

ESRD Patient News

The Carlisle-Williams Foundation, Inc.

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Self-care—You Have the Power

In this edition of *ESRD Patient News*, we help you manage and control your health to live your best life while on dialysis. Activity, in whatever form it takes, is always good. Get out there and move. See you in 2018.

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Stay Active and Healthy in the New Year

The year is fast coming to a close, and that can mean “recovering” from all of the rich foods that accompany this time of year and thinking about goals for the year ahead. Follow these tips to get off to a healthy start.

1. Stay active.

Being active is your secret weapon. It can help make up for eating more than usual in addition to other health benefits. Walking is a great way to be active. Here are tips to incorporate more walking into your activities:

- Skip the close-up parking spot. Park farther away and walk to your destination.
- Make a few extra laps around the mall. Walk the length of the mall before going into any stores. The mall is also a good place to walk to avoid bad weather.
- Whenever possible, take the stairs. Stretch your legs and take short activity breaks throughout the day.

2. Eat healthy.

Healthy eating is all about balance. You can enjoy your

favorite foods in moderation. The key is eating them only once in a while or in small portions and balancing them out with healthier foods.

• If you are traveling, take healthy snacks along, like fruit and nuts. It helps you avoid the temptation of convenience foods high in fat, sugar, and salt.

• If your favorite home recipes call for fried fish or chicken with breading, try healthier baked or grilled variations.

• Resolve to make new habits. This year, while at parties and other gatherings, fill your plate with fruits and veggies first, and pick small portions of just your favorites of the other items.

3. Plan activities that don’t involve eating.

In addition to enjoying a meal with friends and family around the table, take the party outside!

• Try a seasonal activity with your family. Go ice skating or jump start your bucket list for the year. Visit a museum, botanical garden, park, or exhibit.

• Make a “walk and talk” date with friend or family. Explore a part of your town that may be new to you.

As you wrap up 2017 and think about 2018, consider healthy traditions you can start.

<https://www.cdc.gov/features/stay-active/index.html?permalink=8644702>



ESRD Patient News—a publication of The Carlisle-Williams Foundation, Inc.—informs our readers of issues important to management and understanding of their disease and to further the Foundation’s mission of providing hope and support to ESRD patients. We welcome and encourage feedback through email (JanieC@esrd-patient-support.org) or by using the “Contact Us” form on the website. Thank you!

ESRD Patient News

Diabetes and Your Feet

There's a lot to manage if you have diabetes: checking your blood sugar, making healthy food, finding time to be active, taking medicines, going to doctor's appointments. With all that, your feet might be the last thing on your mind. But daily care is one of the best ways to prevent foot complications.

Between 60% and 70% of people with diabetes have diabetic neuropathy (nerve damage). You can have nerve damage in any part of your body, but nerves in your feet and legs are most often affected. Nerve damage can cause you to lose feeling in your feet.

Feeling No Pain

Some people with nerve damage have numbness, tingling, or pain, but others have no symptoms. Nerve damage can also lower your ability to feel pain, heat, or cold.

Living without pain sounds pretty good, but it comes at a high cost. Pain is the body's way of telling you something's wrong so you can

take care of yourself. If you don't feel pain in your feet, you may not notice a cut, blister, sore, or other problem. Small problems can become serious if they aren't treated early.

Risk Factors

Anyone with diabetes can develop nerve damage, but these factors increase your risk:

- Blood sugar levels that are hard to control
- Having diabetes for a long time, especially if your blood sugar is often higher than your target levels
- Being overweight
- Being older than 40 years
- Having high blood pressure
- Having high cholesterol

Nerve damage, along with poor circulation—another diabetes complication—puts you at risk for developing a foot ulcer (a sore or wound) that could get infected and not heal well. If an infection doesn't get better with treatment, your toe, foot, or part of your leg may need to be amputated (removed by sur-

gery) to prevent the infection from spreading and to save your life.

