帮助您将药片分类、让你更容易记住它们。

### **肾病专家 (Nephrologist)**

专门诊断和治疗肾脏疾病的医生。

### **违规 (Noncompliance)**

未服药或未遵照医生指示。它可以缩短移植器官发挥功能的时间。违规也称为不遵守医嘱。

### **反应性抗体小组 (Panel of reactive antibodies (PRA) )**

一种在移植前做的血液测试、目的是测试受赠者对捐赠者组织的“反应性”。这项测试可以帮助您的医生知道在寻找与你匹配的移植捐献者时是否

有问题。您的PRA分数将在0%到100%之间。高PRA显示着血液中有大量的抗体、可能需要更长的时间才能找到捐献者。

**病人护理联系人 (PCC) /病人服务专员 (PSS) /项目联系人 **Patient Care Coordinator (PCC)/Patient Services Specialist (PSS)/Program Coordinator****

移植前后安排测试和预约的移植团队成员。他们可以回答有关您评估的问题。

**患者自控镇痛器 Patient-controlled analgesia (PCA)**

一种在手术后短时间内控制疼痛的方法。PCA 使用手持式控制器和特殊的静脉输液泵、可以根据需要给自己提供止痛药。

**移植后淋巴组织增生性疾病 Post-transplant lymphoproliferative disease (PTLD)**

淋巴结或淋巴瘤的癌症。这类癌症最常见于移植受者。

**初级保健提供者 Primary care provider (PCP)**

通常是非专科医生、负责管理您的所有医疗保健需求。初级保健提供者 (PCP) 可能是医生、行医护士或医师助理。初级保健提供者 (PCP) 可能会将您转介给专家。

**接受移植者 Recipient**

已经接受移植器官的移植患者。

**排斥 Rejection**

接受移植者的免疫系统对移植物造成伤害。

**肾 Renal**

与肾脏有关。

**狭窄 Stenosis**

体内血管或引流管狭窄。

**支架 Stent**

放置在体内的导管或装置、以保持运送体液管道的输液或排泄流畅、例如输尿管支架。

**收缩压 Systolic**

血压读数中两个数字中的上面的数值。

**血栓 Thrombosis**

血块

### 组织分型 **Tissue typing**

血液测试以确定器官捐赠者或接受者他们的细胞上可能有的人白细胞抗原（HLA）蛋白。这让我们知道捐赠者与接受者之间的匹配程度。请参阅“组织匹配”一章。

### 移植主治外科医生 **Transplant attending surgeon**

您移植手术的主要外科医生。

### 移植培训医生 **Transplant fellow**

正在接受移植手术特殊培训的医生。这位医生将在手术后帮助您在医院就诊。

### 移植护士协调员 **Transplant nurse coordinator**

在移植患者的健康问题上有特殊的训练和技能的护士。您的移植协调员是您的教育、医疗和移植护理的资源。

### 移植肾专科医生 **Transplant nephrologist**

接受过肾脏移植专项培训、治疗肾脏疾病的专科医生。移植后、您经常在诊所看到这位医生。

### 移植肾病培训医生 **Transplant renal fellow**

一位专门治疗肾脏疾病的医生、已经完成了住院医生的训练、且正在接受额外的移植医学培训。

### 移植外科住院医师 **Transplant surgery resident**

手术后在医院提供大部分日常医疗服务的医生。

### 联合器官共享联网 **United Network for Organ Sharing (UNOS)**

一个提供关于移植的教育及管理已遗体捐赠器官的等待名单的组织。请参阅参考资料一章以获得联系信息。

### 输尿管 **Ureter**

您体内将尿液从肾脏输送到膀胱的两个引流管。

### 尿道 **Urethra**

您体内将尿液从膀胱排出的引流管。

### 等待排名表 **Waiting List**

在美国已经评估为可做移植、在等待遗体捐赠器官的病人名单。这也被称为等待列表。在血压读数中，这两个数字的最高数字。

#### 您有疑问吗？

我们很重视您的疑问。当有疑问或顾虑时，请致电您的医生或医护人员。

移植科电话：206.598.3882

## **Medical Terms**

### *For a kidney/pancreas transplant*

*This chapter defines many of the medical terms you may hear or read during your transplant journey.*

You will hear and read many new terms as you learn about transplants. It will help to know what these words mean. Share this chapter with your family, your support team, and living donors.



