

Welcome to our July Webinar on
The Nuts and Bolts of Becoming a Transplant Patient

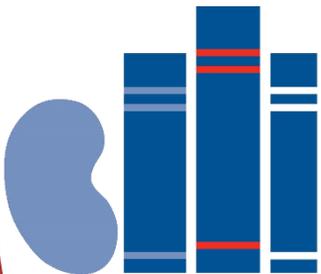
We need your Feedback! Please complete form after the program

This webinar will be recorded and slides will be available at
www.dpcedcenter.org

Next webinar: August 16th by Dr. Michael Kraus, nephrologist, and
Vanessa Evans, patient. Learn about treatment options and if home
dialysis is a choice for you.

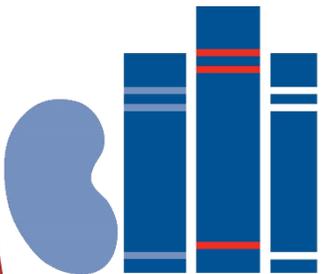
Reminder

- All phone lines are muted
- **Mute *6**
- **Unmute: #6**
- Unmute your phone to ask questions at the end of the presentation
- Or, ask questions through the Chat Box
- Recording and slides will be available on web site
- Please provide feedback
- Join us next month for another webinar



Dr. Keith Melancon

- Director of the George Washington Transplant Institute
- Professor of Surgery: Specialties include kidney, pancreas and liver transplantation as well as laparoscopic kidney donor nephrectomy
- Research interests: Increasing access to health care for minority patients, particularly for organ transplantation
- Advocate to improve outcomes for the hardest to transplant patients

