

access

PATIENT NEWSLETTER | JUL / AUG 2016



CDC

Centers for Dialysis Care

Well Wishes	3	Artist in Focus	9
Don't Get Flooded by Fluids.....	4	Storm Watch.....	10
My Choice	5	Do Food Expiration Dates Really Matter?	11
Healthy Feet	7	Healthy Eating.....	12
For the Fun of It	8		

access

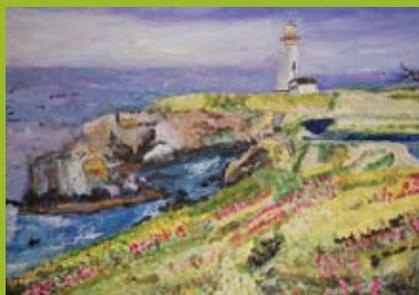
Centers for Dialysis Care Newsletter
July / August 2016

Editor: Pamela S. Kent
Patient Education Coordinator
(216) 903-2004
Design: Impel Creative

CDC

Centers for Dialysis Care

The Centers for Dialysis Care (CDC) has provided the information in this newsletter to inform you and your loved ones.



On the Cover
Lighting the Way, Acrylics
Karen Lawler, Euclid CDC



The Centers for Dialysis Care (CDC) is a leader in providing patient-centered quality care to all individuals with kidney disease.

News & Notes

Travel Reminder: Planning a Trip?

Please remember, when preparing to travel, that we ask for a 30 day notice to assure that we can help you find a center most convenient to your destination and able to accommodate your schedule.

As a visitor, or transient patient, the facility requires that we fax clinical information prior to your visit. The facility may request that you have had lab tests, a chest x-ray, or physical exam within a certain time period, which might need to be done before you travel.

A thirty day notice will ensure that the facility PSR or Social Worker has enough time to compile and fax the information. Of course, if there is an emergency that requires you to travel, such as a funeral, those arrangements will be made as quickly as possible. Your cooperation with this timeline will help us ensure that your travel is worry-free!

If you have any questions, please contact your facility PSR or Social Worker.



Well Wishes



Diane P. Wish

I still can't believe we are the NBA Champions! The 93-89 Game 7 win marked the first time in NBA history that any team has overcome a 3-1 deficit. The Cavs series reminds me to never lose hope. MiraCLEs do happen. Summer has officially arrived with some warm weather. Hopefully the weather will be nice enough to spend time outside yet remain cool enough at night to be enjoyable. With summer here and school out, some of you may be considering traveling out of town to visit family and friends. Please contact your social worker as soon as possible so he or she can make all of the necessary arrangements for you to dialyze elsewhere.



Whether you do dialysis at home or go to a dialysis facility, working with your dialysis staff is very important. Because you spend many hours doing dialysis, it is vital that you feel safe and comfortable during your treatments. Communication — being able to listen and to talk about thoughts and feelings is usually not easy. It is not surprising, therefore, that there could be communication problems at the dialysis clinic.

Dialysis staff may not be able to address your needs if there is not clear communication. Both staff and patients can learn to improve communication. But wait — you may be asking, "Why should I learn how to communicate better with my dialysis staff? Isn't it the staff's responsibility to learn to communicate better with me?" Yes — staff members can learn to improve communication skills; however, communication is a two-way street. It is never just one person's responsibility. More importantly, it is to your

responsibility to learn to communicate your physical, emotional and dialysis needs to your staff in a way most likely to get those needs met.

If you have problems communicating with someone at the clinic, such as your Kidney Doctor, Dialysis Nurse or Dialysis Technician, ask to speak to your Social Worker. Your Social Worker is trained in communication and it is his or her job to be part of your support system at the clinic. If you are still unhappy, other ways to solve the problem may be speaking to your Facility Manager or the Director of Clinical Operations.

Also, remember to tell us when you are happy about the care you are receiving. Last month I received a call from a patient who used to dialyze at CDC, moved away for several years and then returned to CDC. She called to give me a compliment about the care she is receiving from the staff at CDC. She said that usually people call

to complain but she wanted me to know what good and kind workers she has at CDC. I really appreciated hearing how she felt. I assure you that the staff would like to hear from you as well. Like most people, if they hear kind words most of the time that when they have something to complain about people will listen more and try harder to please.

