



Aaron McCargo
Bold flavors for
restricted diets



Shad Ireland
Defying the
odds on dialysis

**MEDIA
PLANET**

April 2011

KIDNEY HEALTH



SPREADING THE WORD

Denise Richards inspires and educates others about kidney cancer after losing her mother to this deadly disease

PHOTO: STARTRAKSPHOTO.COM



No one is immune to the risk of venous needle dislodgement. It can happen at any facility, to any nurse or patient.

(J. Hurst, RN, CLNC)

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CHALLENGES

Understanding the kidneys' major role in overall health, knowing risk factors for these conditions and **taking the time to get screened** can make a difference in the lives and health of thousands.

TIP

1

GET SCREENED
REGULARLY

Protect your kidneys: It's vital

Dolores Bisagni suffered from high blood pressure for years. Until her kidneys failed and she began dialysis, she never realized there was a connection—that the high blood pressure was damaging her kidneys. She didn't consider checking her kidney function and her doctor never suggested it.

Dolores isn't alone in ignoring her kidneys. Unless they're not working, most people don't focus on how integral the kidneys are to the functioning of the rest of the body and what to do to protect them. Although they are fist-sized, the kidneys multi-task 24/7 as they filter toxins from the blood, activate Vitamin D to maintain healthy bones and release the hormone that regu-

lates blood pressure.

Chronic kidney disease (CKD) occurs when the kidneys are damaged and high levels of waste begin to accumulate in the blood. Today, 26 million Americans have chronic kidney disease, yet with early detection and control of risk factors such as high blood pressure and diabetes, more than two-thirds of new cases of kidney failure are preventable. Screening for those at risk is essential to finding, managing and treating the disease.

Kidney cancer is a related condition that is also often found in the later stages. Symptoms include blood in the urine or a lump in the back. Smoking, obesity, kidney failure and contact with harmful chemicals are all risk factors that can be avoided or controlled. Kidney cancer is treated by surgically removing all or part of the kidney,



Dr. Lynda Szczech
President,
National Kidney
Foundation

"The medical community is turning kidney disease and kidney cancer into treatable and in some cases, preventable conditions."

radiation and chemotherapy. It is serious, but the earlier it is found, the greater the chance that it can be cured. A number of new drugs are now available that show promise in managing advanced kidney cancer.

The medical community is turning kidney disease and kidney cancer into treatable and in some cases, preventable conditions. The National Kidney Foundation offers free screenings to those at risk through its Kidney Early Evaluation Program (KEEP). For those with symptoms of kidney cancer, doctors can detect it through tests performed in their office. The call to action is clear. Understanding the kidneys' major role in overall health, knowing risk factors for these conditions and taking the time to get screened can make a difference in the lives and health of thousands.



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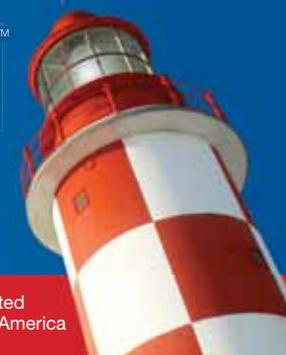
FREE!

Information for people with kidney disease



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INSPIRATION



A DAY IN THE PARK
Denise Richards spends time with her daughters Sam and Lola.
PHOTO: STARTRAKSPHOTO.COM



Question: What is the biggest lesson actress Denise Richards took from her mother's struggle with kidney cancer?

Answer: Be your own advocate.

TIP

2

KNOW YOUR
OWN BODY

Putting the spotlight on kidney cancer

LEADER TO LEADER

Kidney cancer (or renal cell carcinoma) is rare but will still affect more than 50,000 people this year alone.

"Of everyone who has cancer, only three percent of those cases are kidney cancer," says Denise Richards, whose mother succumbed to the disease. "Of those, 90 percent are men. So when my mom told me that was her diagnosis, I was shocked."

