

# THE KIDNEY LINK

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## GIFT OF LIFE OF MICHIGAN AWARDS ORGAN DONATION, TRANSPLANTATION ADVOCATES

Former Michigan State Senator Beverly Hammerstrom (R-Temperance) and Wayne State University Professor, Dr. Mona Doshi, have made it their business to increase awareness and understanding of organ and tissue donation and transplantation policies.

That is why the Gift of Life Foundation recently recognized both Sen. Hammerstrom and Dr. Doshi – two Women In Government members – with the GOLF Award on Nov. 15 for their efforts.

Roughly 150 hospital personnel, transplant recipients and donor families gathered for the award ceremony, where Dr. Doshi received a commemorative plaque for her efforts to educate hundreds of state legislators at conferences, including those affiliated with Women In Government, about the need for streamlined transplantation policies and anti-rejection medication once patients find a matching donor.

Women In Government extended congratulations to both women for being honored in this forum.

Sen. Hammerstrom, was unable to attend the ceremony, as she was in Washington, D.C., at a Women In Government conference. According to organizers, Sen. Hammerstrom played an integral role in thrusting the issue before state policymakers across the nation. She noted that Women In Government encouraged her deeper understanding of organ and tissue donation and transplantation, an issue that she frequently heard about while sitting as chair of the Michigan Senate Health Policy Committee over a career as a state legislator.

“The Women In Government Board then began to empower and mobilize all women legislators in 2007 to address the need for sound policy and uniform laws,” said Tammie Havermahl, the Gift of Life Foundation’s director of public education, during her speech at the ceremony.

Dr. Doshi played an integral role in getting the message out to state legislators at several conferences this year. Her presentations stressed the need for improved organ and tissue donation and transplantation legislation, especially for kidney patients. Her message made it clear that for patients who have end-stage renal disease and receive dialysis, a transplant is the only way to lead a normal life. She also said that there is too great a need for donor kidneys.

Over the last decade, the number of people on a waiting list for a new kidney has doubled to more than 60,000;

meanwhile, the number of available kidneys has remained stagnant at less than 10,000.

As a result, people wait for years to receive a matching kidney. Some people die waiting.

One piece of legislation being considered nationwide is the revised Uniform Anatomical Gift Act (UAGA).

The revised UAGA updates the original 1968 and the 1987 versions. Since it was unveiled in 2006, it has been enacted in 20 states.

Among other things, the UAGA clarifies that if someone indicates that they want to be an organ donor, their organs will only be used for transplants. If someone wants to donate their body to science, they must make that wish explicit. Also, the UAGA establishes minimum standards for donor registries, including special attention for donor privacy. These revisions make the 2006 UAGA different from the previous pieces of legislation.

*Read one woman’s story about her gift of life on pg. 2.*



*Dr. Mona Doshi, left, stands with Tammie Havermahl, right, of Gift of Life Foundation of Michigan after Doshi received honors from 150 hospital personnel and donor families. Sen. Beverly Hammerstrom was also honored, but unable to attend.*



Women In Government Talks About the Importance of the UAGA through a New Multimedia Clip. Visit the Women In Government Kidney Health Policy Resource Center at [www.womeningovernment.org/kidney](http://www.womeningovernment.org/kidney) to view the clip online.

## ONE WOMAN'S STORY

**M**ore than three years ago, Renee Morrow, a retired sixth grade school teacher from Troy, Mich., did not know if she would live to see her 60th birthday.

She had lived with lupus since 1980, trying to make life as normal as possible for her three children and husband while fighting a disease that attacked her kidneys.

Finally, both of her kidneys failed in 2001, requiring her to undergo dialysis treatment. Morrow added her name to a transplant list, but her transplant coordinator was quick to warn Morrow that the outlook wasn't good.

That changed when the phone rang at 7:30 a.m. Nov. 11, 2004. Morrow said she will never forget picking up the receiver that morning.

Doctors at the University of Michigan had found a matching kidney. A 19-year-old boy died as a result of an accident. He was a college freshman studying social work; he wanted to help people, Morrow later found out. His parents decided he would have wanted to donate his organs so someone else could live, she said.

He was part of 10 percent of the nation's population who could have matched Morrow, Morrow said her doctors told her.

"Being a parent, I can't even imagine... but I'm healthy as a result of it," Morrow said.

In October, Morrow celebrated her 60th birthday. She can visit her grandchild in Reno, Nev., without setting up dialysis appointments in Carson City. She exercises, eats well and takes her anti-rejection medication every day. If she fails to take her medication, Morrow runs the very real risk of her body fighting and destroying the donor kidney.

"It's something you have to take," Morrow said. "People have to realize it's so important."

Since receiving her kidney, Morrow volunteers for Gift of Life Foundation to build a Michigan donor database for everyone who has indicated on their driver's license the desire to donate their organs.

She gets the word out at health fairs, but is often confronted with people who don't want to hear anything about organ donation.

"The people who are iffy about it just need to learn more," she said. "It eliminates an emotional decision that a family has to make. That person has consented to be an organ donor."

