

Boy came for a liver, but left with a heart

April 14 2009, By Sophia Kazmi

It started as something of a medical mystery that, at first, doctors couldn't figure out.

Kevin Murphy of San Ramon, Calif., had persistent flu-like symptoms and abdominal pain. Doctors at San Ramon Regional [Hospital](#) and Children's Hospital Oakland tried to figure out what was causing it.

One by one, possibilities were eliminated. It wasn't the stomach flu. Hepatitis was ruled out. Doctors thought perhaps the 12-year-old baseball player's enlarged liver was failing and sent Kevin to Lucile Packard Children's Hospital at Stanford, where if necessary, doctors could perform a [liver transplant](#).

After arriving at the new hospital, the family received even more shocking news: It wasn't Kevin's liver that was failing. It was his heart, and he needed a new one.

His parents, Tim and Dianna Murphy, couldn't believe it. How could Kevin go from the flu to a heart transplant?

"It was surreal," said Dianna Murphy. "It really was. We have four boys. They get colds. They get the flu."

The family went through an emotional roller coaster for the first 20 days of February, Tim Murphy said. "We would get some good news," he said, "then some bad news."

Kevin needed to be on a breathing machine for nearly two weeks. After he was taken off the respirator, he became worse and required the machine again. That night - Feb. 19 - the Murphys received a cell phone call. There was a heart for Kevin.

The next day, after it was determined that Kevin was well enough to proceed with the 5{ hour surgery, he received his new heart and started the process of recovery.

Kevin's condition is rare, said his doctor, Dr. Daniel Bernstein, co-director of the Children's Heart Center. About 350 child heart transplants are performed each year. That's compared with 3,500 adult transplants. The Packard Children's hospital performs 15 heart transplants a year.

Kevin had an abnormality in his heart muscle. The abnormality weakened his heart and drastically reduced the blood's ability to return from the liver. What caused the abnormality is unknown.

"Typically most pediatricians, when they think of heart failure, they think of people who have trouble breathing," Bernstein said. But studies have shown abnormal abdominal pain in children and adolescents is a symptom of a heart problem.

Bernstein cautioned that parents need not be concerned every time their child's belly aches, but something more than the average stomach flu should be checked out.

The process of elimination used to determine what Kevin had is part of practicing medicine, Bernstein said. Good doctors, he said, keep their focus broad when diagnosing their patients, he said.

Kevin has been released from the hospital but is staying near the hospital

and attending school there while he is still being seen by doctors.

Kevin said he cannot remember much of what happened, but he said he feels good now.

"I have high energy," he said. He would like to return to playing baseball with San Ramon Little League, maybe as early as next year. His Little League team and Pine Valley Middle School, where he attends, were rooting for him through the operation.

"It felt good people were supporting me," Kevin said.

His dad said Kevin is in good spirits and embraces his new required low-sodium diet by looking online for new recipes. He also has been quizzed on all the medication he is on and knows when and why he has to take them.

Meanwhile, his parents learned a lot about their third son. He remained brave through the whole procedure. He also showed concerned for his heart donor.

"Somebody had to die for me," Dianna Murphy remembers her son saying when he learned there was heart for him. "It broke my [heart](#). I assured him that he didn't cause this."

Kevin teared up as his mother retold the story.

"He's just a caring person," she said. "That was his first response."

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