Even more shocking, she says, was

how little was known about the disease and its potential treatments. At the time her mother, Joni, was diagnosed, there was no treatment available. By the time the disease came out of remission 18 months later, "She was able to try a couple of drugs that had just been approved, and we were waiting for another one to gain approval when she passed away in 2007 at age 54."

In addition to filming public service awareness ads, Richards is actively involved in fundraising for the Kidney Cancer Association. She encourages everyone to become more involved.



"If you're diagnosed with kidney cancer, fight. Don't give up, don't lose hope."

"It's hard to raise awareness of this disease because it is so rare," she says. "When you're in the public eye, the biggest gift is to be a voice to raise awareness." She wants to help raise enough funds to help find ways to eliminate the cancer altogether.

Richards says while her mother was sick, she never once complained or asked, "why me?"

"She really showed me that life is a gift. Her will to live was her grandkids. I never had to say, 'C'mon mom.' She really inspired us. Anyone that's gone through cancer personally, it's such a

journey."

The biggest lesson Richards took from her mother's struggle? Be your own advocate.

"Know your own body. When something's not right, don't take 'no' for an answer," she says. "If you're diagnosed with kidney cancer, fight. Don't give up, don't lose hope."

MICHELLE DALTON

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INSPIRATION



FAMILY TIME
Denise spends quality time with her father Irv and her daughters.
PHOTO: STARTRAKSPHOTO.COM

INSIGHT

↓ TIPS FOR PAIRED
EXCHANGE**Who are the best candidates for paired exchange?**

■ Patients with incompatible or poorly compatible donors.

What donor characteristics matter the most?

■ Age of donor (under 50 preferable)
■ Donor blood type. "O" donors are 10 times more powerful than other types.

Choice of transplant center

Many transplant centers provide paired exchange services but the differences in performance and outcomes vary. A good transplant center is determined by:

■ How many active incompatible pairs are in their pool
■ How many exchange transplants the center completed in the last 12 months
■ What percentage of the center's incompatible pool have been transplanted since the program started.

As a point of reference:

■ NKR's average transplant wait time is between three and 10 months. The national average wait time is approximately five years.

! **For further information and a free booklet on "Finding a Kidney" go to:**
www.kidneyregistry.org

Surviving kidney cancer

Last year, more than 1.3 million new cancers were diagnosed in the United States.

According to the American Cancer Society, more than 50,000 of these individuals were diagnosed with kidney cancer. But there is hope: More than 200,000 kidney cancer survivors are living in the United States right now. Recent advances in diagnosis, surgical procedures, and treatment options will allow even more patients to live with the disease, continuing to maintain their normal schedules and lifestyles.

This marks the beginning of an important new era for kidney cancer patients, with the recent approval by the Food and Drug Administration (FDA) of new drugs to treat their advanced disease. These drugs target cancer cells in different ways than current drugs

used to treat kidney cancer, and will have a very positive impact for many patients. Continued research efforts will improve our understanding of the disease even more and increase the options available to fight kidney cancer.

Time to start healing

Each person diagnosed with kidney cancer goes through the shock of being told they have the disease. It is a difficult experience. Feelings of shock, loneliness, alienation, fear, frustration, anger, and hurt are natural parts of any life-threatening illness. It is okay to have these feelings, to cry, and to be upset.

After the shock of diagnosis, it's time to start healing. Don't let your emotions and your cancer destroy your home life or relations with the important people in your life. They may also be hurting

inside, fearing for you and themselves. When cancer strikes, it hits the whole family. Your friends and family are rooting for you.

Sometimes kidney cancer is called by its medical name, renal cell carcinoma. Kidney cancer includes various forms, including clear cell, papillary, sarcomatoid, transitional cell, and others.

Some patients are diagnosed before the cancer has metastasized (spread) to other parts of the body, while others have metastatic disease when their cancer is initially diagnosed. Surgery may be the first course of treatment, or systemic treatment—that is, a treatment that is injected into the bloodstream or swallowed—may be recommended prior to surgery (though this tends to be rare). If surgery is done first, additional treatment may be recommended

to delay the cancer's return, or to treat metastatic disease.