One easy place for anyone to learn more about the benefits of organ and tissue donation and transplantation policies is the Women In Government Kidney Health Policy Resource Center. Available on the Web, the Resource Center acts as a clearinghouse of well-balanced information on existing policies, health studies and current events related to the UAGA, end-stage renal disease and other kidney-related issues.

Go to [www.womeningovernment.org/kidney](http://www.womeningovernment.org/kidney) for more information.

## AMERICAN KIDNEY FUND HELPS COVER KIDNEY DISEASE COSTS FOR PATIENTS, EDUCATES THOSE AT RISK

**T**he financial costs of kidney disease can be a crushing burden to patients and their families already confronting the challenges of serious illness. For more than 35 years, the American Kidney Fund has devoted its efforts to assisting patients in need with these costs.

Founded to help one patient pay for dialysis, the American Kidney Fund has grown into the nation's number one source of financial assistance to kidney patients. Last year, the American Kidney Fund awarded \$81.9 million in grant assistance to 63,500 individuals with end-stage renal disease (ESRD), nearly one-fifth of the nation's dialysis patients. Grants enable patients to maintain their health insurance coverage and pay for treatment necessities that insurance generally does not cover. These include medications, transportation to and from dialysis, living kidney donor expenses, and nutritional supplements to help the frail and elderly avoid malnourishment. All programs are designed for patients who have exhausted other means of local, state and federal assistance.

Maintaining health insurance depends upon a patient's ability to afford premium payments. Last year, the American Kidney Fund enabled 32,000 patients to maintain their health insurance coverage by paying their premiums for Medicare Part B, Medigap, and commercial or COBRA policies. Nearly 15,000 patients were able to pay for transportation related expenses to and from dialysis treatments. More than 6,400 patients received emergency cash grants for health-related necessities. For its stewardship of the donated dollar, the American Kidney Fund has earned top ratings from Forbes Magazine, Reader's Digest, Charity Navigator and the American Institute of Philanthropy.

In addition to providing direct financial assistance to patients in need, the American Kidney Fund is committed to raising public awareness about kidney disease. It maintains a nationwide toll-free HelpLine (866-300-2900) to connect callers with English and Spanish-speaking health educators who answer questions about kidney disease and direct callers to appropriate resources in their communities. It also publishes a comprehensive brochure and fact sheet series about kidney health distributed in print and available on its website ([www.kidneyfund.org](http://www.kidneyfund.org)).

Since 2004, the American Kidney Fund has provided free medical screenings to nearly 15,000 Americans in high-risk cities and promoting awareness of chronic kidney disease through its Minority Intervention and Kidney Education (MIKE) Program. MIKE provides free medical screenings and educational workshops in communities where kidney failure is most prevalent. MIKE works in active partnership with public and private organizations, including government agencies, community and faith-based organizations.

Currently, MIKE services are offered in Atlanta, Chicago,

# NATIONAL KIDNEY FOUNDATION SCREENS D.C. FOR CHRONIC KIDNEY DISEASE

The National Kidney Foundation of the National Capital Area (NKF/NCA) wrapped up its first year of partnering with the DC Department of Health (DOH) and the DC City Council's Committee on Health to address the kidney disease epidemic in the District by providing medical screenings to residents of the city. Qualified participants for the program are District residents, 18 years of age or older, uninsured or lacking primary insurance. Participants each received the medical testing, worth approximately \$200, free of charge. The screenings include tests for diabetes and high blood pressure, as well as kidney function, cholesterol, anemia, and bone health.

Of the first 1,173 participants screened (through July 30, 2007):

- 62% learned for the first time they may have kidney disease
- 89 % had at least one value outside the normal range (hypertension, glucose, cholesterol, microalbuminuria, or other test)
- 50% had an abnormal microalbuminuria test results. This measurement tells if protein is present in the urine, which may indicate kidney disease
- 42% showed values outside the normal range in systolic and/or diastolic hypertension, indicating high blood pressure
- 16% had abnormal blood glucose values, indicating the possibility of diabetes

"The results of our screenings clearly indicate that many people are unaware that they have kidney disease or that they have any abnormalities that could lead to kidney disease in the future," said NKF/NCA President & CEO Preston A. Englert, Jr., CAE. "Early detection is imperative and we believe these screenings will continue to have a positive impact on the community."

Twenty million adults nationwide, one in nine, have kidney disease. The problem is significantly worse in the District, with a kidney failure rate of 3,572 per million which is two-and-a-half times the national average of 1,435

per million. Three District zip codes - 20002, 20011, and 20019 have the highest rate of kidney failure in the nation ranking first, second and third. Overall, Washington, DC is the jurisdiction with the highest prevalence of kidney failure, followed by Louisiana and Mississippi. Maryland ranks seventh and Virginia is eleventh.

"My goal for the Foundation is to deepen our involvement in screening residents of the District of Columbia for kidney disease and to broaden those efforts to surrounding jurisdictions," said NKF/NCA's Chairman of the Board Jeffrey A. Perlmutter, M.D. "In addition, we want to provide education in the detection and treatment of chronic kidney disease and I believe we are doing that."