I hope that you enjoy your summer and go CAVS!

Diane P. Wish
President & CEO

TREAT OTHERS AS YOU WANT TO BE TREATED

- Be friendly (a cheerful hello and a nice smile)
- Be polite (know when to say please, thank you and excuse me)
- Be honest
- Be thoughtful (be a good listener, be patient, be on time)
- Be kind
- Cooperate (work well together)

Don't Get Flooded by Fluids: Feel better with less

One of the jobs of a healthy kidney is to remove extra fluid and salt from the body. When the kidneys fail, dialysis can remove **SOME** of the fluid and salt. You need to **drink less liquid and eat less salt to feel better.**

Salt is one of the basic tastes. We have learned to eat too much salt and to like it. A balanced diet **without** added salt will provide ~2000 mg of sodium/day. Anything above 2000 mg can make you thirsty which leads to drinking more fluid and will make your body keep more water. We can change our taste for salt by slowly cutting back on salt. Try pepper, onion or garlic powders and salt free seasonings like Mrs. Dash instead of the salt shaker. Read food labels for **less** than 150 mg of sodium per serving, **less** than 600 mg/meal and **less** than 100-200 mg/snack. Avoid canned, boxed, bottled foods and meal mixes. You will **feel better with less salt.**

All food that is liquid at room temperature is considered a fluid: coffee, tea, pop, beer, wine, soup, ice cubes and frozen desserts. Some fruits and vegetables contain

large amounts of water, so excess intake can add a significant amount of fluid. Watermelon, for example, contains so much water that the recommended portion is only one small wedge, or about 1 cup. Limit your fluid intake to about 4 to 5 cups/day or 32-40 ounces/day.

If you come to dialysis with too much fluid, your treatment may make you feel bad. Your blood pressure may drop making you feel

dizzy or faint. Your muscles may cramp. You may have headaches, nausea or you may even pass out. Signs of large fluid gains include shortness of breath, swelling of your hands and feet or face and trouble sleeping. Over time, persistent high fluid gains can cause your heart to beat harder and weaken your heart muscles. You will **feel better with less fluid.**



Ask your Renal Dietitian to help
you feel better with less.

My Choice: Choosing a treatment for Kidney Disease

It is always your choice to decide the treatment option to manage your kidney disease. It is okay to try different treatment options as your feelings, needs, and wants change over time. Learning about your treatment choices will help you decide which one is right for you. There are 5 treatment options to replace kidney function. No single treatment is right for every person. Which one you choose will depend on your body, lifestyle and health.

In-Center Hemodialysis

- Treatments are 3 times per week for 3-5 hours in a dialysis facility
- Uses a dialyzer (filter) and a dialysis machine to clean your blood
- Need access to your blood stream
- Your blood is carried from your body to the dialysis machine (where it is cleaned) and returned to your body
- Trained facility staff are responsible for your care
- Must stick to a schedule & follow facility policies

Home Hemodialysis

- Treatments are usually 5-6 times per week
- Same process as in-center hemodialysis
- Need access to your blood stream
- It is done by you and a partner at home
- You will learn how to place your dialysis needles for treatment
- Trained by a dialysis nurse
- Allows for more independence
- Need space for machine and supplies

Peritoneal Dialysis

- Done at home every day, 7 days a week
- The lining of your stomach is the filter
- A peritoneal catheter is placed in your belly or abdominal cavity
- Your blood is cleaned inside your body
- Trained by a dialysis nurse
- Dialysis can be done by hand (manually), or using a machine (cycler) or a combination
- Must be done under very clean conditions
- More independence
- Need clean area and space for supplies