The choice of treatment, where treatment is administered, the frequency of check-ups, and many other aspects of the management of your disease are determined with input from you. The more you know, the better your decisions, and the more you can feel in control of your illness. Knowledge about your disease will help you better communicate with your doctor and nurse, and increase your confidence in the treatment that you receive. Getting smarter about kidney cancer is an important step in effectively fighting your disease.

CONTRIBUTED BY

KIDNEY CANCER ASSOCIATION

For more information, visit
www.kidneycancer.org
editorial@mediaplanet.com

Kidney transplants: The gift of life

There are almost 53,000 people waiting for a kidney transplant, but only 16,500 are performed each year, according to the United Network for Organ Sharing. Once donated, kidneys can function for about 16 years.

Wait times could improve more, according to the Cleveland Clinic's

"Living donors are heroes in transplantation."

Dr. Titte Srinivas. Blood type compatibility, previous pregnancies or blood transfusions all affect wait list times. Socioeconomic factors also play a role—older, poorer minorities and those without healthcare wait the longest.

"More than half the people over age 60 will not live to see a transplant," Dr. Srinivas says. He advises getting on a wait list as soon as you're diagnosed.

"Living donors are heroes in transplantation," he says. Paired donation matches one incompatible living donor/recipient pair to another pair in the same situation.

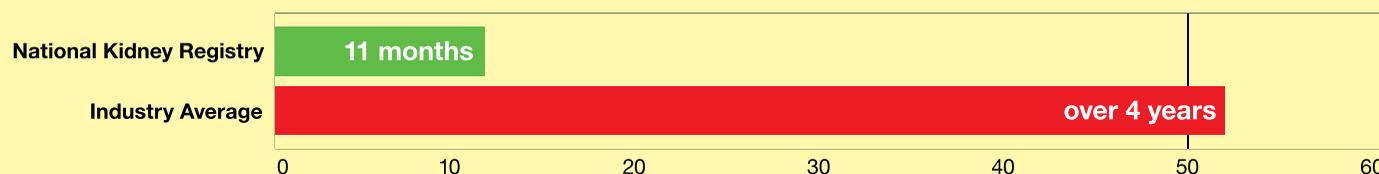
Other advances include nocturnal dialysis at sleep clinics, home dialysis, and expanded criteria for kidney donation acceptance.

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Tired of Dialysis?

Average Wait Time In Paired Exchange



NATIONAL KIDNEY REGISTRY
FACILITATING LIVING DONOR TRANSPLANTS

www.kidneyregistry.org

* Average wait time = pool size / transplant run rate x 12 (months). Pool size is the current active unmatched recipients in the system. Transplant run rate is the number of transplants facilitated over the past 3 months X 4 (annualized)



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INSIGHT

Don't "a-salt" the kidneys

When it comes to dietary sodium, less is certainly best, yet Americans today consume 50 percent more than the recommended daily quantities of sodium.

According to the National Kidney Foundation, diets high in sodium increase blood pressure levels. High blood pressure damages the kidneys over time, and is a leading cause of kidney failure.

"As high blood pressure rates have increased, kidney disease has spiraled to the point where it now affects 26 million Americans. Reducing salt intake can lower blood pressure and that may be beneficial in easing the burden of chronic kidney disease in this country," says Dr. Joseph Vassalotti, Chief Medical Officer of the



PHOTO: ISTOCKPHOTO.COM

National Kidney Foundation.

The National Kidney Foundation offers the best tips

to help reduce salt intake:

- Stick to fresh meats, rather than packaged products, which are high in sodium.

- Fresh fruits and vegetables are low in sodium. Canned and frozen fruits and veggies are typically low-salt as well. But watch out for frozen vegetables that contain added seasoning or sauces, which may contain lots of extra salt.

- Make reading food labels a habit. Sodium content is always listed on food labels.

- Sodium content can vary from brand to brand, so compare and choose the lowest sodium product.