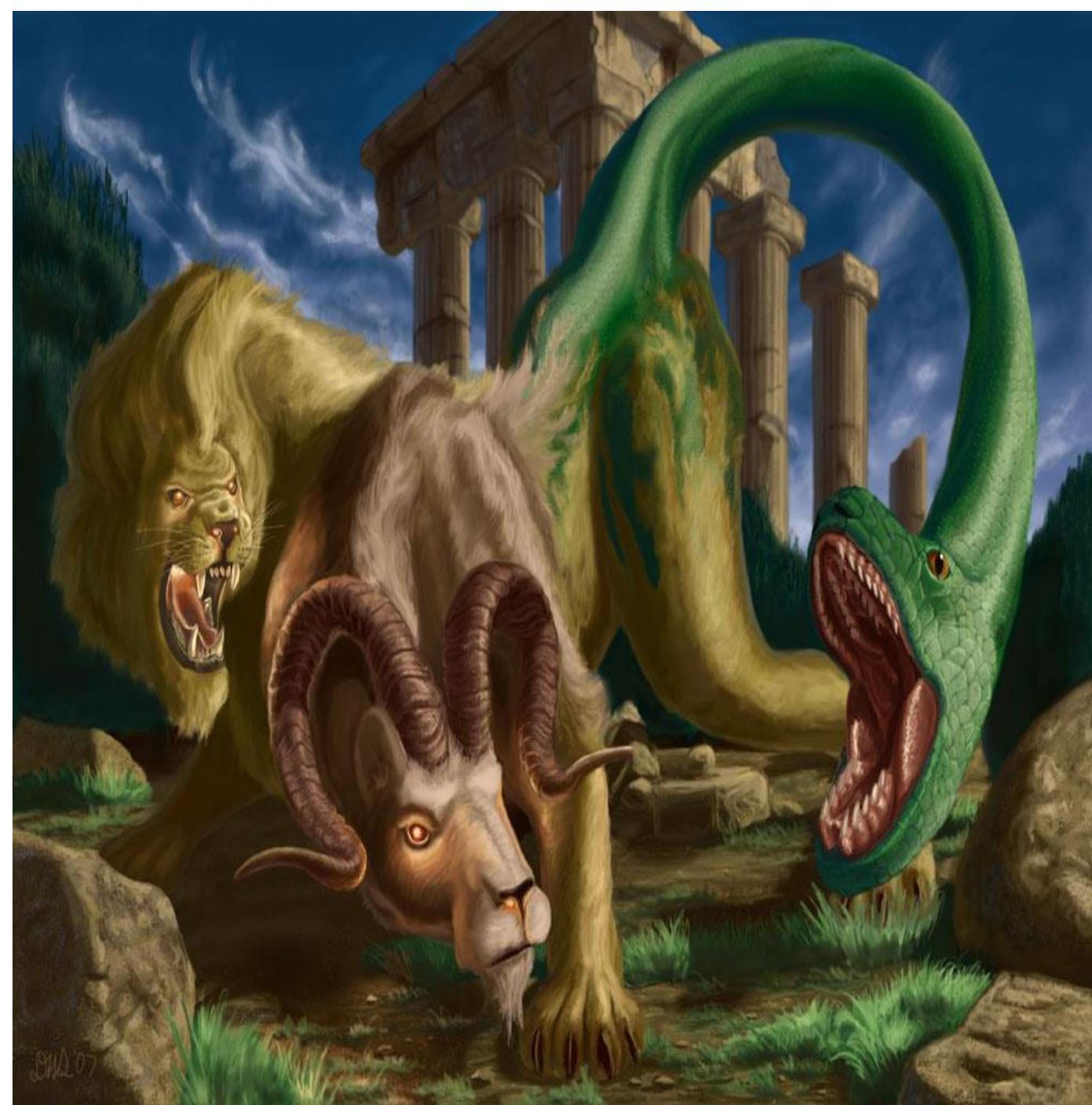


TRANSPLANT 101

Dr. Joseph Keith Melancon

Chief – Transplant Institute and
Division of Transplant Surgery

Medical Director – GW Ron and Joy Paul
Kidney Center



What is the most common cause of kidney disease?

- Stab injury
- Diabetes/ High Blood Sugar
- Hypertension/ High Blood Pressure
- Infection
- Congenital problems

