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KIDNEY CONCERNS

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Mi Italino Journale (My Italian Journal)

By: Carl Nettleton

I wonder how many times in a person's life do they have a defining and true happy moment? Well I can tell you one of mine. It was the day my wonderful wife Kathleen asked me about travelling and staying in Italy for 5 weeks! 5 weeks! At this point in time what was I supposed to say? Why of course we would be going. Kathleen's brother who is a Philosophy professor at a college in the northwest had a chance to teach a semester in Florence. Well, of course it was more of a feat to accomplish than I had expected.

After several weeks of planning mostly by my wife and Elise Nardie from Fresenius we were at a go stage. I can tell you I was very nervous about this trip. I have traveled on peritoneal

dialysis years ago to Mexico and that was not a very good experience. I developed peritonitis and landed several days in a Mexican hospital. That is a story in its self.

As we begin our European odyssey we have an entire suitcase of I.V. drugs for the entire 5 week stay. Even though we thought we had enough we were still short. Our trip began several weeks after September 11 and we had concerns with airport security which were misplaced. We had no problems going through any of security.

On the morning of flight, nerves were frayed and we were

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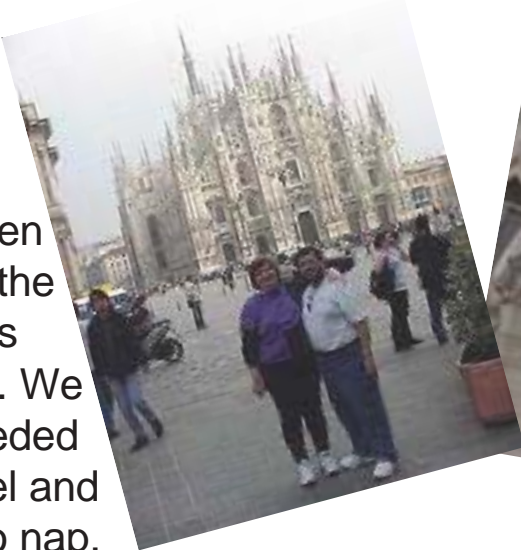
Mi Italino Journale (My Italian Journal) (Continued)

heightened sense of the journey at hand. Our ride was late which foretold future events. After a long flight across the Atlantic Ocean we crossed the Alps in Switzerland and we nearing our first stop, Milano, Italy. All of the planning was coming to the test.

It was a gray day as we arrived at the Milano airport. The temperature was cooler than expected. We had little time to wait

had to get to our hotel and then get to the dialysis center. We proceeded to hotel and tried to nap.

However, we were too keyed up. Then we headed to the dialysis unit, which was in a hospital setting. Since Kathleen had trained to stick the Life Site she had to prep for this. What a sight: Kathleen in full surgical garb. This was not expected and we were both exhausted and burning up from being on the run since we arrived. "Emodialysi" as it is called in Italy was a good experience. I will however not



schedule two dialysis treatments back to back again unless I have to.

The second treatment was a different story. While I went back to dialysis, which was a 20-minute ride by taxi from our hotel, Kathleen, her brother, sister-in-law and nieces went to Lake Como in the northwest corner of Italy for the day. With travelling overseas with family some

things need to be scheduled around dialysis. We have come to the realization that sometimes I must be left out of the touring. We made plans for me to meet them for dinner around the doumo (cathedral) after dialysis. Our hotel was several blocks away so this would not be a problem. The second dialysis went worse than the

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Mi Italino Journale (My Italian Journal) (Continued)

tries to access the Life Site device. There was this LITTLE problem of language. I had learned several words and phrases before leaving New Orleans, which helped. This threw off our meeting plans. So I had to rush to dinner with jet lag and being washed out from dialysis. At the restaurant we had a good meal overlooking the Doumo Square in Milano.

On day 3 we were playing tourist in Milan. We saw more of the sights in this wonderful city. We started off lunching in a small café across from the church that contains the original fresco "The Last Supper of Christ" by Leonardo da Vinci. It was absolutely marvelous. It was



turned in to a stable. Also at one time it was a cloister with monks residing there. To help them with hallways and stuff they cut a doorway through Christ's feet. What an awesome sight.

We had a wonderful time in the city. Milano is known best for its fashion industry. I do believe that there are many wonderful sights to see. Plan to see lots of time beyond dialysis to see the sights. One more night and we move on to our next location. With that we have more sights to see and another page in this journale italiano. Arrivederci! **Next stop: Florence!!!**

Central Oklahoma Kidney Club

This past May our Patient Advisory Committee chairperson, Carolyn Wilson, hosted the first Central Oklahoma Kidney Club function. Carolyn has had the idea for the club for about a year. She decided to bring the club to reality this spring. She decided on a location to meet and produced a flyer that she distributed to the dialysis centers around the Oklahoma City area. Carolyn stated that the social worker were very receptive to the idea and willing to get the information out to their patients.