- Avoid spices and seasonings that contain added sodium, for example garlic salt. Pick garlic powder instead.

- Many restaurants list the sodium content of their products on their Web sites, so do your homework before dining out.

- When dining out, you can also request that your food be prepared

without any added salt.

- Try to spread your sodium intake out throughout the day; it's easier on your kidneys than eating lots of salt all at once.

- You can learn to adjust to eating less salt. It typically takes about six to eight weeks on a low-sodium diet to get used to it. After that, you'll actually find it harder to eat very salty foods, like potato chips.

For more information:

The National Kidney Foundation is offering a free screenings for those at risk around the country through its Kidney Early Evaluation Program (KEEP). To find a screening near you or for more information on salt reduction, visit www.kidney.org.



A FUTURE ROLE FOR NUTRACEUTICALS IN CHRONIC KIDNEY DISEASE?

Nearly one in eight people in the United States suffer from chronic kidney disease (CKD). If untreated, CKD can slowly progress and as it advances, leads to the need for dialysis or kidney transplantation.



Dr. Allen Nissenon
Emeritus Professor of Medicine, David Geffen School of Medicine at UCLA; Chief Medical Officer, DaVita Inc.

CKD patients experience increasing symptoms as the disease progresses, with fatigue, weakness, inability to concentrate, loss of libido prominent. Most patients develop CKD because of diabetes, hypertension, or a combination of these factors. CKD patients represent only one percent of all Medicare patients but consume over 10 percent of all Medicare dollars.

It is now known that CKD patients have an increase in inflammation throughout the body resulting in an increased propensity to heart attacks,

strokes, and lower limb amputations. Research has greatly increased the understanding of the mechanisms involved in the inflammatory process. Unfortunately, therapeutic approaches to preventing or treating the inflammation have lagged behind, although considerable research effort is ongoing in this area.

Nutraceuticals are foods or food products that provide health benefits. Unlike medications, either over the counter or prescription, nutraceuticals are

available to the public without the same oversight requirements or FDA approval. They can be made readily available upon development, but consumers must be cautious to be sure that the claims made for safety and efficacy can be substantiated with solid evidence.

A number of nutraceuticals have now been identified to have anti-inflammatory properties and this has raised the exciting possibility that treatment of the inflammatory component of CKD may be possible. A number of nutraceutical companies are now undertaking rigorous clinical research to test the value of these substances scientifically. If this research shows that nutraceuticals can provide safe and effective anti-inflammatory therapy, longer lives and higher quality of life may be possible for CKD where inflammation is a key contributor to poor outcomes.

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What do you need to know about MV-ONE and what it can do for you.

FACT ONE - Multiple factors such as hemodialysis, calcium phosphate, infections and ischemia are known to cause inflammation, which is associated with higher rates of mortality and decreased quality of life.*

FACT TWO - Chronic inflammation is associated with higher mortality-related issues such as mortality and cardiovascular disease in individuals with chronic kidney disease.*

FACT THREE - Inflammation has been positively associated with higher (SA) scores which may result in suboptimal outcomes and significantly higher costs.*

FACT FOUR - A number of recently published clinical studies have reported use of certain antioxidants is associated with a significant reduction of inflammation biomarkers such as C-reactive protein.*

*Wolfe et al, 2010, meta-analysis

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Why do you need MV-ONE?

MV-ONE is the first in a series of multivitamin supplements designed by nephrologists and nutritionists to address the unique needs of dialysis patients. MV-ONE is designed to be used as an adjunct to existing therapies to help tackle common clinical challenges associated with inflammation.

✓ **Innovative** - A specially designed multivitamin supplement for people affected with chronic kidney disease.

✓ **Convenient** - Less pill burden. Now supplied in two convenient forms.

✓ **Nutritional** - Daily amounts help with dietary supplementation - great value.

✓ **Confidence** - Increasing body of clinical evidence to show benefits.

✓ **Cost-Effective** - An inexpensive multivitamin supplement to help tackle the high costs associated with inflammation.