*You and your caregivers will learn many new words on your transplant journey.*

#### **Acute rejection**

A rapid reaction against the transplanted organ. It often occurs about a week after transplant, due to a strong immune response to the new organ.

#### **Allograft**

A transplanted organ between two individuals who are the same species (such as human), but who have genetic differences.

#### **Amylase**

An enzyme made by the pancreas, normally found in the blood. Blood tests of amylase levels show how well a transplanted pancreas is working.

#### **Antibody**

A protein made by your immune system in response to a foreign substance (see “Antigen”). Antibodies help your body fight off antigens.

#### **Antigen**

A substance that your body sees as a threat, such as a virus, bacteria, or transplanted organ. Your immune system responds by making antibodies and also activates other cells to fight off the antigen.

#### **Biopsy**

A procedure that is done to find diseases or conditions such as rejection. In a biopsy, a very small sample of a tissue or organ is removed and examined under a microscope.

**BK virus**

A common virus that lives in the urinary system of most adults. In healthy people, it is harmless. In kidney transplant recipients, it can sometimes cause kidney damage. We will test your urine after transplant to make sure the BK virus levels are not too high.

**Blood urea nitrogen (BUN)**

A waste product excreted by a healthy kidney. The BUN level in your blood shows how well your kidney is working to keep your blood clean.

**Caregiver**

The support person or team who will help you through the transplant process. Caregivers must be able to provide you with both physical and emotional support before and after the transplant. A caregiver could be a family member, partner, or friend.

**Catheter**

A plastic or rubber tube. One type of catheter may be placed in your bladder to drain urine. Another type may be placed in a blood vessel to allow us to access your bloodstream (*circulatory system*).

**Chronic allograft nephropathy**

A slow decline in kidney function after transplant. There may be many reasons for this problem. It is also called *chronic rejection*.

**Chronic kidney disease**

Damage to both kidneys that cannot be reversed. It is also called *chronic renal failure*.

**Creatinine**

A waste product produced by muscles and removed from the blood by the kidneys. Your creatinine level can show how well your kidney is working to keep your blood clean. After transplant, we will closely watch the creatinine level in your blood.

**Cross-matching**

A blood test that shows whether a potential donor's blood is compatible with a prospective recipient's blood.

- A *positive cross-match* means that the donor and patient are **not** compatible. The recipient's body would reject the transplant.
- A *negative cross-match* means there is no reaction between the donor and the patient. The transplant may proceed.

**Cytomegalovirus (CMV)**

A common virus. Most adults who have been exposed to the virus do not develop CMV disease. The virus can become active if your ability to fight



infection is reduced (see “Immunosuppression”). CMV can cause fever, low white blood cell count, stomach problems, and other illnesses.

### **Deceased donor**

A person who has died recently, whose family has agreed to donate their loved one’s organs for transplant. A deceased donor is also known as a *cadaveric donor*.

### **Delayed graft function (DGF)**

A slow recovery (“waking-up”) of a transplanted organ. DGF may take days to weeks. A kidney transplant recipient may need dialysis to keep their blood clean while waiting for the kidney to “wake up.”

### **Desensitization**

A treatment program to remove the antibodies in your blood that fight *human leukocyte antigens* (HLAs). If you have a very high *panel of reactive antibodies*, desensitization may allow you to receive a kidney from a greater number of donors. (See chapter on “Tissue Matching.”)

### **Diastolic**

The bottom number of the two numbers in a blood pressure reading.

### **Donor-specific antibodies (DSAs)**

Anti-HLA antibodies that can be in a transplant recipient’s blood. We screen for DSAs after transplant surgery. DSAs can be benign, or they can be an early sign of rejection of a transplanted organ. If we find DSAs in your blood after transplant, we will run more blood tests, or may do a kidney biopsy to find out if the DSAs are a problem.

### **Endocrinologist**

A doctor who specializes in treating patients with diabetes and other hormonal diseases.

### **End stage renal disease (ESRD)**

Chronic kidney disease that has worsened to the point where the kidneys cannot keep the blood clean enough on their own. Dialysis and kidney transplant are 2 ways to do the work that these kidneys can no longer do.

### **Glucose**

The type of sugar that the body uses for energy. A high glucose level in the blood can be a sign of diabetes.

### **Graft**

Transplanted tissue or organ, such as a kidney or pancreas.

### **Hematoma**

A collection of blood near the transplanted organ or biopsy site.

**Human leukocyte antigen (HLA)**

Proteins found on the surface of all cells. They help your immune system know what substances are part of your body and what are foreign objects.

