

The Nephron!

Filtering Information to our Renal Patients



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If you have ideas or suggestions for what you would like to see in this newsletter or if you would like to receive this newsletter by e-mail please contact Connie Spears at 905-522-1155 x35170 or cspears@stjoes.ca





The 2016 Kidney Walk is just around the corner! Come out and support the Kidney Foundation's quest to ease the burden for those affected by Kidney Disease.

Whether you live in **Caledonia** or **Hamilton**, there is a walk location that is right for you.

REGISTER TODAY at www.kidneywalk.ca OR contact **PATRICK COOK** at 289-237-9499

Walk Dates and Locations:

Caledonia – Kinsmen Park, 49 Caithness St. W
Saturday October 1st, 2016
9:00am Registration
10:00am Walk Start

Hamilton – Mountain Drive Park, 935 Concession Street
Sunday October 2nd, 2016
9:00am Registration
10:00am Walk Start



For more information please contact Patrick Cook (289)-237-9499 or send him an email at pcook@kidney.on.ca



Event Details

Thursday December 1st, 2016

Marquis Gardens - 1050 Rymal Rd East, Hamilton

Cocktails: 6:30pm-7:30 pm

Food, Silent Auction and Presentation: 7:30pm-9:30pm

Impressions 2016

In its 6th year, **Impressions** has celebrated the work of The Kidney Foundation of Canada and our collaborative relationship with the renal and research programs at St. Joseph's Hospital and McMaster University in Hamilton, ON. During that time several individuals have exemplified the spirit in which Impressions was established.

To that end, in 2016 we are taking the time to recognize past Chairs of the event. In 2010, the Hamilton Chapter set out to recognize Pioneers, Innovators, Leaders, and Caregivers. During that time over \$150,000 has been raised, funding valuable research and providing direct benefit to patients and their families. Also during this time period, the Kidney Foundation has invested over \$1 million dollars in the Hamilton research community, as well as over \$125,000 in direct patient supports (financial assistance, patient manuals, Camp Dorsett, etc.)

We are seeking your support as we acknowledge the efforts of the individuals that have supported the Foundation through Chairing our past events. Without their energy, enthusiasm, and unwavering support, Impressions would not have been possible. Please join us as we recognize:

Dr. Azim Gangji	Dr. Christine Ribic	Dr. Scott Brimble	Dr. Euan Carlisle	Dr. Darrin Treleven
	Dr. Anil Kapoor	Dr. Alistair Ingram	Dr. Rick C. Austin	Dr. Peter Margetts

For more information OR to purchase TICKETS, please contact:

Patrick Cook

289-237-9499

pcook@kidney.on.ca

Living Donation

Living Donation occurs when a living person donates an organ or part of an organ for transplant to another person in need.

It is one of the most important sources of organs for transplantation. It accounted for 255 transplants in Ontario in 2012 and represents a significant portion of the increase in organ donation over the past ten years. However, the availability of organs from living donors does not meet the crucial need of approximately 1,600 Ontarians on transplant waiting lists. This is why it is critically important to encourage colleagues, friends and family to consider registering their consent to organ and tissue donation.

Living donors are most often family members or close friends of the recipient. Other types of living donation are available and include anonymous donation, list exchange and paired exchange.

To find out more about living donation, or if you know someone who might be interested in being a living donor please contact the Living Donor Program at the email or phone number listed below.

Are you thinking
about being a
kidney donor?

Our living donor transplant team can help.

For more information on kidney donation

Call: 905-522-1155 ext. 32156

Email: livingdonors@stjoes.ca

St. Joseph's
Healthcare  **Hamilton**

www.stjoes.ca

PKD FOUNDATION OF CANADA HAMILTON CHAPTER



Fall Coffee Talk

A place for all those affected by PKD to connect.

Patients. Family members. Caregivers. Newly diagnosed, pre-dialysis, dialysis patient or transplant patient. Everybody welcome.

November 6th, 2016 | 2:00-4:00 PM

Williams Fresh Café—47 Discovery Dr, Hamilton, ON L8L 8B4 | Free Parking.

Did you know?

PKD affects 1/500 people. That means that in Hamilton there are roughly 1,000 people affected by PKD. Some may not even know it yet. Many are in the early stages of the disease and may qualify for new treatment options. Many are currently in renal failure. Whatever stage you are at – you are not alone!