RECIPE

RENAL RECIPE

 Fresenius Medical Care North America, the nation's leading network of dialysis facilities, has partnered with Aaron McCargo Jr., star of Food Network's "Big Daddy's House," to create flavorful, satisfying meals for people with kidney failure.



ZESTY AND HEALTHY LEMON HERBED CHICKEN is the perfect meal for dialysis patients—and the entire family. PHOTOS: JUAN CARLOS MORALES

LOW-SODIUM CRUNCHY LEMON HERBED CHICKEN

Ingredients:

- 6 (2-ounce) chicken tenders
- 4 tablespoons unsalted butter (half chilled)
- ½ cup Japanese bread crumbs (Panko)
- ¼ cup of lemon juice, plus zest of one lemon
- 1 egg yolk
- 1 tablespoon fresh chopped oregano
- 1 tablespoon fresh chopped basil
- 1 tablespoon fresh chopped thyme
- 3 tablespoons water (1 tablespoon for the egg wash, 2 tablespoons for the finishing of the sauce)

Preparation:

1. Pre-heat 2 tablespoons of butter on medium low heat.
2. Add zest of one lemon and half the herbs to bread crumbs, save the rest for lemon sauce.

3. Beat egg yolk with 1 tablespoon water.

4. Place chicken tenders between two pieces of plastic wrap and pound with small groove side of mallet until thin, but not ripped.

5. Dip chicken in egg wash mixture then in herbed breadcrumb mixture until coated.

6. Place breaded chicken in sauté pan with melted butter only after increasing heat to medium.

7. Cook chicken, approximately 2-3 minutes each side.

8. Remove chicken and place on sheet tray to rest.

9. In same pan add remaining herbs, salt, and lemon juice, then heat until simmering.

10. Turn off heat; cube remaining 2 tablespoons of chilled butter and add to sauce (stir vigorously).

11. Slice the chicken on the bias.

12. Placed sliced chicken on a plate, pour the sauce over the top, and add garnishes.

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To see how it works, watch a detailed animation at www.youtube.com/KIBOWBIOTECH.

* These statements have not been evaluated by the US Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.

Reference: 1. Ranganathan N, Ranganathan P, Friedman EA, et al. Pilot study of probiotic dietary supplementation for promoting healthy kidney function in patients with chronic kidney disease. *Adv Ther.* 2010;27(9):634-647.

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INSPIRATION



A DIALYSIS PATIENT SINCE THE AGE OF 10, Shad Ireland has grabbed life by the handlebars, refusing to allow his disease to limit his abilities.
PHOTO: COURTESY OF BEN IRELAND

Overcoming the obstacles

■ **Question:** What is Shad Ireland's recipe for success?
■ **Answer:** Deal, accept, live.

CHANGE

Deal, accept, live. Those three little words continually provide motivation for two-time kidney recipient and Ironman competitor Shad Ireland

Typical descriptions of professional athletes usually don't include diagnoses of childhood kidney disease or double kidney transplants; but Shad Ireland is anything but typical. Once given only six months to live and having wasted away to a mere 75 pounds, Ireland found inspiration when watching the Ironman competition on TV. He saw athletes "doing the impossible, and I wanted what they had," he says. Ignoring the physicians who told him he'd never compete, within 24 months Ireland had bounced back and was living healthily on dialysis.

But that was not enough: In

"It's been a dream of mine since I was a kid to be an athlete. And now, here I am, living that dream. I'm living successfully with kidney disease."

2004, he became the first dialysis patient to finish an Ironman competition (running, swimming, and biking for a combined 140.6 miles). As a national spokesperson for Fresenius Medical Care and home dialysis, Ireland spent 2009 biking 4,639 miles across the country to raise awareness about kidney disease and its lack of limitations.

"Inspiration comes in all different shapes, sizes, and forms," he says. "One of the things I say to patients across the country is that you have to believe in the possibility of it all."

