

# Kidney Konnections

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Bay Area Association of  
**Kidney Patients**

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The Bay Area Association of Kidney Patients is an all-volunteer, non-profit organization formed to educate and support Bay Area kidney patients.

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## Autoimmune Disorders, Gout and Kidney Disease

By *Marco Martin*

At our most recent public gathering we welcomed Dr. Mark Genovese of Stanford University, Co-chief of the Rheumatology and Immunology division of Stanford University Medical Center. He is also an author of multiple journal articles and has been a guest lecturer at many venues throughout the nation. Our attendees always have the pleasure of not only receiving a presentation from a valuable source but the ability to ask questions specific to their particular circumstance. This two-way communication format is the essence of what the BAAKP contributes to the community.

Auto-immune diseases are essentially conditions where the immune system has malfunctioned, resulting in inflammation and damage to those cells and organs. There are over 100 known auto-immune disorders. Dr. Genovese focused his discussion on a few major auto-immune disorders that affect the kidneys either directly or indirectly. He covered Systemic Lupus, Sjogren's Syndrome, Rheumatoid Arthritis, among others.

The keystone for any auto-immune patient is an early and proper diagnosis. Early treatment can prevent further damage to the body

and kidneys. These diseases are usually treated with steroids, immunosuppressants, and blood pressure medication, although exercise and stress reduction are also encouraged.

**Systemic Lupus (SLE)** is a complex disease that can affect every organ and tissue in the body. Lupus involves the kidneys 75% of the time. It affects one in every 2,000 people, women more than men by 9:1; African-Americans are particularly susceptible. Patients suffer a wide variety of symptoms,



**Dr. Genovese**

but a common symptom is a rash across the face and nose caused by the inflammation. This can cause some doctors to confuse Lupus for a dermatological condition called rosacea. Lupus damages the kidney via a complex deposition of materials, immunoglobulin, antibodies, and other components deposit in the glomeruli. A standard treatment plan likely includes doses of

steroids and immunosuppressants.

**Rheumatoid Arthritis** affects 1% of the population. It is the constant presence of inflammation in the joints on both sides symmetrically and is undoubtedly caused by an immune system attack. People are remarkably tired and have stiffness after prolonged periods of inactivity. Kidney damage is a manifestation outside of the joints – yet this disorder does not generally lead to end stage damage for any organ. The link to kidney disease may be due to the inflammation that spreads about the body. More likely, however, it is medications. Anti-inflammatory drugs are used to treat arthritis and long-term use of these drugs can cause damage to the kidneys!

**Gout** is not so much an auto-immune disorder as it is a metabolic one. It is caused by too much uric acid in the blood. Uric acid is the by product of cellular activity. It comes from the building and destruction of cells (anabolic, catabolic). Uric acid can also be ingested from the foods that we eat, so it is unavoidable in our blood stream. Humans and other primates lack a specific enzyme that breaks down uric acid into a more disposable form.

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Therefore our kidneys must bear the full weight of completely removing this chemical, intact, from our bodies. As kidney function decreases, the ability to remove uric acid begins to dwindle. The extra uric acid floating about triggers the immune system. This in turn creates inflammation where the uric acid accumulates, usually the lower joints due to gravity and, unlike rheumatoid arthritis not necessarily on both sides. The crystal-like uric acid compounds end up in the kidneys and inflict unwanted damage. This in turn compounds the cycle with even more uric acid not being removed from the blood. Just a mild decrease in kidney function leads to a disproportionate increase in the likelihood of developing gout. Thus, given enough time, most all people with kidney disease develop this disorder.

A person can go for decades without any symptoms at all. The first episode, and hint of a problem, usually occurs for men between the ages of 40-60 and for women after 60 years of age. These episodes of pain from the inflammation can last days or weeks and can become more frequent with the passage of time. As a consequence, this constant supply of uric acid to the joints creates a condition of arthritis. The treatment again is the administration of low doses of steroids.

**IgA Nephropathy**—IgA stands for immunoglobulin A. It happens when something seems to set off the immune system after an upper respiratory infection. The body attacks the kidney directly with this disorder. The idea that something is wrong first appears with a sudden loss of renal function. Only a biopsy can detect the resulting deposits of IgA in the kidneys which translate into blood in the urine. This disease can be difficult to treat. The prognosis varies and the treatment options will invariably include steroids, blood pressure medications, and immune-suppressants. More than one specialist will be diligently involved in the patient's treatment for this serious condition.

