

# KIDNEY CONNECTION

Spring 2007

## Hemodialysis Catheters: How to Keep Yours Working Well

Hemodialysis is a treatment used when your kidneys fail (Stage 5 Kidney Disease) and can no longer clean your blood and remove extra fluid from your blood. A hemodialysis access or vascular access is a way to reach your blood for hemodialysis.

If you receive hemodialysis, your access is one of the following:

- An AV fistula made by joining an artery and vein in your arm
- An AV graft made by using a soft tube to join an artery and vein in your arm
- A catheter, a soft tube that is placed in a large vein, usually in your neck

The NKF recommends the AV (arteriovenous) fistula as the preferred choice for a permanent vascular access. The AV graft is the next preferred choice for a permanent access. The catheter is recommended for temporary access. There may be conditions that prevent you from having a fistula or graft and a catheter may be used.

### What is a hemodialysis catheter?

A catheter used for hemodialysis is a tunneled catheter because it is placed under the skin. There are two types of tunneled catheters: cuffed or non-cuffed. Non-cuffed tunneled catheters are used for emergencies and for short periods (up to 3 weeks). Tunneled cuffed catheters, a type recommended by the NKF for temporary access, can be used for longer than 3 weeks when:

- An AV fistula or graft has been placed but is not yet ready for use.
- There are no other options for permanent access. For example, when a patient's blood vessels are not strong enough for a fistula or graft.

Catheters have two openings inside; one is a red (arterial) opening to draw blood from your vein and out of your body into the dialysis pathway and the other is a blue (venous) opening that allows cleaned blood to return to your body.

*(cont. on pg. 3)*



### A Message from the Executive Director, Lisa Allgood

As we approach the end of the fiscal year and I review all our accomplishments in the past year, a resounding question continually arises, "how was this possible?"

The most obvious explanation is hardworking, dedicated staff and Board of Directors. But there is more to this equation: Over 300 volunteers, two active chapters in Bowling Green and Lexington, and many partnerships. Without these entities, our success would not be possible.

With the help of all of our dedicated volunteers, we have screened over 1,000 at-risk individuals for kidney disease. Kidneys in the Classroom has reached the schools of eastern and western Kentucky. Five special events has brought in over \$225,000 for much needed services and programs including patient and public education and direct financial assistance.

Saying thank you never seems adequate, but it is genuine. We appreciate your time, talent, and treasure and hope you will join us in making next year the best yet.

### Inside this Issue....

- Keeping in Control: Lowering Your Risk for Kidney and Heart Disease pg. 4
- NKF Golf Classic held in Lexington pg. 5
- Dean Kutz 5K Results pg. 6

## Mark your Calendar! 2007 Events

### Program Events

**Support Group**  
2nd Thursday every month  
Call for information

### KEEP Screening

**August 24**  
Danville  
Location TBA

**September**  
Louisville  
Location TBA

### Special Events

**NKFK Golf Classic**  
Lexington  
July 16, 2007

**Ride Out Loud! Bike Event**  
Bowling Green  
August 18, 2007

**Kidney Walk**  
Louisville, Waterfront Park  
September 15, 2007



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**The NKFK receives \$2-\$7 for  
every cartridge and cell phone  
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For more information, please contact  
Johanna Clapp at 502-585-5433 or  
jclapp@nkfk.org!

## NKFK Chapter News

### Bowling Green



*From left: Connie Smith and Lisa  
Allgood*

The 2007 Distinguished Volunteer Award was awarded to Connie Smith. Connie has served as CEO at The Medical Center in Bowling Green, Kentucky since 1998. Connie was instrumental in starting the Bowling Green NKFK Chapter which has grown and resulted in program and services expansion to the Western Kentucky area. She has proven to be an effective advocate for kidney patients and has motivated other community leaders to participate with the Bowling Green Chapter.