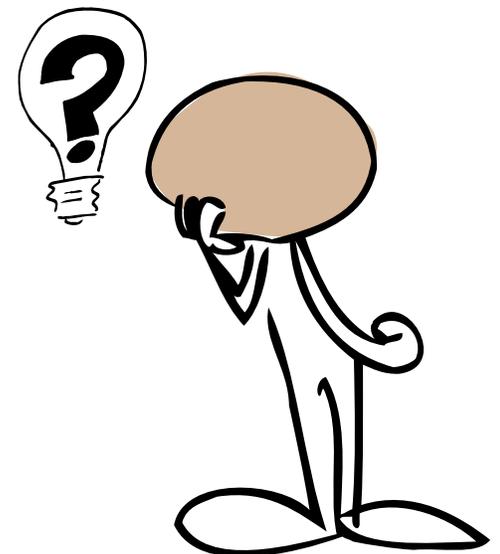
Transplant

- Kidney transplants use a deceased donor or a living related or unrelated donor kidney
- Must go through testing prior to being listed for a transplant
- Not a cure — requires taking medications every day for life
- Medications may have side effects
- Waiting list for deceased donor kidney may take a long time

Medical Management without dialysis

- Some people choose to stop dialysis
- Other serious medical conditions in addition to kidney disease are a reason people may decide to stop dialysis
- Without dialysis you may live for several days to several weeks
- The healthcare team will do everything possible to keep you comfortable

Please contact your social worker if you would like more information about any of these treatment options.



Tips for Safely Disposing of Unneeded or Unused Medications

Todd Donnelly, M.S., R.Ph., Vice President at ExactCare Pharmacy

At some point almost everyone will end up with extra or unused medications, either as a result of a change in prescribed medications or an abrupt discontinuation of a medication. Often these half-finished bottles, vials or boxes sit in our medicine cabinets for months—sometimes years. Unlike antiques or vintage cars, prescription drugs do not get better with age and actually pose a health risk if kept around after they are no longer needed. Children or other family members may take them accidentally or on purpose, resulting in a possible overdose or accidental poisoning. Controlled substances are commonly taken from medicine cabinets by anyone who might suspect they are there. It is always best to dispose of medications as soon as they are not needed. There are several ways you can do this in a safe and environmentally friendly manner.

Many communities have “National Prescription Drug Take Back Days” when prescription drugs can be dropped off at a central location, usually by driving through. These are offered through the cooperation of the Drug Enforcement Administration (DEA) and your local police department, and the collected medications are taken to an incinerator for safe destruction. A list of upcoming events can be found online:

http://www.deadiversion.usdoj.gov/drug_disposal/takeback/

Your local police department or sheriff’s office may offer a “Drug Take Back Drop-off Box.” These look like large mail boxes and provide a place where you can safely and anonymously deposit unused medications for destruction. Some retail pharmacies are now installing these drop-off boxes, as well, thanks to recent changes with federal laws that now allow these in the community. Check with your local retail pharmacy to see if they offer this.

If you have transportation challenges or don’t want to wait for the next Take Back Day, you can safely dispose of medications at home if you follow these simple recommendations. To protect your privacy, any personal information such as your name, address or pharmacy labels should be removed or blocked out with permanent marker before you discard the containers.

Tablets, Capsules, Powders and Liquids: These can be disposed of in your regular household trash as long as they are rendered unusable first. I recommend putting these into a re-sealable plastic bottle, such as a 2-liter soda bottle or milk jug. Add water to the bottle to partially dissolve the medications, and then add something like liquid dish soap or laundry detergent that will make the contents undrinkable. The bottle can be discarded in the trash. Landfills are designed to contain anything put in them, so the drugs won’t end up in drinking water, which is what can happen if you flush drugs down the toilet.

Patches: Once a patch is removed it must be carefully handled, as it still contains a large amount of active drug. These can be particularly dangerous for children (or pets) who may think they are fun to play with; nicotine or fentanyl patches can be particularly dangerous and cause overdoses easily. These should be folded over so the adhesive medicated sides touch each other. They can be put into the same aforementioned soda bottle with other medications, or into their own bottle with soap or another unpalatable substance to prevent people from using them.

Injectables or Eye/Ear Drops: Insulin or other commonly self-administered drugs can be drawn into a syringe and squirted into the trash, as can unused eye drops or ear drops. Empty dropper bottles and vials can be disposed of in the trash, as well.

continued on page 12 >

Safe Summer Tips for Healthy Feet

Ouch! Nothing ruins summer fun more than a painful or injured foot.