When you check your feet every day, you can catch problems early and get them treated right away. Early treatment greatly reduces your risk of amputation.

Start Off on the Right Foot

What's the most important thing you can do to prevent nerve damage or stop it from getting worse? Keep your blood sugar in your target range as much as possible. Other good diabetes management habits can help, too:

- Don't smoke. Smoking reduces blood flow to the feet.
- Follow a healthy eating plan, including eating more fruits and vegetables and less sugar and salt.
- Get physically active — 10 to 20 minutes a day is better than an hour once a week.
- Take medicines as prescribed by your doctor.

<https://www.cdc.gov/features/diabetesfoothealth/index.html>

Tips for Healthy Feet

There are some things you can do to help prevent foot problems like neuropathy, or to catch it early for treatment.

Check your feet every day for cuts, redness, swelling, sores, blisters, corns, calluses, or any other change to the skin or nails. Use a mirror if you can't see the bottom of your feet, or ask a family member to help.

Wash your feet every day in warm (not hot) water. Don't soak your feet. Dry your feet completely and apply lotion to the top and bottom of your feet, paying special attention to your heels. Do not put lotion between your toes as this could lead to infection.

Never go barefoot. Always wear shoes and socks or slippers, even inside, to avoid injury. Check that there aren't any pebbles or other objects inside your shoes and that the lining is smooth.

Wear shoes that fit well. For the best fit, try on new shoes at the end of the day when your feet tend to be largest. Break in your new shoes slowly—wear them for an hour or two a day at first until they're completely comfortable. Always wear socks with your shoes.

Trim your toenails straight across and gently smooth any sharp edges

with an emery board. Have your foot doctor (podiatrist) trim your toenails if you can't see or reach your feet.

Don't remove corns or calluses yourself, and especially don't use over-the-counter products to remove them—they could burn your skin.

Get your feet checked at every health care visit. Also, visit your foot doctor every year (more often if you have nerve damage) for a thorough exam, which will include checking for feeling and blood flow in your feet.

Keep the blood flowing. Put your feet up when you're sitting, and wiggle your toes for a few minutes several times throughout the day.

Choose feet-friendly activities like walking, riding a bike, or swimming. Be sure to check with your doctor about which activities are best for you and any you should avoid.

Be sure to ask your doctor what else you can do to keep your feet healthy.

When To See Your Doctor

If you experience any of the following symptoms, don't wait for your next appointment. See your

regular doctor or foot doctor (podiatrist) right away:

- Pain in your legs or cramping in your buttocks, thighs, or calves during physical activity.
- Tingling, burning, or pain in your feet.
- Loss of sense of touch or ability to feel heat or cold very well.
- A change in the shape of your feet over time.
- Loss of hair on your toes, feet, and lower legs.
- Dry, cracked skin on your feet.
- A change in the color and temperature of your feet.
- Thickened, yellow toenails.
- Fungus infections such as athlete's foot between your toes.
- A blister, sore, ulcer, infected corn, or ingrown toenail.

Most people with diabetes can prevent serious foot complications.

Regular care at home and going to all doctor's appointments are your best bet for preventing foot problems (and stopping small problems from becoming serious ones).

<https://www.cdc.gov/features/diabetesfoothealth/index.html>

New Technologies can Make Managing Diabetes Easier

The Carlisle-Williams Foundation Inc. is a 501(c)(3) nonprofit charity. Consider making a tax-deductible donation to help us in our mission to reduce hospital stays and increase approval for kidney transplant, by improving dialysis patients' compliance with treatment.

Diabetes is a serious disease that happens when your body has trouble managing and using blood glucose, a sugar that your body uses as fuel. When you have diabetes, you must actively take on this process yourself.

New technologies are being tested to make it easier for you to control diabetes and to help you stay healthy.

More than 100 million Americans are living with diabetes or prediabetes, a condition where blood glucose levels are higher than normal, but not high enough to be considered diabetes. People with diabetes must frequently check their blood glucose (or blood sugar) and take quick action if it gets too high or low. They must also constantly consider how all meals, physical activity, and things like stress will affect their blood glucose.