Which of the following contributes to the greatest possibility of developing kidney disease?

- Epigenetics
- Ethnicity
- Drugs
- Old age

What is the most effective way to control high blood pressure?

- Medication
- Exercise to lose weight
- Diet

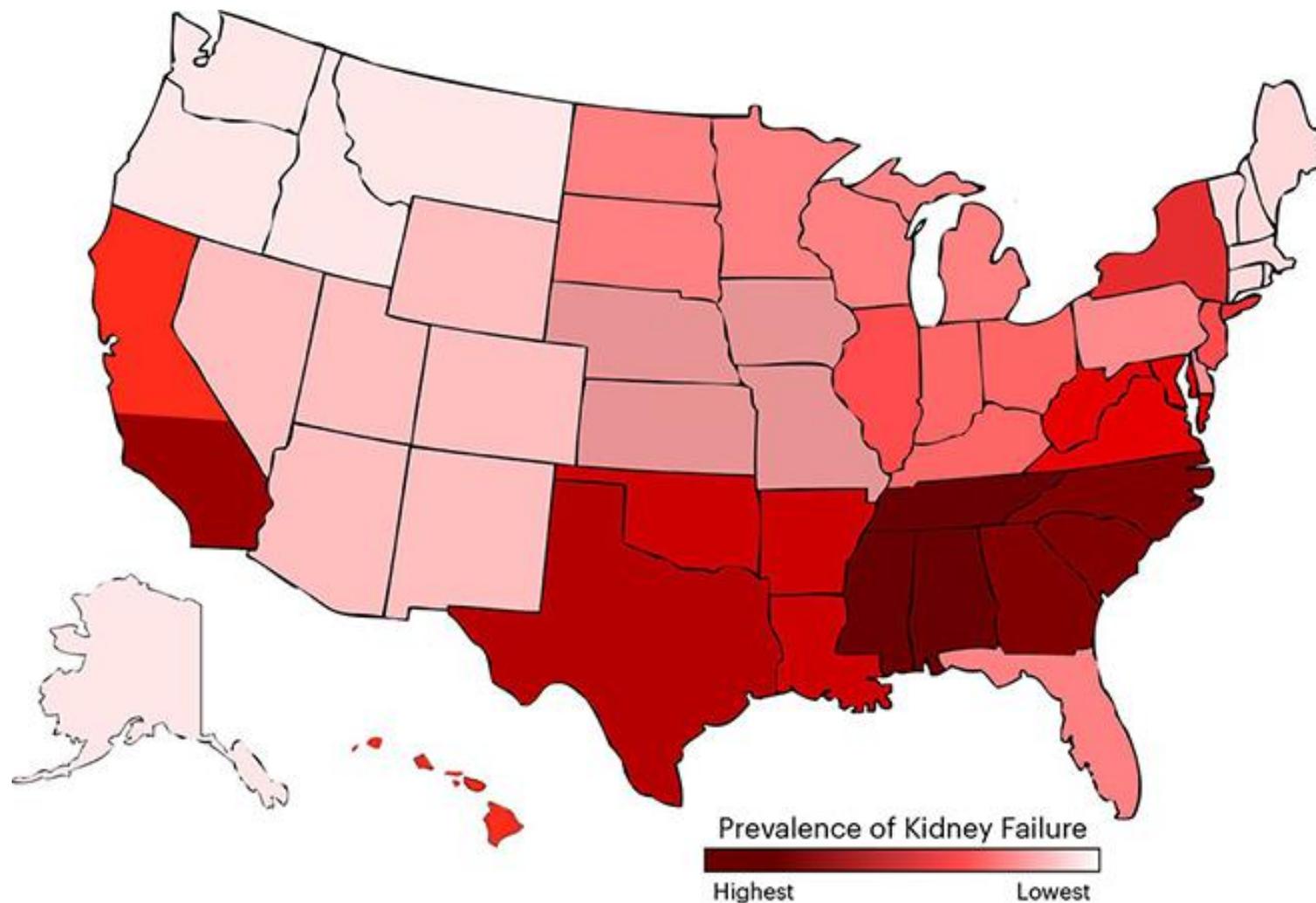
What is the one of the most common cause of self-induced kidney disease?