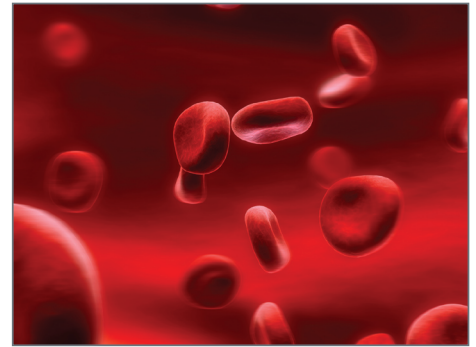
Kidney disease can be controlled with medication and lifestyle changes if detected in its early stages. Once the disease has progressed to kidney failure, it can only be treated with dialysis or kidney transplant. Nearly two-thirds of all new cases of kidney failure are caused by uncontrolled diabetes or high blood pressure, meaning that in most cases, kidney failure can be delayed or avoided.

The District screening initiative is part of the "Knock Out Kidney Disease" program, which encompasses all prevention initiatives of the Foundation including medical screening, consultation, referral, follow-up, public education, and primary care physicians' education. The goal of the KOKD program is to reduce the number of people requiring dialysis or kidney transplant in the future.

This program is funded wholly, or in part, by the Government of the District of Columbia Department of Health, Primary Care and Prevention Administration.

Other states can look to this D.C. example while exploring options for state-funded screening programs closer to home.

For 2007-08 screening locations or for additional information please visit [www.kidneywdc.org](http://www.kidneywdc.org) or call 202-244-7900



## Demographics of Screening Participants:

- 665 Female (57%)
- 504 Male (43%)
- 810 African-American (69%)
- 217 Caucasian (19%)
- 69 Asian (6%)
- 65 Hispanic (6%)
- 16-25; 58 (5%)
- 26-35; 124 (11%)
- 36-45; 186 (16%)
- 46-55; 312 (27%)
- 56-65; 299 (25%)
- Over 65; 188 (16%)

Source: National Kidney Foundation

Washington, DC and New York. All participants whose test results fall outside the normal range are contacted and encouraged to see a doctor for treatment. If individuals have no primary doctor or need social services, the American Kidney Fund's staff directs them to physicians and health centers in their communities that offer services at low or no cost. MIKE also offers follow-up workshops to educate affected individuals and their families about appropriate dietary choices, lifestyle modifications and treatment options that can forestall further kidney damage and inform their actions. Kidney disease touches one in nine American families.

Education and early intervention can delay or prevent the progression of this devastating disease. The American Kidney Fund welcomes the opportunity to work with interested state legislators and others to expand CKD outreach and screening efforts and to direct assistance to kidney failure patients in greatest need.

For more information, please contact Jill Adleberg at [jadleberg@kidneyfund.org](mailto:jadleberg@kidneyfund.org).

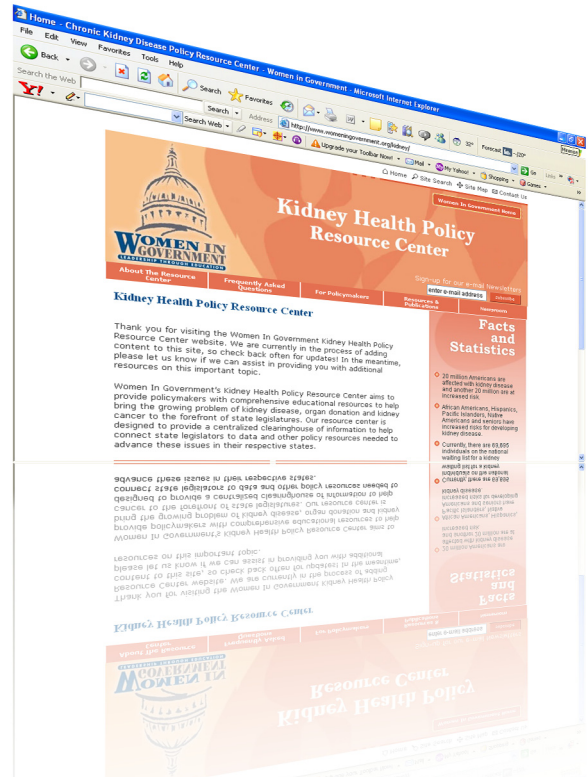
## WOMEN IN GOVERNMENT UNVEILS IMPROVED KIDNEY POLICY WEBSITE

Women In Government recently launched an enhanced version of its Kidney Health Policy Resource Center to make it easier to gain access to more information faster on the national non-profit's Website.

The resource center's Website serves as a clearinghouse of well-balanced information on what state policies are being addressed to combat the effects of kidney disease and kidney failure.

"We made the changes to improve the ease of finding valuable information on the website," said Kathryn Gucione, the manager of public policy and public relations for Women In Government.

The redesign went live on Oct. 31 and features several improvements to streamline the website's storehouse of factsheets, brochures, articles and sample policies. One of the modifications Women In Government is most excited about sharing with its friends are new navigation tools, including drop-down menus, e-newsletter sign-ups, and improved readability for people with visual impairments.



**CONTACT INFORMATION FOR: KIDNEY HEALTH POLICY RESOURCE CENTER**

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