Types of Diabetes

How people with diabetes manage their blood glucose levels depends, in part, on the type of diabetes they have. The most common are type 1, type 2, and gestational diabetes.

With type 1 diabetes, your body doesn't make enough of a hormone called insulin. Insulin signals the body's cells to let glucose inside. The body can't produce enough insulin because the immune system mistakenly attacks and destroys the cells in your pancreas that make insulin.

Type 2 diabetes—the most common—occurs when either your body's cells have trouble using insulin or your body doesn't produce enough insulin to handle the glucose in your blood.

Gestational diabetes occurs only during pregnancy, but increases your chances of developing type 2 later in life.

Diabetes symptoms can vary by type. Shared symptoms include increased thirst, hunger, and urination. Symptoms of type 1 can start quickly, over a few weeks. Type 2 symptoms tend to develop slowly over years, making them less noticeable.

Blood Glucose Control

Many people with diabetes check their blood glucose with a blood glucose meter.

This device measures how much glucose is in the blood using a drop of blood from pricking the side of your fingertip with a small, specialized needle. Then you apply the blood to a test strip. The meter shows you how much glucose is in your blood at that moment.

People with type 1 diabetes, and some people with type 2, correct and manage their blood glucose with injections of synthetic insulin. A missed, or miscalculated, dose can lead to serious complications, immediately and over time. Diabetes increases your risk for blindness, heart disease, stroke, kidney failure, and amputation.

"It's a significant burden to self-test sugar levels several times a day, count carbohydrates with each meal, take into account the impact of physical activity, and then calculate the amount of insulin you need to inject multiple times a day with a syringe or the help of an insulin pump," explains Dr. Guillermo Arreaza-Rubín, who heads NIH's Diabetes Technology Program. Any error in this management may lead

Help from Technology to Manage Diabetes

to life-threatening complications like severe hypoglycemia, which is very low blood glucose.

“Hypoglycemia is one of the main reasons people with type 1 visit hospital emergency rooms every day,” Arreaza-Rubín says. “It happens more frequently during the night and is a major cause of fear and anxiety among people with diabetes and their families.”

Help From Technology

NIH funded-scientists are testing promising technologies to help people better manage diabetes. The devices vary in how easy they are to set up and use.

“Our device, called the iLet, is designed to minimize the guesswork and time drain that comes with managing type 1 diabetes,” says Dr. Edward Damiano, a biomedical engineering expert at Boston University, who co-founded a company to further develop the technology. The device only requires that you type in your body weight to get started. “The system does the heavy lifting of regulating blood glucose, freeing up the user to live a less burdened and more spontaneous life.”

Previous studies have shown that artificial pancreas systems can be safer than the current

standard for insulin delivery. Several different devices are now being tested in more people for longer periods of time. Researchers are looking at safety, user-friendliness, the physical and emotional health of the participants, and cost.

Safety is a priority for researchers. “When people with type 1 exercise, their blood glucose can respond in unpredictable and potentially dangerous ways,” explains University of Virginia engineer Dr. Marc Breton. He led a recent study that showed an artificial pancreas system improved glycemic control and reduced hypoglycemia in adolescents with type 1 diabetes as they participated in winter sports, like skiing and snowboarding.

“The artificial pancreas performed very well in an extremely challenging environment,” he says. “Eventually, it may allow people with diabetes the freedom to participate safely in physical activities that they likely avoided in the past.”

One FDA-approved artificial pancreas is already available for people with diabetes. Devices that are more fully automated may become available to the public within the next couple years. Researchers are considering how

to use these systems for people with type 2, gestational diabetes, and other conditions involving elevated blood glucose levels.

Other scientists are taking different approaches to replace insulin more effectively. For example, “smart insulins” would become active only when needed. Researchers are also looking for ways to regenerate or replace insulin-producing cells—and to stop the body from attacking them.

