

Toddler 'doing well' after liver transplant

As she is immunocompromised, Raenelle's parents take great safety precautions

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She was diagnosed with biliary atresia – a rare liver disease – when she was just 1½ months old. Last September, she was given six months to live unless she could get a liver donor.

After an agonising three months of searching and waiting, a match was found and she received a liver transplant in January this year.

Now, six months after her surgery, Raenelle, who turns two this September, is recovering just how her parents hoped she would.

Her mother, Ms Vicky Cheng, a 35-year-old housewife, told The New Paper last week: "She is doing well. There seems to be no rejection of the new liver."

"She still goes to the hospital for bimonthly check-ups and the doctors are monitoring her health."

In February, TNP reported that Ms Cherie Wong, 30, donated a part of her liver to Raenelle after Ms Cheng posted a plea on Facebook in an attempt to look for a donor for her daughter.

Raenelle had her surgery at the National University Hospital (NUH) on Jan 20 and was discharged almost three months later on April 7.

Since her discharge, Ms Cheng said that both she and her husband are taking great safety precautions because of Covid-19 and seldom head out with Raenelle.

"The only time she is out is during her consultation visits and when we visit the park,



Raenelle was diagnosed with a rare liver disease when she was just 1½ months old.
PHOTO: VICKY CHENG

which is not crowded," she said.

"We have become strict with sanitising at home and taking great care of our personal hygiene as we have an immunocompromised child at home."

Biliary atresia is a rare disease in infants where the bile ducts in the liver are inflamed, blocking bile flow to the gallbladder and eventually leading to liver failure.

Dr Vidyadhar Mali, senior consultant of the department of paediatric surgery at Khoo Teck Puat – National University Children's Medical Institute, said that Raenelle is well and her liver function is stable.

He explained that following a liver transplant, a child needs to take medications on a long-

term basis to prevent rejection of the newly transplanted liver.

"This is called immunosuppression. While immunosuppression drugs protect the transplanted liver, they also reduce the child's ability to fight infections. The risk of infection is higher for transplant recipients compared with other children who are not on immunosuppression medications.

"Therefore, we strive to achieve a balance whereby we prevent rejection with the minimum required immunosuppression so as to also minimise the risk of infection," said Dr Mali, who is also surgical director of the paediatric liver transplantation programme at National University Centre for Organ Transplantation at NUH.

MONITOR

"As part of her follow-up assessments, we will continue to monitor her level of immunosuppression, liver function and the occurrence of any infections."

When asked how she and her husband have managed to cope, Ms Cheng, who gave birth to her second child late last year, said: "Through a pinch of patience, understanding and time management."

Ms Cheng added: "We are just grateful that Raenelle is doing better. We are also so thankful for the donor, the doctors and the nurses who have helped Raenelle along the way... we could not have done it without them."

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