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# Return journey to a life less ordinary

**A year ago a Spanish man had the world's first full face transplant. Graham Keeley meets one of the surgeons who made it possible**

Oscar never thought he would smile again. So when he tried, for the first time in six years, he was surprised to find that it felt like a nervous tick, before finally creasing into a broad smile.

You might have thought it would have been a moment of great joy for a person who had been unable to smile, but also could not speak or breathe normally for so long. In fact, Oscar's first smile is likely to have been one of quiet satisfaction that he had taken another step towards getting his old life back.

A year ago, Oscar, who still does not want to disclose his full name, underwent the world's first full face transplant at a hospital in Spain.

A team of 30 surgeons worked for 24 hours at the Vall d'Hebron University Hospital in Barcelona to give him a new face — and a new life.

In a highly complex operation, skin, muscles, nose, teeth, lips, palate, cheekbones and jaw were transplanted and reconstructed using tissue from a brain-dead donor, while preserving the blood supply. The only part of his original face that remains is his tongue.

Oscar, who is single and lives in a Spanish village, lost his nose, jaw and other parts of his face when he accidentally shot himself in 2005.

Despite previous attempts to restore his appearance, he had severe difficulties breathing, swallowing and speaking.

His day-to-day life was one of a recluse, confined to his family home for fear of the reaction of people who saw what was left of his face. Oscar only felt comfortable venturing out at night.

When he read the story of Isabelle Dinoire, the Frenchwoman who underwent the world's first partial face transplant after she was savaged by her dog, he was inspired to contact the Barcelona hospital that had carried out other transplants.

After a gruelling series of psychological and physical tests, doctors decided Oscar would be suitable for the ambitious operation.

He was prepared for the possibility that if his body rejected his new face, it could potentially cost him his life.

A year after the operation, Joan Pere Barret, who led the team of surgeons, says Oscar has almost regained the life he had before his accident.

"He is a person who loves to go fishing and loves the outdoor life. Now he can smell fresh air for the first time for more than five years,"

Dr Barret says.



Oscar, above, and with his sister and Dr Joan Pere Barret at a press conference

THE TIMES | Tuesday March 29 2011



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It took a long time for Oscar to cry because he could not move his eyelids

“All that time he never went out because he was worried about people laughing at him. Now he can.”

Oscar can speak normally, although at times he has problems saying words that start with “p” or “b” — sounds that require the speaker to put their lips tight together.

He can taste food — something that does not just require taste buds but also the capacity to smell.

“For five years he did not have the ability to smell, because parts of his nose were destroyed in the accident. What he has especially enjoyed is being able to smell again,” Dr Barret says.

Oscar, who was a farmer before his accident, can enjoy a beer with friends and laugh at their jokes — a simple joy that seemed impossible until a few months ago.

He is also able to walk down the street without fearing he will face cat calls or worse.

When Oscar appeared at a press conference in July, his face was inflamed and it was hard to understand his words. Speaking with difficulty, he said: “I am very happy and I want to thank the surgeons and the donors, especially the man who gave me the new tissues I received.”

Since then, he has preferred to stay away from public gaze and did not want doctors to reveal too much about his identity — perhaps a shyness from years of feeling ostracised or mocked in public.

Oscar has now regained all the feeling in his face and the movement in his facial muscles. He can move his eyebrows, upper eyelids, jaw, and cheek muscles. It took a long time, however, until he was able to cry — because he could not move his eyelids, something that is essential to dispel tears.

His new face has come from an unnamed person whose identity Oscar will never know as Spanish law does not permit donors to be identified.

Dr Barret says that before the operation could take place, a donor agency had to find a potential donor who not only had the right size and shape face, but also had roughly the same weight and stature as Oscar.

“I am not allowed to know anything about the donor by law, but it is a man so Oscar can grow a beard if he wants and he must be around the same age — 31,” he says.

The donor, who had to be a person who was technically brain dead, had to be within one hour’s flight from the Barcelona hospital where Oscar’s transplant was carried out as tissue cannot be frozen. This means the person whose face Oscar is now living in may have died in a hospital in Madrid or Seville or another part of Spain.

Oscar is now planning to start a new career and despite his understandable reluctance to confront a curious world, psychologically, his progress has been “excellent”, Dr Barret says. “He feels like Oscar again, not someone else.”

The ground-breaking operation did not only change Oscar’s life — it also altered that of Dr Barret. The two will be intimately linked indefinitely, as Dr Barret must monitor his progress constantly.

Oscar will always need to take medication. If for any reason he stopped taking his cocktail of cortisone, mycophenolate and tacrolimus, his body might start to reject the foreign tissue and ultimately he might die.

His story typifies a rapidly changing world of transplant surgery where clinicians are pushing back the barriers of what is possible. Some in the profession have been accused of conducting a race to carry out the most audacious transplant merely to grab headlines.

Dr Pedro Cavadas, another Spanish surgeon, is currently looking for a donor so that his team can carry out the world’s first double leg transplant.

However, Dr Barret, who is presently planning a second full-face transplant, this time on a woman, does not see it as a competition between rival surgeons.

He also dismisses the idea that this type of surgery will lead to patients asking him to give them someone else’s face and “make them look beautiful”.

“The risks are too great for the operations,” he says. “I do not believe this could happen.”

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