“These technologies will help make managing diabetes easier and will help make people who use them healthier,” says Damiano. “I see them as a bridge to a cure for type 1 diabetes.”

While future tools may make it easier to manage your diabetes, you can learn how to manage diabetes with the tools we have now to live a long, healthy life. Medications, glucose monitors, and insulin pumps are all available now to help people with diabetes. If you have diabetes, talk with your health care provider about your options.

<https://newsinhealth.nih.gov/2017/12/managing-diabetes>

Clinical trials are ongoing to test new technologies specifically for diabetics. Visit www.nih.gov to search for trials.

Improve Your Heart Health—Make Healthy Choices

Wise Choices For Healthy Blood Pressure

Keep a healthy weight. Ask your doctor if you need to lose weight.

Be physically active. Get moving for at least 30 minutes most days of the week.

Eat a healthy diet. Choose an eating plan rich in vegetables, fruits, whole grains, and low-fat dairy and low in saturated fat and added sugars.

Cut down on salt. Many Americans eat more sodium (found in salt) than they need. Most of the salt comes from processed food (such as soup and baked goods).

Drink alcohol in moderation, if at all. Men should have no more than 2 drinks a day; women no more than 1 drink a day.

Don't smoke. Smoking raises your risk for heart disease, stroke, and other health problems.

Get a good night's sleep. Tell your doctor if you've been told you snore or sound like you stop breathing briefly when you sleep—a possible sign of sleep apnea. Treating sleep apnea and getting a good night's sleep can help reduce blood pressure.

Take prescribed drugs as directed. If you need drugs to help lower your blood pressure, you still should follow the lifestyle changes described above.

<https://newsinhealth.nih.gov/2016/01/blood-pressure-matters>

<https://newsinhealth.nih.gov/2016/01/blood-pressure-matters>

Talk with your doctor about your risk of heart disease and what you can do to keep your heart healthy.

“The most important things for everyone to do to keep their heart healthy—to keep their entire body healthy—is to eat a healthy diet, get plenty of physical activity, maintain a lean body weight, and avoid smoking and exposure to secondhand smoke,” Goff says.

Following a heart-healthy eating plan is important for everyone.

“When someone puts food on their plate, about half the plate should be fruits and vegetables. About a quarter of the plate should be whole grain. And about a quarter should be lean protein, like lean meat or seafood,” says Goff.

If you have high blood pressure, you may want to follow the DASH (Dietary Approaches to Stop Hypertension) diet. This diet emphasizes fruits, vegetables, whole-grain foods, and low-fat dairy products. To learn more about the diet, visit website—www.nhlbi.nih.gov/health/health-topics/topics/dash.

Goff also advises, “Avoid foods that have a lot of salt in them. Salt is a major contributor to high blood pressure and risk of heart disease.”

Prevent Diabetes

Diabetes increases your chances of high blood pressure and high cholesterol. You're also more likely to develop heart disease and have a heart attack.

“Having diabetes is almost like already having heart disease,” says Dr. Larissa Avilés-Santa, a diabetes and heart health expert at NIH. She oversees a large NIH study of heart disease risk factors among more than 16,000 Hispanic/Latino adults.

Avilés-Santa says that sometimes people think that they will develop diabetes and heart disease no matter what they do. But that's not true. Even if you have a family history of these diseases, you can be the messenger of good health for your family, she says. You can help your family by inspiring healthy habits.

The best way to prevent diabetes is through diet and physical activity. “The evidence is outstanding that very modest changes in lifestyle could reduce the risk of developing diabetes much greater than medication,” Avilés-Santa says.

<https://newsinhealth.nih.gov/2017/11/healthy-body-happy-heart>

Skin Health—Crucial to the Dialysis Patient

Skin health is essential to overall health. The skin is the largest organ of the body and plays an important role in protecting it. Skin holds in body fluids, prevents dehydration and keeps out harmful germs. It's important to keep your skin healthy to prevent sickness or damage to the bones, muscles and internal organs. Here is information on three skin disorders to watch.