Ireland's current goal is to "not only inspire, but to provide the tools and resources to give other patients a format to follow." His belief that kidney disease "does not limit your ability" comes through in each of his clinic visits. He knows that initial diagnosis may seem overwhelming, but that it's possible to live a normal and even active lifestyle on dialysis. By focusing on what patients can do instead of what they can't is a message Ireland will continue to spread.

"It's been a dream of mine since I was a kid to be an athlete. And now, here I am, living that dream. I'm living successfully with kidney disease," he says.

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NEWS

END-STAGE RENAL DISEASE: EXPLORING THE OPTIONS

TIP
3
CHOOSE TREATMENT THAT FITS YOUR LIFESTYLE

End-stage renal failure (ESRD) is a devastating health condition affecting 500,000 Americans.

Because the kidneys perform many life-sustaining functions, patients reaching this threshold of chronic kidney disease must eventually choose from a growing array of options for kidney replacement.

Hemodialysis (HD) is the most common form of renal replacement, which relies on a highly sophisticated machine to filter the blood. This form of dialysis has seen a fairly recent proliferation in options, both in terms of intensity and in venue (at home vs. in hospital). Home hemodialysis



PHOTO: NATIONAL KIDNEY FOUNDATION

has allowed patients with ESRD to enhance their treatment effectiveness and has restored many patients' quality of life. While considerable obstacles remain in this treatment area, including funding issues and various safety concerns

(namely, venal needle dislodgement, which has been recognized by the Renal Physicians Association as one of the top areas needing safety improvement), there is tremendous optimism regarding this burgeoning therapy.

Peritoneal dialysis (PD) is home-based therapy that offers clinical outcomes similar to conventional hemodialysis but with some definite lifestyle advantages. In PD, the abdomen is filled with dialysate, which draws extra fluid and waste products out of the blood. The vast majority of care for PD patients takes place outside the clinical setting and allows for considerable portability.

The ideal option is renal transplantation, which is associated with better life expectancy and quality of life. As a result, demand for this procedure has led to a deficit of organs available from deceased donors. Live donation is a superior alternative that is

associated with even better outcomes. Over the last decade, new strategies have emerged to expand the supply, including paired exchange, which allows donor pairs who are not compatible with one another to essentially 'swap' kidneys with other pairs whom they have never met. Paired exchange has evolved to allow long donor-recipient chains throughout the country.

DR. JORDAN WEINSTEIN, MD

Division of Nephrology, St. Michael's Hospital; Assistant Professor of Medicine, University of Toronto; Founder and Director, UKidney.com
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Finding freedom with at-home dialysis

It is possible to have a fulfilling life if you require dialysis.

How? Learn all you can, stay positive, take an active role in your care, and choose a dialysis treatment that fits your preferred lifestyle. You have options!

■ Peritoneal dialysis (PD) is a needle-free, easy to learn, portable home treatment. PD is gentle,



RECLAIM YOUR LIFE
With new portable dialysis equipment, you can receive treatment in the comfort of your own home.
PHOTO: NXSTAGE MEDICAL, INC.

work-friendly, and with treatment each day—or at night while you sleep—you will feel the positive effects.

■ Hemodialysis is most often done in a clinic. But did you know that some clinics offer nocturnal hemodialysis three times a week (for eight hours) while you sleep? The long treatments are easy on your heart. And, they don't disrupt your day!

■ You can do home hemodialysis on your own schedule, and you don't have to purchase the machine. The dialysis clinic will provide it and train you on proper usage. Some people do short daily hemodialysis five to six days a week*, others opt for nocturnal treatments. Survival with these options is about the same as deceased donor transplant.

Your choice of dialysis can help

you live the life you want to have. To learn more about home dialysis options, visit Home Dialysis Central at www.homedialysis.org.

*Medicare routinely pays for three treatments/week.

DORI SCHATELL

Executive Director, Medical Education Institute, Inc.
editorial@mediaplanet.com

The quote is 'there is no place like home' and you can't sum it up any better than that.

This is my life, this is how I'm going to keep living my life, and this is how I'll see my kids grow.

- Duane, 2 year NxStage Patient



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