- IV drugs
- NSAIDs – Pain medication
- Accidents

What is the most common type of Diabetes?

- Type I
- Type II

Disease Atlas: ESRD Prevalence

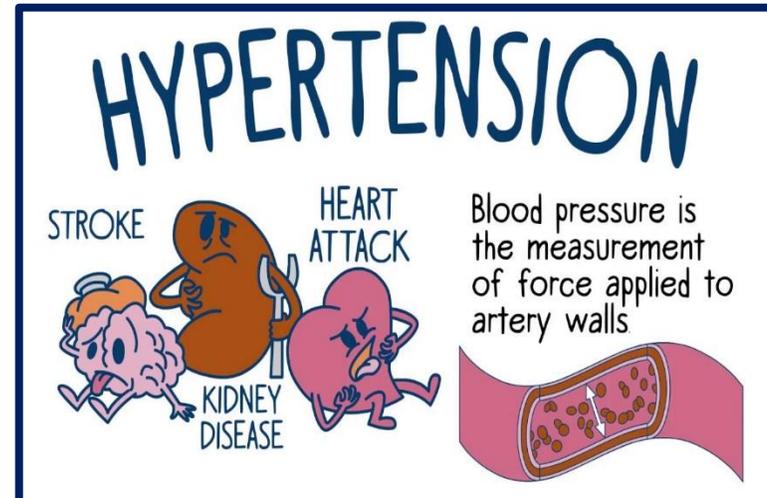
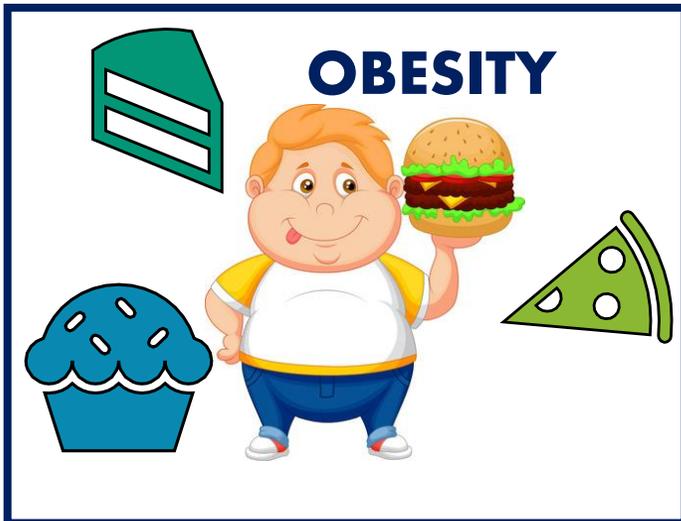


What are the most important causes of kidney disease?