### Lexington

The chapter has committed to bringing the Kidneys in the Classroom program to Lexington schools. The chapter would like to extend the program to include parent education and involvement that shares life-saving information on preventing kidney disease for their children

*If you are interested in attending a chapter meeting, please contact the NKFK at 502-585-5433.*

## Hemodialysis Catheters (cont. from pg. 1)

### How do I take care of my catheter?

By taking good care of your access, it will last longer and you will prevent problems such as infection and clotting. Here are some important steps to take:

- Keep the catheter dressing clean and dry
- Make sure the area of the insertion site is clean and your care team changes the dressing at each dialysis session.
- Keep an emergency dressing kit at home, in case you need to change your dressing in between treatments. Ask your dialysis care team to teach you how to change dressings in an emergency.
- Never open your catheter to air.
- Do not shower or swim; you may take baths
- Wear a mask over your nose and mouth anytime the catheter is opened to prevent bacteria from entering the catheter and your blood stream. Professionals changing the dressing should wear a mask and gloves as well.
- The caps and the clamps of your catheter should be kept tightly closed when not being used for dialysis. Only your care team should use your dialysis catheter to draw blood or give medications or fluids.
- If the area around your catheter feels sore or looks red, call your dialysis care team at once. Ask your dialysis team about signs and symptoms that require immediate attention.
- Know your Kt/V and URR (urea reduction ration). Kt/V and URR are numbers that tell you how much dialysis you are getting. The NKF recommends using Kt/V. If you are receiving enough dialysis, your Kt/V should be at least 1.2. If URR is used, it should be 65% or more. If your numbers are too low, one possible cause may be that your access is not working well. Ask your dialysis team to check your access.

### Should I have any concerns about my catheter?

Sometimes, even when you are very careful, your access may clot or become infected.

Clots can form inside the opening of the catheter or form on the outside of the catheter and block the opening. This can cause blood to flow at a slower rate than the rate your doctor ordered. If the blood flow rate remains low for more than one dialysis treatment, the catheter should be checked and treated the same day. Early treatment may prevent the clot from totally blocking the catheter. It is important to restore the recommended blood flow rate and treat clots that are forming so that your catheter continues to work well and you get the amount of dialysis you need. If the clot is **not** treated when signs and symptoms of an early clot are found, the catheter can progress to be fully clotted. You may then be required to visit the hospital or vascular lab to have the catheter checked and possibly exchanged for a completely new catheter.

Infection can also occur even with a good blood flow rate. It is important to follow your catheter care instructions, exactly as you were taught, in order to avoid infection. You should know the following signs and symptoms of a catheter infection and report them to your doctor or dialysis team right away, so you can get the proper treatment as quickly as possible. The signs and symptoms of a catheter infection include:

- Fever
- Chills
- Drainage from the catheter exit site
- Redness or tenderness around the catheter exit site
- General feeling of weakness or illness

If you experience any of the above symptoms, inform your health care team immediately. (cont. on pg. 7)

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# Keeping in Control: Lowering Your Risk for Kidney and Heart Disease

## Diabetes and the Kidney

Keeping in good blood glucose control is important for lowering your risk for health complications. Glucose, often described as sugar, is made by the body, usually after eating, and serves as the fuel for every body cell. Diabetes mellitus, either type 1 or type 2, is the leading cause of kidney disease. When blood glucose levels stay high and uncontrolled over a period of time, blood flow to the kidneys is impaired, resulting in damage to the kidneys and their important functions. In addition, high blood glucose levels will lower the ability of the nerves to empty the bladder. The urine that stays in the bladder may then cause added pressure to build up, and may injure the kidneys.

## What Are the Symptoms of Kidney Disease?

In order to prevent or delay kidney disease from developing, you must be aware of its early and late stage signs and symptoms. The presence of albumin (a type of body protein) in the urine is the first sign of kidney disease, even before abnormalities in blood are found. Albumin in your urine may also be an early sign of changes in your blood vessels. Other early signs of potential problems with kidney function include frequent trips to the bathroom and high blood pressure. Treatment at these early stages will lower the likelihood that kidney disease will progress to kidney failure. (*cont. on pg. 7*)

## Pounding the Pavement to Beat Kidney Disease!

NKFK board members and other volunteers will be hitting the streets of West Louisville to spread awareness of the high risk of kidney disease. Volunteers will distribute 1,000 door hangers that warn of the risk diabetes poses to kidney health and urges early detection and treatment to delay the progression of kidney disease. The door hanger offers the opportunity to attend a NKFK kidney health screening (KEEP) and free diabetes management classes offered by the Louisville Metro Department of Public Health & Wellness (LMDPHW).