Foot care is very important for all people with kidney disease, but even more so if you have:

- pain or loss of feeling in your feet (numbness, tingling)
- changes in the shape of your feet or toes
- sores, cuts, or ulcers on your feet that do not heal

If you take care of your feet every day, you can lower your chances of losing a toe, foot, or leg.

Check your feet every day.

Check your feet every day for cuts, sores, red spots, swelling, and infected toenails. You may have foot problems, but feel no pain in your feet.

Wash your feet every day.

Wash your feet in warm, not hot, water. Do not soak your feet because your skin will get dry.

Keep the skin soft and smooth.

Rub a thin coat of lotion or cream on the tops and bottoms of your feet. Do not put lotion or cream between your toes because this might cause an infection.

Smooth corns and calluses gently.

Thick patches of skin called corns or calluses can grow on the feet. If you have corns or calluses, check with your foot doctor about the best way to care for them.

Trim your toenails.

If you can see, reach, and feel your feet, trim your toenails regularly. If not, have a foot doctor trim your toenails since nails may be too thick to trim or could curve and grow into the skin.

Wear shoes and socks at all times.

Do not walk barefoot when indoors or outside.

Protect your feet from hot surfaces.

Wear shoes at the beach and on hot pavement. You may burn your feet and may not know it.

Keep the blood flowing to your feet.

Put your feet up when you are sitting.

Be more active.

Being active improves blood flow to the feet. Ask your doctor for safe ways to be more active each day.



For the Fun of It



Summer Olympics • August 5 – 21, 2016 • Rio de Janeiro, Brazil

T R A C K A N D F I E L D G G
U E O F E Z K A X W S C N N N
R T A W E Y F R J D Y I I I I
F O A M K N E A W C T X W T V
L M W B H I C A L F O V R H I
G V W I L A T I I B O T E C D
G J O D N E N L N L I D S A B
N N M C R G T D L G N I T Y W
I C I P H H I E B C H P L F N
T R O E G G Y M N A S T I C S
O L T I O B A Z I N L P N D T
O K E D A N J Q W J I L G T W
H W U L L L A B T E K S A B V
S J L M S O C C E R S Z I J X

Words:

Basketball
Fencing
Soccer
Water Polo

Boxing
Gymnastics
Table Tennis
Weight Lifting

Canoeing
Judo
Team Handball
Wrestling

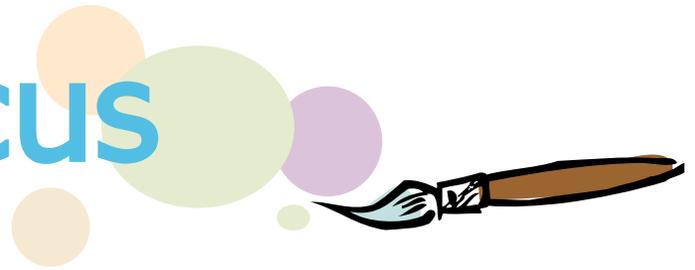
Cycling
Rowing
Track and Field
Yachting

Diving
Shooting
Volleyball



Artist in Focus

Karen Lawler of Euclid CDC



Karen Lawler

The featured cover art for this newsletter was created by Karen Lawler who is a patient at Euclid CDC. Barb Greenwood, MA, ATR-BC sat down with Karen to ask her a few questions regarding her experience with art.

Have you always done art making?

I started creating art at the age of 17 sketching Marie Antoinette ball gowns from the encyclopedia. I did major in art in college but left community college to become a medical assistant. From that point on I quit doing art.

What caused you to begin creating art again?

In 2003 I started dialysis. It was there that I met my first art therapist and began working in art therapy. It helped with the depression that I was feeling because of having to start dialysis.

I find it is relaxing and makes the time go faster. I began painting pictures of places that I could escape to so it gave me other things to think about.

What materials do you enjoy working with now?

My first love is acrylic paint but I enjoy using pastels, colored pencils and still do crafts.

What inspires you?

Nature, I am particularly drawn to the changing of the seasons. Colors touch me. They make me pay attention to details.