### **Anti-inflammatory Drugs and Your Kidneys**

Anti-inflammatory drugs are typically used to treat arthritis and other auto-immune diseases but these drugs can cause damage to the kidneys. Be aware there are over 30 non-steroidal anti-inflammatory drugs (NSAIDs) available over-the-counter (without a prescription) including Aspirin, Aleve (Naproxen), and Ibuprofen (Advil, Motrin). However, Tylenol is not a NSAID and is considered benign. This is a vital area where a proper diagnosis (and prescription) is essential to protecting and extending the life of one's kidneys. Thankfully, there are newer medications available that target inflammation more at the core, rather than as a symptom.

### **Conclusion**

The vast number of things that can go wrong with the seemingly delicate auto-immune system requires a diagnosis and treatment plan specific to every individual. This is no place for a one size fits all approach. The importance of having a correct diagnosis – for loss of kidney function and other symptoms – is paramount so as to not damage the kidneys with the wrong medications. A kidney biopsy can aid in the diagnosis and treatment of the patient, once the likely presence of an auto-immune disease has been established. As difficult as things may become, do realize that many if not most of these auto-immune diseases can be combated with a well thought-out plan of attack, or in this case, counter-attack.

**Note:** This article only covers some of the auto-immune diseases Dr. Genovese discussed. A video of the entire presentation will be posted at [www.BAAKP.org](http://www.BAAKP.org).

## ***Other Local Kidney Support Groups & Meetings***

<b>Patient Support Group</b> Open to all pre-dialysis, dialysis, pre-transplant, and transplant patients, friends, and family  Meets at 1 pm the second Saturday of every odd month at: Kaiser Permanente-Santa Clara Hospital Building, 700 Lawrence Expressway, Santa Clara, CA  Contact: Lorraine Maloon, LCSW 408-851-1044	<b>T.R.I.O Transplant Recipients International Organization</b>  Silicon Valley Chapter Meets on the 2nd Thursday of each month at 7:30 pm. El Camino Hospital, Conference Room E, 2500 Grant Road, Mountain View, CA 94040 <a href="http://www.bayareatrio.org">www.bayareatrio.org</a> 408-353-2169	<b>San Francisco Polycystic Kidney Foundation</b>  For general PKD information, call: 1-800-PKDCURE  For information about local groups, go to: <a href="http://www.pkdcure.org/sanfranciscochapter">www.pkdcure.org/sanfranciscochapter</a>  For chapter specific questions, please send email to: <a href="mailto:sanfranciscochapter@pkdcure.org">sanfranciscochapter@pkdcure.org</a>	<b>The National Kidney Foundation of No. California &amp; No. Nevada</b>  Has many resources available and sponsors many events. For more info: <a href="http://www.kidneyca.org">www.kidneyca.org</a> 415-543-3303  <b>National Kidney Foundation</b> <a href="http://www.kidney.org">www.kidney.org</a>
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## Thank You to Our Supporters!

The BAAKP is grateful to Dr. Mark Genovese for taking time to prepare an interesting and informative presentation and for giving us his Sunday afternoon. Special thanks also to [Genzyme](#) Pharmaceuticals which continues to provide \$250 to support each meeting. Thank you to [Willows Market](#) for donating the speaker's gift. Thank you Linda Marocco from Bella Day Spa (650-322-2042) for the fabulous door prizes. And finally, thank you to the [Palo Alto Medical Foundation](#) for providing the meeting room and for their continuing support. Without the efforts of these community members, our programs would not be possible.

## Help Us Help Others

Who said "If you're not part of the solution, you are part of the problem?"\*

Each day the Bay Area Association of Kidney Patients works to educate and support those suffering with Chronic Kidney Disease. Our goal is to lift up those with CKD so that they are empowered in their fight to manage their health — whether it is through our information-packed presentations, our quarterly newsletters, or our website.

You can be part of the solution. Your generous response to our Spring Fundraising Campaign can make a huge difference.

Visit our website, [www.BAAKP.org](http://www.BAAKP.org), where you can make a secure, tax-deductible donation using a major credit card.

Another option is to send your tax deductible donation to our 501 (c) (3) fiscal agent Inquiring Systems, Inc. (ISI). Please make your check payable to ISI/BAAKP & mail to: Bay Area Association of Kidney Patients, PO Box 2332, Menlo Park, CA 94025-2332

Thank you for your generous support!

\* For you trivia buffs, the answer is Buell G. Gallagher, President of City College of New York in 1964 and later repeated by Eldridge Cleaver.

## Follow BAAKP on Twitter<sup>®</sup> and Facebook<sup>®</sup>

Did you know that you can stay up-to-date with BAAKP between our quarterly presentations? BAAKP now has accounts with Twitter and Facebook. Follow us on Twitter ([twitter.com/baakp](https://twitter.com/baakp)) and join our group on Facebook (search for Bay Area Association of Kidney Patients in the Facebook "Search" box).