The door hangers will be distributed in West Louisville, a predominately African-American community. Diabetes, the leading cause of kidney disease, is most common in minority populations.

The diabetes and kidney disease public awareness campaign was funded by the Chronic Disease Prevention Team of the LMDPHW. NKFK volunteer webmaster, Michael Feger, designed the door hanger.

If you are interested in distributing door hangers or volunteering for the KEEP screening, please contact Laura Temple at 585-5433 or [ltemple@nkfk.org](mailto:ltemple@nkfk.org).

If you would like more information on diabetes management classes and other programs offered by the Chronic Disease Prevention Team, please call 574-6663.

**Do Not Throw Away! It Could Save Your Life! It Could Save Your Life!**

**CHRONIC KIDNEY DISEASE:**  
Most Don't Know the Half of it

If you have **diabetes**,  
You are at-risk for  
**kidney failure.**

**Three simple tests can tell  
the whole story,  
not just the half of it.**

Early Detection and treatment can delay  
or prevent kidney disease.  
One-half of people undergoing dialysis  
treatment have diabetes.

**Three Simple Tests Can  
Save Your Life!**

Tell your doctor to:

- 1 Measure your blood pressure
- 2 Test for protein in the urine, the first sign of kidney damage.
- 3 Calculate your kidney count (GFR), a test that determines how well your kidneys are functioning.

For more information on a free kidney health screening in your area, please call the National Kidney Foundation of Kentucky at 502-585-5433 or visit [www.nkfk.org](http://www.nkfk.org)

To learn more about diabetes and sign-up for free diabetes management classes, please contact the Louisville Metro Department of Public Health and Wellness, Chronic Disease Prevention Team at 502-574-6663.

LOUISVILLE METRO PUBLIC HEALTH & WELLNESS  
National Kidney Foundation

## NKF Golf Classic held in Lexington

The National Kidney Foundation Golf Classic is no stranger to Central Kentucky. This event, held in Lexington, is one of the premier charity golf events in the area. Our history for this event dates back to 1997. In 2007, this event raised \$27,000 for the National Kidney Foundation of Kentucky!

Our corporate sponsors from 2006 included teams from Malone's restaurants, Traditional Bank, Anthem, Chase, Brett Construction Company, WKYT, Sperry Van Ness, Quantrell Cadillac, Benefit Insurance Marketing and Hek Glass.

This year we are happy to introduce Porsche of Lexington as our presenting corporate partner. Representatives from Porsche along with several committee members, volunteers, golfers, NKFK Lexington Chapter members and others will gather together at Sal's in the Lansdowne Shoppes on Sunday, July 15th from 6:00 pm to 8:00 pm for our "Toast to Tee Off." This event will feature d'oeuvres, cocktails, and a silent auction. The Golf Classic will be held the next day, July 16, at the University Club of Kentucky.

If you and your friends or clients are interested in obtaining more information about this event, please give me a call in Lexington at Traditional Bank, 859-296-0000.

*Chris Chaffin*  
*Committee Chairman 2007*

## Walk for a Cause!

One in 9 adults in Kentucky are living with kidney disease and most don't even know it.

To raise public awareness of the importance of early detection, especially for those people considered at risk, the NKFK is asking you to join in and help spread the word. And if that sounds like too great of a challenge, you might just think of it as a walk in the park. That's because if you can walk, you can take part in a unique community event - the 7th Annual Kidney Walk in Louisville on September 15, 2007 which features a two mile route along Waterfront Park.

"The Kidney Walk will draw attention to the importance of early detection for those at risk, and also raise funds to support programs for kidney patients and their families," says Lisa Allgood, Executive Director.

Participants of all ages are invited to join in the fun by walking individually or by forming a team. Each walker who raises \$100 will receive an official Kidney Walk t-shirt.