Want to help?

We've got lots of events coming up and could use your help. From planning to execution if you have a little bit of time or a lot we would greatly appreciate a helping hand.

Stay in touch

Never miss an event or update.

hamiltonchapter@endpkd.ca

www.facebook.com/PKDFOCHamiltonChapter/

1-877-410-1741



Hamilton City Hall was lit up teal for PKD Awareness Day

The Grief Process

In the face of loss, we grieve. Queen Elizabeth is quoted as saying “Grief is the price we pay for love”. Grief is a natural process; it’s how our psyche handles the changes and chances that this life brings. Grief has distinct phases or tasks that we engage in, depending upon the kind of grief we are experiencing. We can experience grief related to chronic health issues, through a divorce, when we lose a job or because of financial strain, or over our own approaching death – but often the hardest grief is over losing a loved one. A fresh grief can be impacted by earlier losses that were traumatic, so many of us are at times caught up with processing some kind of grief.

“Grief is a journey, often perilous and without clear direction. The experience of grieving cannot be ordered or categorized, hurried or controlled, pushed aside or ignored indefinitely. It is inevitable as breathing, as change, as love. It may be postponed, but it will not be denied.” Molly Fumia in *Safe Passages*, (2003).

Grieving a loss is not something we can skip over, but each one of us experiences grief according to our own timetable. When it comes to losing a loved one, the grief process can naturally occur over 3 – 5 years. Yet family members often become impatient, expecting a long-time spouse to have healed within one short year.

Models of Grieving

Psychologists have formulated many different models of grieving – we’re all familiar with Elizabeth Kubler-Ross’s five stages of: denial, anger, bargaining, depression and acceptance. Contemporary grief theorists have also added numbness, acknowledging that we are so inundated by stress in our lives that we can’t feel anything at first. The shock associated with amputation is not to be underestimated. At the outset, some patients seem to prefer death to living without a limb. Recovery from amputation may be impacted by other chronic conditions let alone the emotional pain; patients can benefit from grief counselling because of this kind of loss.

The Effects of Grief

The effect of grief can be quite pervasive, including: an inability to concentrate, lack of motivation, difficulty making decisions, confusion, anger, memory lapses, deep worry about personal issues or finances, changes in appetite, sleep habits and energy levels, withdrawal from social situations and increased risk of illness or injury.

What Can Help

It takes courage to deal with grief. Let the tears come, especially in the early stages. We grieve because we’re sad and that is an emotion our society sometimes has little patience for. Be gentle with yourself or a loved one who is grieving. Family

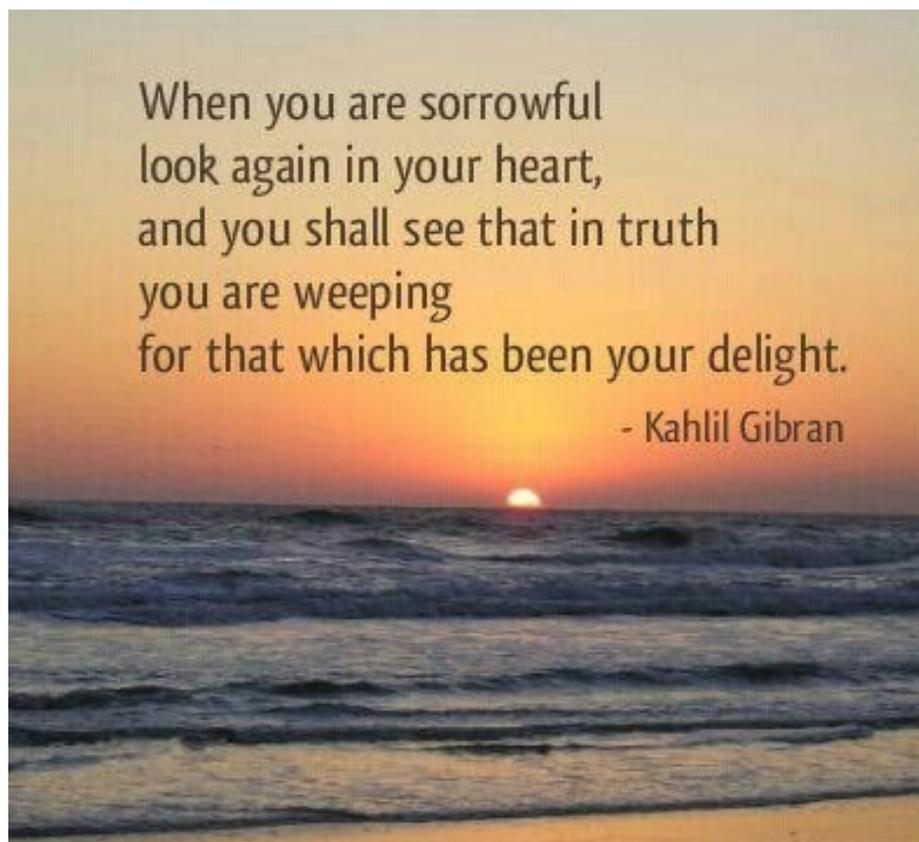
balance can be set upside-down by a big loss and it may take a long time to restore equilibrium. Acknowledge your emotional pain – to yourself and with family, friends. Talk to others who have experienced similar losses.