Is there an artist or artists that have inspired or influenced you?

I am drawn to Georgia O'Keeffe. She uses such bold colors. Monet's landscapes also inspire me. The way Monet uses color and light really influence how I paint.

Are you creative in any other areas of your life?

I love to sing. Poetry is also another area that I am creative.

What is the most satisfying thing for you about making art?

It is always amazing for me to see the results. I am especially thrilled when someone else likes it and acknowledges my work. It is even

better when they tell me that they can envision themselves in the place that I have painted. My fiancée has hung 13 years of my art work on the wall in our house. When looking at the work I am able to see the progress that I have made all these years. With every new art therapist I have worked with I have learned something new that has helped me grow in my skills.

What does art making do for you as a dialysis patient here at CDC?

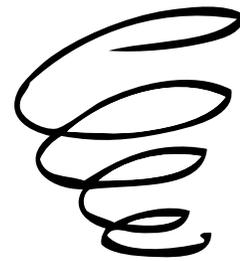
It is wonderful to come in here and have all the materials and supplies that I need to work. The art therapists encourage and challenge me. When I make art during dialysis I become more relaxed and time flies by.

What advice would you give someone who is just starting out or is thinking of becoming involved with art therapy?

Begin with crafts and explore other art materials. Be willing to sit with the art therapist and experiment. Just give it a try and be willing to make mistakes. You never know what you can accomplish but it is surprising what you can do if you just do it.

"You never know what you can accomplish but it is surprising what you can do if you just do it."

Storm Watch 2016: Tornado Safety



At CDC we have a responsibility to be prepared in order to keep our dialysis patients and staff safe. Tornadoes are violent rotating columns of air that can reach up to 110 mph. Tornadoes can happen in a moment's notice and can have devastating consequences. Tornadoes can happen at any time but the most activity happens between the spring and summer months.

Dialysis facilities prepare for tornadoes by:

- Ensuring that there is an emergency plan designated for tornadoes.
- Providing tornado emergency training to all staff and patients.
- Designating severe weather shelter areas within the building.
- Practicing drills and patient emergency disconnect from the dialysis machine.

What is the difference between a Tornado Watch and a Tornado Warning?

A **Tornado Watch** indicates conditions are favorable for a tornado to develop and intended to alert the public in specific areas to pay attention to weather conditions.

- In a tornado watch pay close attention to your local weather and the potential possibility of a tornado touchdown.

A **Tornado Warning** indicates spotters have seen a tornado or the Doppler Radar has reported circular rotation indicating that the storm may spawn a tornado. The danger signs of a tornado include:

- Dark, often greenish clouds – a phenomenon caused by hail

- Wall cloud – an isolated lowering of the base of a thunderstorm
- Cloud of debris
- Large hail
- Funnel cloud – a visible rotating extension of the cloud base
- Roaring noise that sounds like a train

If there is a tornado warning your clinic will implement tornado policies. The staff will assist you in getting off the dialysis machine as quickly as possible. The dialysis lines will be clamped and disconnected from your needles. Your needles will be taped down and left in place until you are evaluated by medical staff. The staff will direct or assist you to a severe weather shelter area.

Preparing for a Tornado at Home

- During any storm, listen to the local news to stay informed about tornado watches and warnings.
- Know your community's warning system. Communities have different ways of warning residents about tornados, with many having sirens intended for outdoor warning purposes.

- Pick a safe room in your home where household members and pets may gather during a tornado. This should be a basement, storm cellar or an interior room on the lowest floor with no windows.
- Practice periodic tornado drills so that everyone knows what to do if a tornado is approaching.

When a tornado threatens, your immediate action can save your life. Follow these tips for safety:

- Stay away from windows, doors, and outside walls.
- Protect your head. Lie face down, draw your knees up under you, and cover the back of your head with your hands.
- Get under something sturdy.
- Go to the basement or to an interior part on the lowest level - closets, bathrooms, or interior halls in small buildings.
- Listen to your radio, television, or NOAA Weather Station for the latest National Weather Service Bulletins.
- Do not leave the building or your shelter area until an all clear is advised.