Atopic dermatitis causes the skin to become extremely itchy. Often, for those who have this condition, the skin gets worse and then it improves or clears up. The new NIAMS health topic page on atopic dermatitis (<https://www.niams.nih.gov/health-topics/atopic-dermatitis>) describes the different types of dermatitis and provides a list of things that make atopic dermatitis worse as well as treatment suggestions.

Points To Remember About Atopic Dermatitis

Atopic dermatitis is the most common kind of eczema, a term that describes many kinds of skin problems.

The disease causes the skin to become very itchy. Scratching leads to redness, swelling, cracking, “weeping” clear fluid, crusting, and scaling.

Often, the skin gets worse, and then it clears up.

Treatment usually includes medications, proper skin care, and avoiding things that cause allergies.

Avoid scratching itchy skin, which only worsens symptoms.

You should not get the smallpox vaccine if you have atopic dermatitis.

Psoriasis is an autoimmune skin disease that causes red, scaly skin that may feel painful, swollen or hot. People with psoriasis are more likely to get some other conditions, such as cardiovascular problems and diabetes. This online resource (<https://www.niams.nih.gov/health-topics/psoriasis>) describes what psoriasis is, what causes it and what the treatment options are. It also features publications that can be ordered or downloaded.

Points To Remember About Psoriasis

Psoriasis is an autoimmune disease that causes red, scaly skin.

It is caused by genes, meaning it runs in families, but some outside factors can make it worse or trigger flares.

Psoriasis can be hard to diagnose because it can look like other skin diseases.

Your doctor may recommend creams, ultraviolet light therapy, prescription medications, shots, or some combination of these treatments.

You may have to try a couple of different treatments before finding one that helps you.

Joining a support group helps some people with psoriasis cope with the disease.

Scleroderma is the name for a group of diseases that cause patches of tight, hard skin. Some forms of scleroderma can also damage blood vessels and internal organs. On this webpage (<https://www.niams.nih.gov/health-topics/scleroderma>), you can learn about the different forms of scleroderma and get information on diagnosis and treatment, including what people can do to help manage their disease and the problems associated with it.

Points To Remember About Scleroderma

Scleroderma causes thick, hard patches of skin.

Symptoms of scleroderma vary a lot, depending on the type of disease you have.

There is no cure for scleroderma, but you can reduce damage from the disease with proper treatment.

Since some types of scleroderma can cause serious damage to your internal organs, it is important to monitor your health and let your doctor know if you notice any new symptoms.

Honoring Health: Resources for American Indians and Alaska Natives from the U.S. Department of Health & Human Services November 2017

ESRD Patient News

Know the Science of Health

Here is a really fun, cool thing to do. Check out the website listed at the end of the article and start exploring.

You probably often hear or read about the results of health research studies. Want to better understand the complex science that relates to health research?

Explore the interactive modules, quizzes, and videos created by National Institutes of Health’s National Center for Complementary and Integrative Health. These tools can help you weigh what you hear and read.

Knowing the science can help you make educated decisions about your health.

Visit the website:

<http://nccih.nih.gov/health/know-science>

How can we help ?

Visit our website

www.esrd-patient-support.org



The Carlisle-Williams Foundation Inc.
16 Lexington Avenue – Norwich, CT 06360
www.esrd-patient-support.org

Thank you for considering a donation to the Carlisle-Williams Foundation. Your donation will help in our mission of reaching everyone on dialysis with a comfort/support bag, quarterly newsletters, emotional and vocational support to stay the course. Dialysis isn't easy and the Carlisle-Williams Foundation seeks to ease some of the discomfort and loneliness often experienced with dialysis, and increase compliance with treatment. Rest assured that every cent donated to the Foundation – a 501(c)(3) public charity - goes directly to supporting our mission.

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