If emotions become overwhelming, seek professional help – it is not a good idea to turn family or friends into your therapist because helping you can quickly become overwhelming for them.

If you are grieving the death of a loved one, you don't need to move on in a world that erases their memory – keep them present in your thoughts in a way that is comfortable and easy for you. Find healthy ways of keeping a connection with them, such as visiting their grave and keeping their photos around. When you feel ready, reach out to friends and communities that have supported you in the past, be it your church or social groups.

Grief is a journey; it has a beginning, middle and an end. The safest way to grief a loss is to give yourself time to heal – take all the time you need.

Lucinda Landau, RP, MDiv, DMin (cont'd)
Certified Spiritual Care Specialist CASC
Registered Psychotherapist, CRPO
Spiritual Care Staff,
Spiritual Care Department



Chicken Pot Pie from www.myspiceitup.ca

Ingredients

3 tablespoons butter
 1/2 cup yellow onion, diced
 2 cloves garlic, minced
 1 cup frozen peas
 1 cup frozen corn niblets
 1/3 cup all purpose flour
 3 cups no salt added chicken broth
 1/4 cup milk
 3 cups cooked chicken, diced
 1/4 teaspoon ground black pepper
 1 teaspoon garlic powder
 1 teaspoon poultry seasoning
 2 tablespoons fresh tarragon, chopped
 2 tablespoons fresh parsley, chopped
 1 store bought 9 inch pie shell, frozen
 1 egg, whisked



Nutrient Analysis

PER SERVING:

1/6 of recipe

RENAL EXCHANGE:

3 Protein + 2 Starch + 1 Vegetable

Calories 370Kcal

Protein 26g

Carbohydrates 29g

Fibre 3g

Total Fat 16g

Saturated Fat 5g

Cholesterol 95mg

Sodium 261mg

Potassium 388mg

Phosphorus 289mg

Preparation

1. Preheat oven to 425°F.
2. In a large saucepan, heat the butter over medium heat. Add the onion and garlic and sauté until the onions begin to soften. Add peas and corn and continue to sauté.
3. Add the flour to the vegetable and stir to coat.
4. Add the chicken broth and milk to the floured vegetables. Stir to dissolve all the flour particles.
5. Add the cooked chicken and dry spices and simmer until the sauce thickens.
6. Turn off the heat and stir in the fresh tarragon and parsley.
7. Pour the chicken mixture into a 9 inch casserole dish and place the pie shell on top. Brush with whisked egg to obtain a golden crust.
8. Bake at 425°F for approximately 30 minutes.

Tips

You can also make this recipe in individual ramekins, the cooking time will be the same.

You can prepare the pot pie and freeze it for future use.

To cook the pie from frozen, preheat the oven to 400°F. Cover the pot pie with aluminum foil and bake for 40 minutes. After 40 minutes, remove the foil and continue to bake for another 35 minutes.

WHAT'S NEW IN THE RENAL DIET?

BY JUNE MARTIN, RD, CDE

Nutrition research seems to be constantly evolving and changing! And so does our food supply. This can make life confusing, especially for a kidney patient.

Renal diet recommendations and the foods we are eating have changed dramatically in the fifteen years that I have been practicing.