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FIGHT FLU & PNEUMONIA

Influenza, also called the “flu,” is a highly contagious respiratory infection. Flu can cause fever, chills, headache, dry cough, runny or stuffy nose, sore throat, and muscle aches. Unlike other common respiratory infections such as the common cold, influenza can cause extreme fatigue lasting several days to more than a week. Although nausea, vomiting and diarrhea can sometimes accompany influenza infection, especially in children, gastrointestinal symptoms are rarely prominent. The illness that people often call “stomach flu” is not influenza.

The “flu” is spread easily from person to person primarily when an infected person coughs or sneezes. After a person has been infected with the virus, symptoms usually appear within 2 to 4 days. The infection is often considered contagious for another 3 to 4 days after symptoms appear. Each year, an estimated 10 to 20 percent of the population contracts influenza.

Who should get a flu shot?

The following groups are at higher risk for having medical complications from influenza and should receive the flu shot:

- **People 65 years of age and older;**
- **Residents of nursing homes and other long-term care facilities housing anyone of any age with chronic medical conditions;**
- People with chronic disorders of the lungs or heart, such as asthma, emphysema, chronic bronchitis, or cystic fibrosis;
- People who are less able to fight infections because of a disease they are born with; infection with the Human Immunodeficiency Virus (HIV); **treatment with drugs such as long-term steroids;** and/or treatment for cancer with x-rays or drugs;
- People who have required regular medical follow-up or hospitalization during the preceding year because of **chronic metabolic diseases (including diabetes mellitus), kidney diseases** and blood cell diseases such as sickle cell anemia;
- Children and teenagers 6 months to 18 years of age on long-term aspirin treatment, who, if they catch influenza, could develop Reye’s Syndrome which causes coma, liver damage, and death; and
- Women who will be 6 or more months pregnant or who will have just delivered during the influenza season;
- In addition, to help protect high-risk people from exposure to influenza, these two groups should receive

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FIGHT FLU & PNEUMONIA (Continued)

Who should get a flu shot?

- **Health care workers** (doctors, nurses, hospital and medical office staff, personnel of nursing homes or chronic care facilities) in contact with people in high-risk groups
- **People—including children—who live with persons in high-risk groups for flu (household contacts)**

Your flu shot is free if you are enrolled in Medicare Part B and your health care provider accepts Medicare assignment. The Medicare program covers the flu shot and the cost of administration for beneficiaries. Medicare recipients do not have to pay coinsurance or a deductible under the flu shot benefit. For HMO members, most must get their flu shot from their HMO. Check with your HMO first. For those covered under Medicaid, check first with your local social services or health department. Many private health insurance plans also cover flu vaccine.

You can get a flu shot at your doctor's office. You may also be able to get a flu shot from your dialysis unit, your local health department or from other health-care providers. Medicare Part B will pay for the shot no matter where you get it, as long as the health care provider agrees not to charge you more than Medicare pays. To find local health care providers who accept Medicare as payment in full for the flu shot, you can contact your Medicare Carrier (Arkansas 1-800-482-5525, Louisiana 1-800-462-9666, Oklahoma 1-800-522-9079). Ask the person giving the shot if there will be any cost.

Here are 5 reasons why:

1. **The flu is serious business.** Influenza (commonly called the flu) is not just a runny nose or upset stomach. It is a serious illness that can lead to pneumonia. At least 45,000 Americans die each year from influenza and pneumonia, the sixth leading cause of death in the United States. 90% of these deaths are among people 65 years of age or over.
2. **The flu can be very dangerous for people 65 and older.** People 65 years of age or over should get a flu shot, unless they are allergic to eggs. It's also important for those with a chronic illness, and for those who spend a lot of time around sick or elderly people.
3. **A flu shot is safe and helps you protect others.** Flu shots are safe and effective. And when you get a flu shot, you help yourself and those around you.

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FIGHT FLU & PNEUMONIA (Continued)

By avoiding the flu, you avoid giving it to friends and family.

4. **The flu can make you “blue.”** Even if you don't develop serious problems, the flu can make you feel bad for days. It can cause fever, chills, headache, cough and sore muscles.
5. **Medicare Part B pays for it.** When you have Medicare Part B and you get your flu shot from a Medicare provider, you pay no “coinsurance or deductible.” Also, if the person giving the shot agrees not to charge more than the amount Medicare pays, you pay nothing. Medicare Part B also pays for the pneumococcal vaccination. Ask your health care provider about both of these vaccines. (Note: HMO members may be required to get shots from their HMO. Ask your HMO for more information.)

Influenza is most common in the U.S. from December to April, so it's best to get the flu shot from October through mid-November. The vaccine begins to protect you after 1 to 2 weeks.

Do I need a flu shot every year? **YES.** Although only a few different influenza viruses circulate at any given time, people continue to become ill with the flu throughout their lives. The reason for this continuing susceptibility is that influenza viruses are continually changing, usually as a result of mutations in the viral genes. Each year the vaccine is updated to include the most current influenza virus strains. The fact that influenza viruses continually change is one reason a vaccine must be taken every year. Another reason is that antibody produced by the person in response to the vaccine declines over time, and antibody levels are often low one year after vaccination.