For more information, sponsor forms, or to register, contact Laura Temple at 502-585-5433 or [ltemple@nkfk.org](mailto:ltemple@nkfk.org).

## Gear Up for the Ride•Out•Loud Bike Event!

Join your friends, family and co-workers for this year's 1st annual Ride•Out•Loud Bike Event to raise funds for the NKFK. It's going to be a fun time for all that participate. No matter your age or cycling experience, there's a bike route just perfect for you! Ride•Out•Loud offers the chance to ride through Southcentral Kentucky's scenic countryside back roads while benefiting a worthy cause.

Ride•Out•Loud is sponsored by The Medical Center of Bowling Green. The NKFK Bowling Green Chapter and the Bowling Green League of Bicyclists are planning the event.

The bike event will take place on August 18, 2007 at Chaney's Dairy Barn located at 9191 Nashville Road in Bowling Green. Registration begins at 7:30 am and the ride starts at 8:30 am. Early bird individual registration fee is \$15 and family registration fee is \$25. All riders are required to wear bicycle helmets.

For more information, please contact the NKFK at 1-800-737-5433 or [lallgood@nkfk.org](mailto:lallgood@nkfk.org).



Over 450 walkers participated in the 2006 NKFK Kidney Walk.



## Volunteer Spotlight: Adam Azbill



Adam has been a NKF volunteer for the KEEP program since 2003. He has volunteered as a phlebotomist for our screenings and traveled all over the state when we needed him the most. Thanks Adam for your dedication!

**Occupation:** I have been a hemodialysis nurse since 1999, and am part of the dialysis team at Jewish Hospital.

### Why do you volunteer for the NKF?

I volunteer for the NKF because kidney disease, for the most part, is irreversible. Working in an acute care setting, I see so many patients who are dealing with dialysis for the first time. I guess working toward prevention is a way of balancing the scale.

### Why have you chosen to work in dialysis?

Sometimes, I wonder if I should be heading in a different direction, professionally. However, from the feedback I receive everyday from my patients, I have found my niche'. Hopefully, these outreach programs will find a way to eliminate my job!

## NKFK Volunteer Opportunities

- ✓ KEEP Screenings
- ✓ Kidneys in the Classroom
- ✓ NKFK Golf Events
- ✓ Kidney Walk
- ✓ CKD Education Program
- ✓ Health Fairs

*To find out more about NKFK volunteer opportunities, please contact Laura Temple at 1-800-737-5433 or [temple@nkfk.org](mailto:temple@nkfk.org).*

## Going for the Gold: Team Kentucky Athlete Sallie Wilson

Sallie Wilson knows the true meaning of giving and receiving a special gift. In 1996, Sallie's son Jimmy died in a car accident five months after he received his driver's license. Jimmy had chosen to be an organ and tissue donor and his family honored his wishes.

After Jimmy's death, Sallie began participating in the US Transplant Games and became the Kentucky Donor Family Liaison. As the Donor Family Liaison, she encourages other donor families to attend the Donor Family Ceremony that honors all the families and their loved ones that chose to give life. The Ceremony held in Louisville in 2006 was especially meaningful to Sallie and her family. It gave Sallie's family a deeper understanding of the gift that Jimmy gave and affirmed to them that he continues to live on.

During the Louisville games, Sallie became very sick and was told that she needed a kidney transplant. Sallie, a diabetic, was told by her doctor that she also needed a new pancreas. In January 2007, Sallie was placed on the waiting list for a kidney/pancreas transplant. Nearly five weeks later, Sallie received a call that she had a potential donor and was transplanted the very next day. Sallie felt fortunate and blessed that her wait for a call was very short.

For the first time at the 2008 games, Sallie will participate as a Team Kentucky athlete and will compete in the bowling competition.



To learn more about the US Transplant Games and joining Team Kentucky, please contact Lisa Allgood, Team Manager, at 1-800-737-5433 or [lallgood@nkfk.org](mailto:lallgood@nkfk.org).

## Dean Kutz 5K Race Results

Over 150 runners and walkers joined Pat Day and Dean Kutz's family to celebrate the success of organ and tissue donation. The top winner was David Hamm of Louisville who came in at 16.28! Congratulations to David and all the other winners!