- Diabetes
- Hypertension
- Obesity

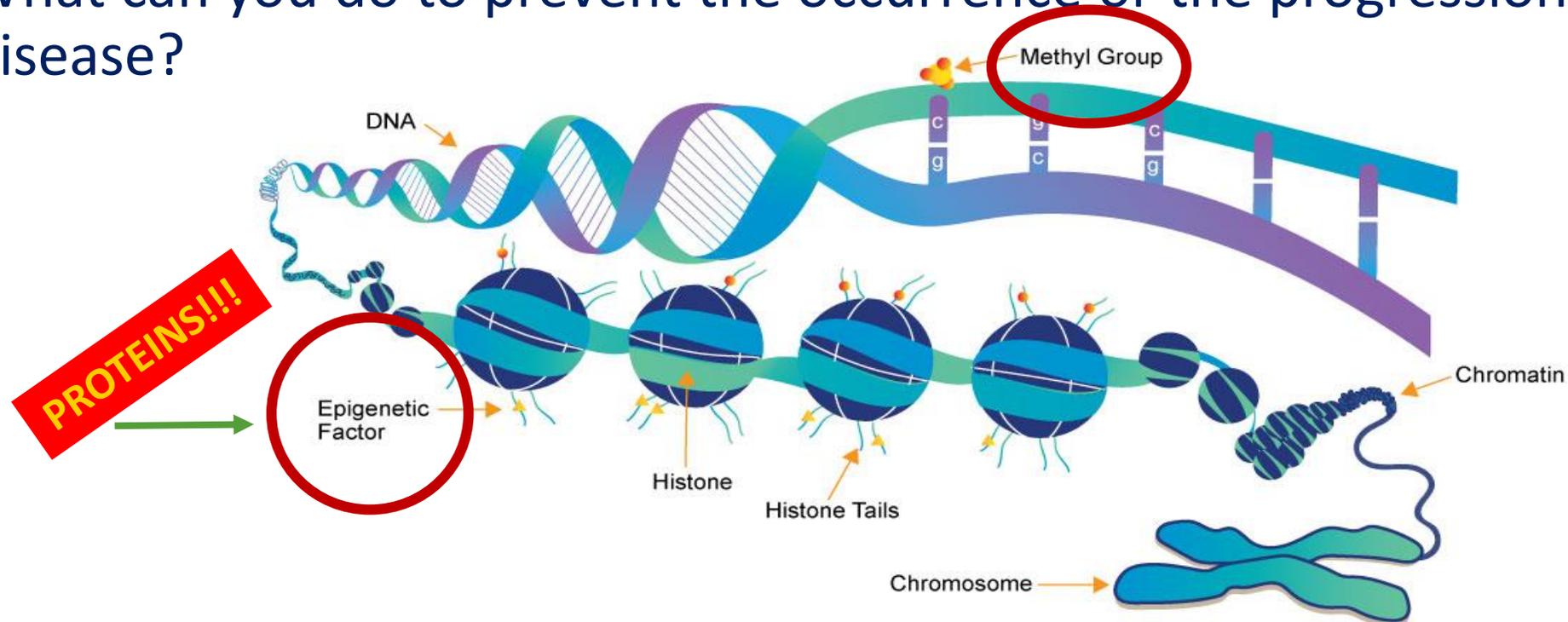


Combination increases chances of ESRD



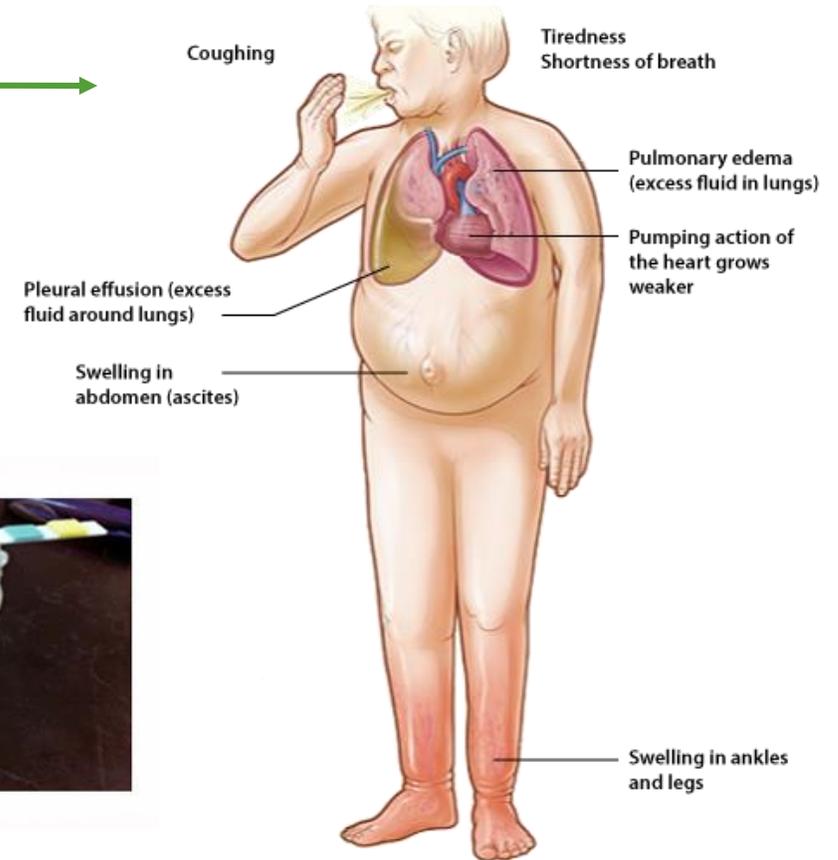
Genetics versus Epigenetics

- Which one do you think contributes to predisposing a person to having a higher risk of kidney disease?
- What can you do to prevent the occurrence or the progression of this disease?



What are the symptoms of kidney disease?

- Fluid overload and shortness of breath
- High blood pressure
- Proteinuria
- Fatigue
- Itching



What is end stage renal disease?

- There are 5 stages of kidney disease
- Stages 1, 2, and 3 are reversible
- Stages 4 and 5 are irreversible

STAGE 1 Normal Kidney Function	STAGE 2 Mild Kidney Function	STAGE 3 Moderate Kidney Function	STAGE 4 Severe Kidney Function	STAGE 5 Kidney Failure
100%	90%	60%	30%	15%
0%				
Stage 1:	Stage 2:	Stage 3:	Stage 4:	Stage 5:
-- 90-100% Function	-- 60-89% Function	-- 30-59% Function	-- 15-29% Function	-- 0-14% Function
-- No symptoms	-- No symptoms	-- Edema (swelling)	-- Stage 3 symptoms	-- Stage 4 symptoms
-- Other health issues	-- Protein leaking in urine	-- Fatigue	-- Nausea/vomiting	-- Fatigue/weakness
-- Diabetes	(<200 mcg)	-- Back pain	-- Difficulty concentrating	-- Easy bruising, bleeding
-- High blood pressure		-- Foamy, darker urine	-- Tingling in toes/fingers	-- Anemia
-- Obesity		-- Microalbumin (>200mcg)	-- Loss of appetite	-- Thirst, cramps
		-- Food restrictions: sodium, phosphorous	-- Sleep problems	-- Skin color changes
			-- Kidney dialysis	-- Making little/no urine
			-- Renal dietitian required	-- Kidney dialysis
			-- More food restrictions: Less potassium	-- Kidney transplant

