

LETTER TO THE EDITORS

Donor/recipient sex mismatch and survival after heart transplantation: only an issue in female recipients?

doi:10 1111/tri 12502

Dear Sirs,

It was with great interest that we read the article by Martinez-Selles *et al.* [1] published recently in the journal. We commend the authors on their work. The issue of sex mismatch is important to consider in thoracic organ transplant.

In their article, Martinez-Selles *et al.* found that sex mismatch was associated with worse outcomes for only male recipients. This is a topic we have examined in both lung transplant [2–6] and heart transplant [7,8]. In our analysis of the United Network for Organ Sharing transplant registry, we were able to examine sex matching in 31,634 transplants [7]. Our data and the results of Khush *et al.* [9] demonstrate that sex mismatch is associated with worse outcomes in female recipients in analyses adjusted for donor–recipient weight differences. The failure to detect this association in the recent article [1] is certainly attributable to power limitations as the cohort included fewer than 1000 female recipients.

More importantly, women have considerably smaller thoracic organs than men do independent of measures of weight and height. As such, attempts to study issues of sex mismatch that utilize height differences (lung) or weight differences (heart), rather than predicted organ size, are inherently confounded by sex-related organ size differences. While our unadjusted models mirrored the results of Martinez-Selles *et al.*, after controlling for organ size differences, our adjusted models yielded results supporting the opposite conclusion: sex mismatch is only an issue in female recipients.

Robert M. Reed¹ and Michael Eberlein²
1 Division of Pulmonary and Critical Care Medicine,
University of Maryland School of Medicine, Baltimore, MD,

e-mail: rreed@medicine.umaryland.edu 2 Division of Pulmonary and Critical Care Medicine, University of Iowa School of Medicine, Iowa City, IA, USA

Conflict of interest

No author involved in this work reports any conflict of interest, either real or perceived.

Funding

Dr. Reed was funded in part by the Flight Attendant Medical Research Institute.

References

- Martinez-Selles M, Almenar L, Paniagua-Martin MJ, et al. Donor/recipient sex mismatch and survival after heart transplantation: only an issue in male recipients? An analysis of the Spanish Heart Transplantation Registry. *Transpl Int* 2014; 28: 305.
- Eberlein M, Reed RM, Permutt S, et al. Parameters of donor-recipient size mismatch and survival after bilateral lung transplantation. J Heart Lung Transplant 2012; 31: 1207.
- 3. Eberlein M, Diehl E, Bolukbas S, Merlo CA, Reed RM. An oversized allograft is associated with improved survival after lung transplantation for idiopathic pulmonary arterial hypertension. *J Heart Lung Transplant* 2013; **32**: 1172.
- 4. Eberlein M, Reed RM, Bolukbas S, *et al.* Lung size mismatch and survival after single and bilateral lung transplantation. *Ann Thorac Surg* 2013; **96**: 457.
- Eberlein M, Reed RM, Maidaa M, et al. Donor-recipient size matching and survival after lung transplantation. A cohort study. Ann Am Thorac Soc 2013; 10: 418.
- Eberlein M, Bolukbas S, Reed RM. eComment. Gender mismatching in lung transplantation: lung size mismatch is the issue!. *Interact Cardiovasc Thorac Surg* 2013; 16: 435.
- 7. Reed RM, Netzer G, Hunsicker L, *et al.* Cardiac size and sex matching in heart transplantation: size matters in matters of sex and the heart. *JACC Heart Fail* 2014; 2: 73.
- Reed RM, Eberlein M. Sizing strategies in heart and lung transplantation: you cannot manage what you do not measure. Future Cardiol 2014; 10: 303.
- 9. Khush KK, Kubo JT, Desai M. Influence of donor and recipient sex mismatch on heart transplant outcomes: analysis of the International Society for Heart and Lung Transplantation Registry. *J Heart Lung Transplant* 2012; **31**: 459.