Top three male:

- David Hamm, Louisville
- Thomas Simpson, Louisville
- Jon Blinkhorne, Louisville

Top three female:

- Jennifer Rumage, Louisville
- Diana Okon, Prospect
- Trende Reed, Louisville

A special thanks to our sponsors Nephrology Associates of Kentuckiana, Jewish Hospital Transplant Center, Watson Pharmaceuticals, and Bill D'Antoni Promotional Products for your support!

## Keeping in Control (cont. from pg. 4)

Later, symptoms of kidney disease include edema (swelling of legs and ankles) and leg cramps. Changes in blood are found at this time, such as high levels of blood urea nitrogen (BUN is a substance your body makes when it uses protein) and lowering of the glomerular filtration rate (GFR), which identifies your current level of kidney function. You may also feel tired and weak, which may be a sign of anemia (low blood count). Other people may experience nausea and vomiting, or have itchy skin. Lastly, you may notice that you need less insulin or diabetes medication taken by mouth, since the diseased kidneys cannot break down or metabolize the insulin, and your body does not need as much.

### The Link Between Diabetes, Kidney and Heart Disease

The leading cause of death in the United States is heart disease; having both diabetes and kidney disease increases your risk. It is well known that high blood glucose levels that stay high over a period of time create changes in the blood vessels, leading eventually to heart disease. On the other hand, the relationship between kidney disease and heart disease is complex, and seems to be related to many factors, including anemia, malnutrition, or infections, as well as changes in bone metabolism (bone health).

### What Can You Do to Lower Your Risk?

Being involved in your treatment plan is essential! Checking your blood glucose levels at home and making sure that your hemoglobin A1C (a blood test that tells how well your blood glucose has been controlled over the last few months) is less than seven percent is first and foremost. Keeping in good glucose control is the best way to lower your risk of both kidney and heart disease. Follow-up with your primary care doctor or endocrinologist (a doctor specializing in diabetes) to make sure that you have your urine tested at least once a year to find any early changes in kidney function. You should also have your blood checked regularly for calcium, phosphorus and parathyroid hormone (bone hormone) to be sure that your bones are healthy. Other tests should include your total blood count (so that anemia can be treated early), as well as blood cholesterol type and level. Make sure you have your blood pressure checked often, and remember to take blood pressure medication if prescribed. Follow your diet for weight and blood glucose control, and get plenty of regular exercise. Avoid alcohol and cigarettes. If you have any of the symptoms identified above, you should see your doctor immediately

By Laura Byham-Gray, PhD, RD, CNSD  
Article from *Kidney Care*, Vol. 1, No.2, pg. 14-15

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## Hemodialysis Catheters (cont. from pg. 3)

### What can I do to keep my catheter working well?

1. Learn as much as possible about your prescribed treatment plan: your blood flow rate, how often and how long you need treatments.
2. Follow the treatment plan
  - Stay for your full treatment time
  - Keep your dialysis appointments
  - Arrive on time for your hemodialysis treatments
3. Ask your doctor how much dialysis you should be getting. Keep a record of **your Kt/V and URR numbers**. Talk to your dialysis team if your numbers are not as good as they should be.
4. Share your concerns with your doctor and dialysis team. You may want to ask them the following questions:
  - How can I tell if my catheter is not working?
  - What is the flow rate my doctor ordered me?
  - Why does the flow rate for my catheter need to be at this level?
  - If my flow rate should go down, when will I be given clot-dissolving medication?
  - Will the clot-dissolving medication interrupt my dialysis treatment? If so, what will happen to the rest of my treatment?
  - What are the signs and symptoms of infection?

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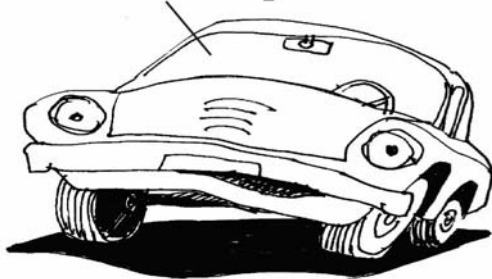
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