Just the Facts... Please

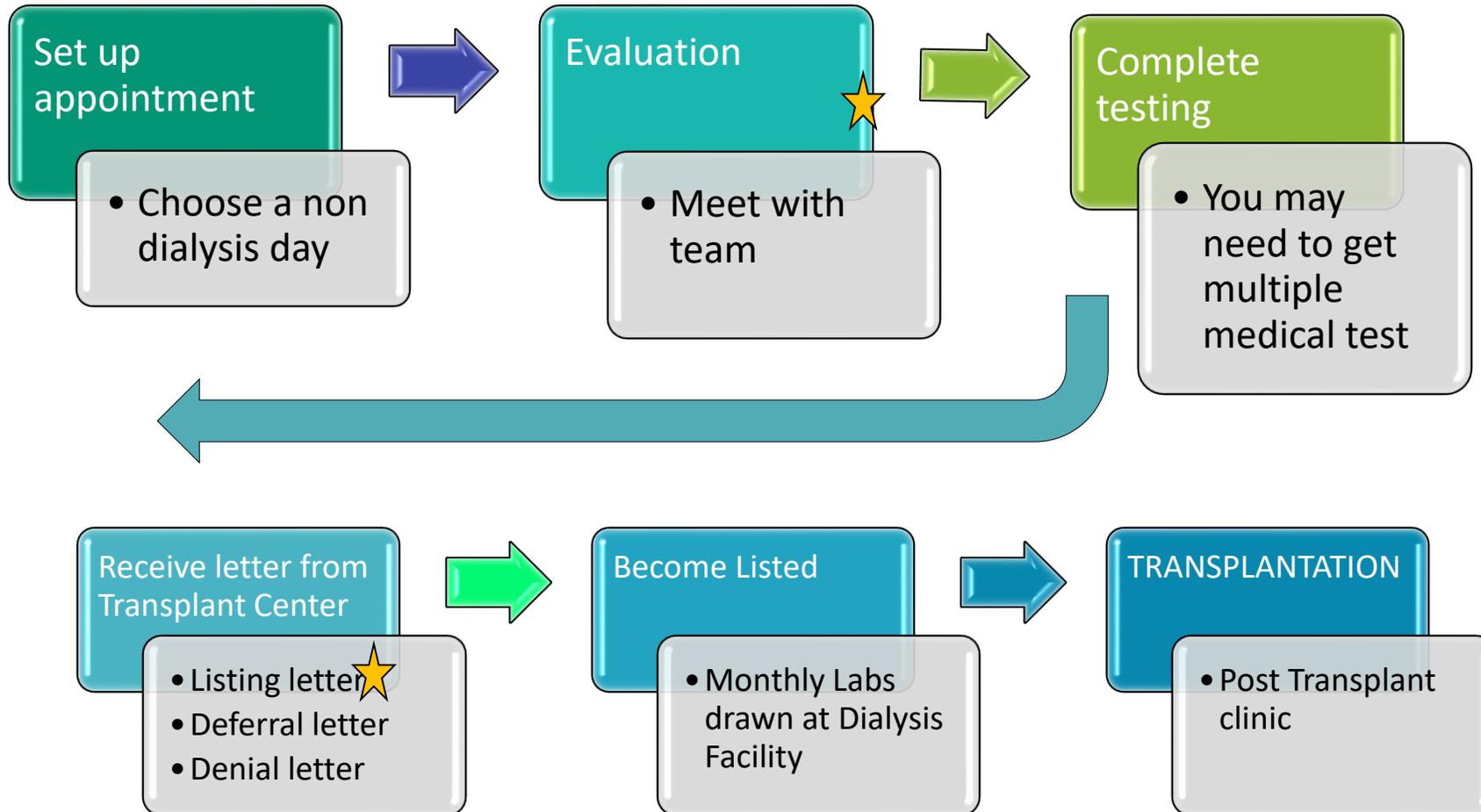
- Currently over 110,000 people awaiting kidney transplant in the U.S.
- Transplants 2017 (in the US)
 - **14,215** (01/01/2017 to 09/30/2017)
- Number of kidneys discarded in 2017
 - **3,464**

What you can gain?



- Live a longer life
- Eat regular diet
- Freedom to travel easily
- Ability to become pregnant
- Lifestyle free of dialysis
- Physically active
- Return to work

The Path to transplantation



★ See up coming slides

Transplant Evaluation

- Patients are referred for Transplant Evaluation by their doctor, dialysis center, or self referral.
- The evaluation:
 - Looks to see if you are healthy enough to receive a new kidney.
 - Educates you on kidney transplantation.
 - Learn about the options of a living or deceased donor kidney transplant.
 - Identify possible live donors.

Who is on your Transplant Team?

- Transplant Surgeon
- Transplant Nephrologist
- Pre-Transplant Nurse Coordinator
- Financial Coordinator
- Social Worker
- Dietitian
- Post transplant Nurse
- Your current dialysis team



What is meant when someone is deferred or denied?

Deferred

- Additional testing
- Weight loss
- Cancer Recovery
- Smoking Cessation
- Active Infection/Wound healing
- Blood Glucose control
- Non adherence
- Active substance abuse
- Untreated psychiatric illness

Denied

- Active cancer
- High surgical risk: CVD, Pulm HTN, uncontrolled DM, requires home oxygen.
- Non adherence to treatment: medications, diet, dialysis schedule
- Active substance abuse: Drugs, Alcohol, or Smoking
- Untreated psychiatric illness
- Mental incapacity
- Obesity: with weight loss you can get on the list
- LACK OF SOCIAL SUPPORT

While on the List

- You can be on a different list in a different region – because they are getting different kidney offers.
- Wait times vary by region, blood type, and antibody levels.
- Average wait time in Washington, DC - **5 years.**
- You continue to have dialysis and are encouraged to maintain healthy lifestyle during the waiting period.
- You will have monthly labs to monitor your antibodies - these most likely will be taken at your dialysis center.
- You will be re-evaluated yearly while you are waiting.
- You may get called for a transplant several times before actually receiving an organ.