## Living Well with Kidney Disease

By Linda Umbach

**This is the second in a series of articles about living with kidney disease. Send us your own tips and tricks; we will feature them in a future issue! Email us at [bay.area.kidney@gmail.com](mailto:bay.area.kidney@gmail.com).**

There's no denying that having Chronic Kidney Disease is a long haul. Maybe that's why they call it "Chronic"! As a person in charge of your health care, there are many important jobs you as the patient can do.

- **Read Everything You Can:** There is a wealth of kidney literature out there. The internet is the first place to go. The easiest places to start are [www.kidney.org](http://www.kidney.org) and [www.AAKP.org](http://www.AAKP.org). Visit your local library and look for the books on kidney disease. They are many books available on [www.Amazon.com](http://www.Amazon.com), or go to your local bookstore and ask them to order kidney disease books for you. (They also make great gifts — put them on your Christmas or Birthday lists.) Ask other kidney patients where they get their information. Check out the literature table at our BAAKP meetings.
- **About Itching:** Don't let the incidentals get you down! Kidney patients have dry skin and itch. If you are itching, fight it by keeping your skin from drying out. After your shower, seal in the moisture by using products that are solids at room temperature (such as Aquaphor). Liquids and even creams are not as good. Even inexpensive Vaseline helps. In desperation, try ice cubes to calm down the itch. Again, check your labs; getting your phosphate levels closer to normal ranges might help with the itching.
- **Splitting Fingernails:** Along with the dry skin is the tendency for nails to split, even split in layers. If they are giving you trouble, cut them with a clipper; not an emery board (it aggravates the splitting). Keep them moist (there's that Vaseline again). Try to stay away from drying detergents and chemicals.
- **Stay Positive:** The most important person to keep you going is yourself. Sure, your friends and family are there, but chronic kidney disease is your life. Live it under your own terms!

**Part 3 of this series will appear in a future newsletter.**

This newsletter is not intended to be a substitute for advice from your medical professionals. Please consult your physician or other medical professionals about any changes or additions you make to your kidney care.



# Bay Area Association of Kidney Patients

## ***Educating and Supporting Bay Area Kidney Patients***

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Please visit our website at  
[www.BAAKP.org](http://www.BAAKP.org)  
for back issues of  
our newsletters and videos  
of our past meetings!

*Newsletter publication dates are November, February, May and August  
If you've received an extra copy of this newsletter, please pass it along!*

### ***SAVE THESE DATES! General Meetings:***

- **May 23, 2010**  
**Understanding Your  
Lab Results with  
Dr. Brian Carrie**
- **October 3, 2010**  
**Dr. Toby Gottheiner on  
Blood Pressure & Kidney  
Disease & the BAAKP  
Birthday Party!**
- **January 2011**  
**UCSF Transplant Team  
with Dr. Tomlanovich**

### ***Steering Committee Meetings***

**Second Wednesday of  
every month at 6:00 pm**

*If you would like to join us in the  
leadership of this group, we would  
love to have your help.*

*(Call for location)*

**[bay.area.kidney@gmail.com](mailto:bay.area.kidney@gmail.com)  
650-323-2225**

## **“Understanding Your Lab Results” With Dr. Brian Carrie on May 23, 2010**

On Sunday, May 23<sup>rd</sup>, 2010, we are thrilled to have Dr. Brian Carrie educate the members of the BAAKP on “Understanding Your Lab Results.” He is a Nephrologist with El Camino Renal Medical Group in Mountain View and is also associated with the El Camino Hospital.

Dr. Carrie will discuss the various laboratory tests (blood, urine) that we as kidney patients take routinely. What are the normal results and what do any abnormal results mean? CBC with differential, hemoglobin, Comprehensive Metabolic Panel, potassium, glucose, creatinine, urinary protein, phosphorus are just a few



things that your doctor probably checks regularly. Bring your lab tests with you; this is your opportunity to get in-depth answers to those questions you think of AFTER you leave the doctor's office!

This free event will take place at the Palo Alto Medical Foundation, 795 El Camino

Real, 3<sup>rd</sup> floor Conference Room, Palo Alto, CA 94301 on Sunday, May 23, 2010 from 1 PM to 4 PM.

To reserve your seat, please email us at [bay.area.kidney@gmail.com](mailto:bay.area.kidney@gmail.com) or call us at 650-323-2225. You may also fax your reservation to 650-327-0178 or mail to BAAKP, Box 2332, Menlo Park, CA 94026.