PNEUMONIA: Some of these same groups of people should receive one-time vaccination for pneumococcal pneumonia. The groups at higher risk for invasive pneumococcal disease include those over 64 years old and others with increased susceptibility to this infection, such as patients with HIV, splenectomy, sickle cell disease, **diabetes mellitus**, chronic disorders of the lungs or heart, and cirrhosis. You can receive this vaccination the same day you get the flu shot. For those covered under Medicare Part B, it is also free when ordered by a physician. However, the pneumococcal vaccine can be given at any time of year and is a once-in-a-lifetime vaccination for most people. If you don't have a spleen, or if you have **chronic renal failure**, HIV, cancer, or other diseases that compromise your immune system, **ask your health care provider if a second pneumococcal vaccination is necessary.** ♦

Central Oklahoma Kidney Club (Continued)

wanted to have events that brought people out to socialize and to enjoy other people's company, to be more than a dialysis patient.

"Just to be able to relax" was the overall impression of the evening spent by the attendees of the first social event of the Central Oklahoma Kidney Club. The group met at Russell's at the Marriott Hotel on the evening of May 15, 2002. The function began at 6:00PM and lasted until the last attendee left for home later in the evening. For several hours there were no doctors, no machines, no medicine, no having to be a dialysis patient, "just plain ol hanging out and having a good time!!" Carolyn's goal was to put something together other than the conventional support group setting, to be a more fun and stress free atmosphere. "It just seems to me that dialysis patients spend too much time dwelling on dialysis. It doesn't mean you cannot do fun things."

The evening of the first meeting came and fourteen people attended the function. The attendees included patients, spouses and significant others. There was an all you can eat buffet of shrimp, chicken strips, vegetables, bread and dessert for \$5.00. Everyone had a great time. One couple stated it was the first time they had been out other than going to dialysis in over a year. There was an overall interest in continuing the group. Attendees made suggestions for additional outings such as sporting events, concerts, bowling, picnics, bus tours, and casino night at a local Indian gaming facility. The attendees suggested they try to have an activity once a month. The next activity scheduled is a trolley tour of Oklahoma City and dinner in Bricktown.

Carolyn was pleased with the success of the first event. She stated she learned some things to take into account for future outings such as insuring wheelchair access and food items for diabetic patients. Carolyn reported other dialysis patients who want to become involved with the club have contacted her.

The Central Oklahoma Kidney Club would like you to join them for future events. If you are interested please contact your facility social worker or Carolyn Wilson at 405-601-7689. If you are interested in starting up your own club contact Carolyn Wilson and she will share her experience with you on getting things started.

When you start your new club contact the Kidney Concerns newsletter at 1.800.472.8664 and we will publish it in the next edition of the newsletter. Good luck and enjoy! ♦

American Kidney Fund RPAP Fall Enrollment

The Renagel Patient Assistance Program (RPAPsm) sponsored by the American Kidney Fund (ADF) and Genezyme Corporation provides a free six-month supply of Renagel® to qualified, low-income hemodialysis patients. Fall enrollment in RPAPsm is open September 3 through October 15, 2002. Participation is restricted to low-income, uninsured or underinsured HEMODIALYSIS patients with no other means of obtaining Renagel® 800mg tablets directly or indirectly through insurance, federal, state or local programs. (Note: Renagel® is not approved for use by peritoneal dialysis patients.)

A completed application and prescription from your nephrologist for a six month supply of medication is needed to process your application. An application form can be forwarded to your facility social worker by contacting the American Kidney Fund at 1-800-638-8299 extension 6674, off the web site www.kidneyfund.org or a request can be made by e-mail to: gwen_dewberry@akfinc.org. If eligible, the medication will be shipped around November 1, 2002 directly to the patient's dialysis center or nephrologist's office in care of the designated contact person. AKF will endeavor to serve all qualified patients who are referred to RPAPsm. However, as with all indigent pharmacy programs, demand is likely to exceed product supply. Genezyme is continuing to support RPAP sm for the foreseeable future.

National Kidney Foundation of Oklahoma (NKFO)

The NKFO has just released the application and guidelines for the Oklahoma Kidney Health Revolving Fund for the contract period of July 1, 2002 to June 30, 2003. Your facility social worker should have received this packet. If your social worker has not received this information, they can contact Jody Kodaseet at 1-800-946-6405 and request one.

Nestle Clinical Nutrition is pleased to announced that their products are now available through the Oklahoma Kidney Revolving Fund. Application can be made through the NKFO. For additional information contact Jody Kodaseet at 1-800-946-6405. Contact Catherine Quinlan, District Manager, of Nestle Clinical Nutrition for additional available programs if you do not qualify for the Oklahoma Kidney Revolving Fund. She can be reached at 1-800-285-2889 extension 1193. ♦



KIDNEY KONCERNS NEEDS YOU!

Kidney Concerns is published quarterly by the Patient Advisory Committee of ESRD Network 13. The next edition is scheduled for FALL. To make this newsletter a success, we need your assistance. If you are interested in contributing to this newsletter, please send any articles, materials and/or ideas to:

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