Do you know where the severe weather shelter area is at the dialysis center and how to disconnect from the dialysis machine? If not, then ask a staff member.

Do Food Expiration Dates Really Matter?

Nine out of 10 Americans have needlessly thrown away food because they are confused about "Sell by", "Use by" and "Best used by" dates on products.

The Basics:

"Use by" date: Buy and use by this date for best quality.

"Best used by" date: This is an indicator of peak freshness.

"Sell by" date: You should buy the food item before this date has passed.

Make sure to use expiration dates as a guide rather than relying solely on the numbers. It's ultimately up to us to figure out when food is no longer fresh and edible.



- 51% of American households throw away food they bought but never used.
- Americans waste about \$640.00 dollars in household food each year.

The Hot Summer Months

The warm and refreshing weather of summer also brings periods of high heat, which are particularly stressful to dialysis patients. Although it is crucial to stay hydrated during this time of the year, dialysis patients may harm themselves by drinking too much fluid.

Here are some ideas you may try if you are really thirsty:

- Sucking on an ice cube, a piece of sour sugar-free hard candy or a wedge of lemon or lime to help quench your thirst.
- Frozen grapes, pineapple chunks or frozen cubes of apple or cranberry juice are also refreshing.
- Brush your teeth more often. Not only does it clean your teeth, but it refreshes your mouth and lessens the urge to drink.
- If you really have to drink, sip slowly rather than gulping a whole glass down.
- Avoid salty and spicy foods; they can make you thirsty.
- If you have diabetes, try to maintain good control of your blood sugar. High blood glucose can make you thirsty.
- Learn to recognize the symptoms of too much heat, and how to recuperate.



Please speak with your doctor and dietitian to learn more about how much fluid you can drink every day, how to limit your fluid intake and what signs and symptoms to look for if too much fluid is building up.

Healthy Eating

Recipes to Collect



Zesty Barbeque Sauce

Nutrients Per Serving

Calories: 38; Protein: 0 g;
Carbohydrates: 5 g; Fat: 2 g
Sodium: 49 mg; Potassium: 30
mg; Phosphorus: 4 mg

Ingredients

- 2 tablespoons vegetable oil
- 1 tablespoon flour
- 1/4 cup dark corn syrup
- 1/4 cup tarragon vinegar
- 1/4 cup onion, chopped
- 1 cup water
- 2 teaspoon dry mustard
- 2 tablespoons tomato paste
- 1 teaspoon Tabasco® sauce
- 1 teaspoon Kitchen Bouquet® seasoning
- 1/4 teaspoon salt

Preparation

1. Stir oil and flour together to make a paste.
2. Add remaining ingredients.
3. Cook the mixture on low heat until it thickens.
4. Brush sauce on baked or grilled meat.

Safe Disposal (continued from page 6)

Syringes/Needles: Dispose of needles in a container to prevent anyone from accidentally being stuck with them, especially after they have been used. If you have a SHARPS container purchased from a pharmacy or given to you by a medical provider, these are made to contain used syringes. If you don't, you can dispose of your needles in a sturdy container like a metal coffee can with a lid or a sturdy plastic bottle with a re-closable lid, like laundry detergent containers. These can usually be dropped off when full at the Drug Take Back Days, using a mail-back program

from the maker of the SHARPS container, or at a local community household hazardous waste disposal site.

Inhalers: The metal canister that contains the medication in inhalers should be removed from its plastic mouthpiece and disposed of separately so it cannot be used by someone else.

Topical Ointments and Creams: First, remove any pharmacy labels with your name on them and then squeeze the remainder of the medication into the trash,

preferably onto something like coffee grounds to make them undesirable or into paper towels that are then put in the trash.

The ultimate goal is to get the medications out of your house so they can't be used or abused by anyone else or accidentally poison a child or family pet. Following these simple suggestions can help you make your home a safer place. If you have any questions about the best way to use your medications or how to dispose of them, you can always ask your pharmacist for help and guidance.

CDC

Centers for Dialysis Care

Corporate Office

18720 Chagrin Boulevard
Shaker Heights, Ohio 44122

(216) 295-7000 • cdc.org



Scan the code to
visit us online