There is a new way of listing

The NEW Kidney Allocation System

They way people are placed on the list

- In November 2014 the rules changed for who is at the top of the list
- Old way - listing date
- New way - date of start of dialysis, sensitivity, or if not on dialysis eGFR <20%

Were the goals of KAS met?

- Longevity matching – **Improved**
- Access for highly sensitized patients – **Improved**
- Fairness by including dialysis time to waiting time – **Accomplished**
- Facilitating placement of high KDPI (>85%) by regional matching – **In process**
- Increase transplants for B recipients using non-A1 (A2) donor kidneys – **Small numbers**
- No decrease in transplant numbers or compromise for vulnerable populations

Who Matches the Kidney to the Recipient?

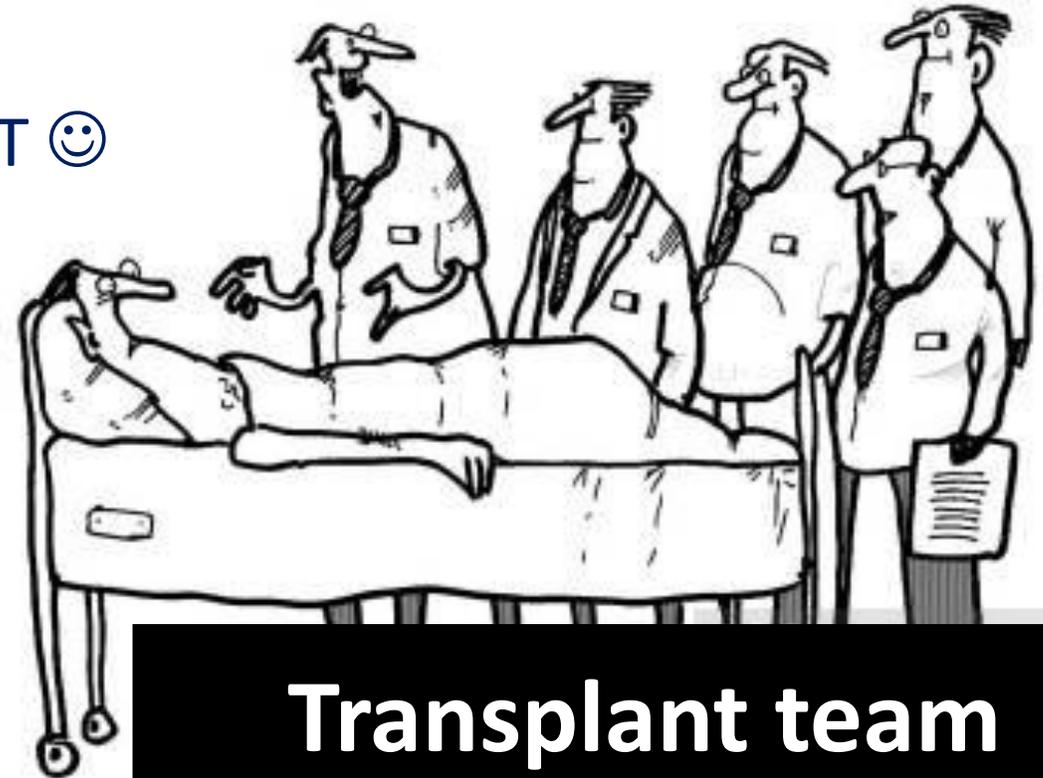
United Network for Organ Sharing

- A private, nonprofit organization that coordinates the nation's organ transplant system under contract with the federal government.
- Matching Organs
UNOS maintains a centralized computer network, UNet, which links all possible organs with transplant centers and recipients



Post Transplant

- The post transplant period requires close monitoring of the kidney function, early signs of rejection, adjustments of the various medications
- You will see your Transplant Team A LOT 😊



Transplant team

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Questions???

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MOCHCHAKKERAM
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MATUR NUWUN
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MOCHCHAKKERAM
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OBRIGADO
DANK JE

Register for our next webinar

Home Dialysis - Is It Right for You?

August 16, 2018

2:00 PM Eastern

Learn from a nephrologist about treatment options, more frequent dialysis, questions to ask your doctor and hear a patient's dialysis story