**Hypertension**

High blood pressure.

**Immunosuppressants or immunosuppressives**

The type of drugs used to suppress the body's immune system. They are also called *anti-rejection medicines*.

**Immunosuppression**

The process of reducing the body's immune system responses to foreign objects or antigens. We use immunosuppression to stop your immune system from attacking the transplanted kidney. But, immunosuppression also makes it harder for your immune system to fight foreign organisms such as bacteria or viruses.

**Intravenous (IV)**

Anything given to a patient through a needle or catheter placed into a vein. The word *intravenous* means "into a vein." Liquids, medicines, and nutrients may be given through an IV during and after surgery.

**Living donor**

A healthy adult who donates one of their kidneys to someone who is approved for kidney transplant.

**Lymphocele**

Lymph fluid that may collect near the transplanted organ. It is caused by lymph vessels that are damaged (usually from surgery) and cannot return lymph fluid back to the veins.

**Lymphoma**

A type of cancer of the lymph system.

**Malignancy**

Another term for cancer.

**Mediset**

A system that helps organize medicines. A mediset is usually a box that has a different compartment for each day. This box helps you sort your pills so that it is easier for you to remember to take them.

**Nephrologist**

A doctor who specializes in diagnosing and treating kidney disease.

**Noncompliance**

Failure to take medicines or follow healthcare instructions. It may shorten the time a graft is able to work. Noncompliance is also called *nonadherence*.

**Panel of reactive antibodies (PRA)**

A blood test done before transplant to test the recipient for “reactivity” to donor tissues. The test helps your doctors know if there might be a problem finding a transplant donor who is a match for you. Your PRA score will be between 0% and 100%. A high PRA means a high number of antibodies are in your blood, and it may take longer to find a donor.

**Patient Care Coordinator (PCC)/Patient Services Specialist (PSS)/Program Coordinator**

Transplant team members who schedule tests and appointments before and after transplant. They can answer questions about your evaluation.

**Patient-controlled analgesia (PCA)**

A way to control pain for a short time after surgery. PCA uses a hand-held control and a special IV pump that allows you to give yourself pain medicine as needed.

**Post-transplant lymphoproliferative disease (PTLD)**

Cancer of the lymph node or a lymphoma. This type of cancer is seen most often in transplant recipients.

**Primary care provider (PCP)**

Usually a non-specialist doctor who manages all your healthcare needs. A PCP may be a doctor, nurse practitioner, or physician assistant. Your PCP may refer you to specialists.

**Recipient**

A transplant patient who has received a transplanted organ.

**Rejection**

Injury to the graft caused by the recipient’s immune system.

**Renal**

Related to the kidneys.

**Stenosis**

A narrowing of a blood vessel or drainage tube in the body.

**Stent**

A tube or device placed in a vessel to keep it open or draining, such as a ureteral stent.

**Systolic**

The top number of the two numbers in a blood pressure reading.

**Thrombosis**

A blood clot.

**Tissue typing**

A blood test to determine which HLA proteins a possible organ donor or recipient has on their cells. This lets us know how close the match is between donor and recipient. See chapter on “Tissue Matching.”

**Transplant attending surgeon**

The doctor who is the main surgeon for your transplant surgery.

**Transplant fellow**

A doctor who is receiving special training in transplant surgery. This doctor will help with your care in the hospital after the surgery.

**Transplant nurse coordinator**

A nurse who has special training and skills in the health concerns of transplant patients. Your transplant coordinator is your resource for education, healthcare, and transplant care.

**Transplant nephrologist**

A doctor who specializes in treating kidney disease, with special training in kidney transplant. You will see this doctor often in the clinic after your transplant.

**Transplant renal fellow**

A doctor who specializes in treating kidney disease, who has finished medical residency and is getting extra training in transplant medicine.

**Transplant surgery resident**

A doctor who provides most of your day-to-day medical care in the hospital after surgery.

**United Network for Organ Sharing (UNOS)**

An organization that provides education about transplant and manages the waiting list for deceased donor organs. See “Resources” chapter for contact information.

**Ureter**

One of the two drainage tubes in your body that carry urine from your kidneys to your bladder.

**Urethra**

The drainage tube in your body that carries urine from your bladder out of your body.

**Waiting List**

The list of people in the U.S. who have been assessed for transplant and are waiting for deceased donor organs. This is also called the *wait list*.

**Questions?**

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Transplant Services:  
206.598.3882