Label reading is key

When I started as a renal dietitian, we advised our patients to stay away from processed cheeses and colas because these foods contain phosphate additives. Now we spend much of our counselling time focusing on label reading for these different phosphates. Commonly found in meats, cereals, creams, non-dairy creamers and snack foods, phosphates are being increasingly identified as a major contributor to high phosphorus. Check the ingredients lists for: sodium phosphate, phosphoric acid, potassium phosphate, sodium hexametaphosphate, etc.

If you've had the same kidney diet for a long time then I'd strongly suggest a meeting with a renal registered dietitian (RD) for an individualized update. Here are some of the changes:

Phosphorus:

OLD: Use non-dairy creamers (edible oil products) to replace milk in your kidney diet.

NEW: Choose unfortified rice or almond beverage as a better alternative to milk. Many non-dairy creamers have added phosphates.

Potassium:

OLD: Most of the potassium in what we eat comes from fruits, vegetables and dairy products. Avoid high-potassium fruits and vegetables to keep your potassium under control.

NEW: Check food labels on meat for "potassium lactate", a new additive in meats. Just three slices of an oven-roasted turkey breast with potassium lactate has more potassium than a banana! And watch out for low-sodium products that have been treated with "potassium chloride" to replace the taste of sodium. Avoiding high-potassium fruits and vegetables is still important for those on a potassium restriction.

Bioavailability and Digestibility of Phosphorus:

OLD: Choose only white bread, white rice and white pasta to lower your phosphorus intake.

NEW: The phosphorus in whole wheat rice and pasta is very poorly absorbed and most patients can safely include some whole wheat rice and pasta as long as potassium is well controlled.

Vegetarian diets:

OLD: Vegetarian diets are not safe for kidney patients at any stage of chronic kidney disease (CKD).

NEW: In the early stages of CKD, vegetarian protein may actually be beneficial for patients. The higher phosphorus in dry beans and legumes is actually very poorly absorbed. A renal dietitian can help ensure you get enough protein. If you require a low-potassium diet, it is very important to talk to a dietitian about how to safely include vegetarian sources of protein and how to be sure to get the right amount for you.

Bottom line:

No matter what the research says, it's critical that you talk to your healthcare team to find out what applies to you! Your renal dietitian can help you interpret the latest research and explain how it applies to your individual situation.

Pumpkin Cheesecake Bars

Recipe submitted by DaVita dietitian Maryann from Virginia.

Portions: 16

Serving size: one bar, 2-inch square

Ingredients

- 5 tablespoon butter
- 8 ounces cream cheese
- 1 cup all-purpose flour
- 1/3 cup golden brown sugar
- 3/4 cup granulated sugar
- 1/2 cup pureed pumpkin
- 2 large eggs
- 1-1/2 teaspoons ground cinnamon
- 1 teaspoon ground allspice
- 1 teaspoon vanilla extract

Preparation

1. Preheat oven to 350° F.
 2. Set out butter and cream cheese to soften.
 3. In a medium bowl combine flour and brown sugar. Cut in butter to make crumb mixture.
 4. Set aside 3/4-cup mixture for topping. Press remaining mixture into bottom of a 8" x 8" x 1-1/2" baking pan.
 5. Bake for 15 minutes and remove from oven. Cool slightly.
 6. Lightly beat eggs. Combine cream cheese, sugar (or substitute Splenda®), pumpkin, eggs, cinnamon, allspice and vanilla in large mixer bowl. Blend until smooth.
1. Pour mixture over baked crust. Sprinkle with reserved topping.
 2. Bake an additional 30-35 minutes.

Cool before cutting into bars.

Renal and renal diabetic food choices: 1 high calorie, 2 fat

Carbohydrate choices: 1-1/2

Helpful hints

- Be sure to pack brown sugar when measuring 1/3 cup.
- Substitute Splenda® granular sweetener for 3/4 cup sugar to reduce carbohydrate to 14 grams per serving.
- Pumpkin is high in potassium but the small amount per serving keeps this recipe kidney-friendly.



Nutrients per serving

- **Calories** 184
- **Protein** 2 g
- **Carbohydrates** 22 g
- **Fat** 10 g
- **Cholesterol** 52 mg
- **Sodium** 84 mg
- **Potassium** 62 mg
- **Phosphorus** 40 mg
- **Calcium** 28 mg
- **Fiber** 0.6 g