

Vascular Action Chronicles

Interventional Nephrology by Nephrologists

Getting to Know You

A discussion with Dr. Baudouin Leclercq

1.) Tell us a little about yourself...

I have been married for 30 years and have two children. I am an avid wine drinker and connoisseur. I spend about 150 minutes a week riding my bicycle for exercise. Some say I am a good chef. I do all the grocery shopping and the cooking at my house as well as it is my job to unload the dishwasher!

2.) What do you think is the most important ingredient in cooking and why?

Butter. The essence of cooking is through butter.

3.) What made you want to become a doctor?

My mother! She told me everyday from the day I was born that I was going to become a doctor. I'm not sure if I would choose it again, if I had a choice. I would probably go into theoretical economics like my father.

4.) What made you choose Nephrology?

Nephrology is the most exact specialty in internal medicine.... There is no room for doubt. It is very logical and is based on exact facts.

5.) Explain KT/V...

K is the size of the artificial Kidney. T is the amount of time the machine runs each dialysis treatment. V is the volume of fluid (weight) inside each patient. [Prescribed] KT/V is the formula that your doctor uses to prescribe your dialysis treatment.

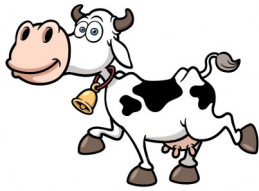
End Stage Renal Disease and Your Options

End-stage renal disease (ESRD) is the final stage of Chronic Kidney Disease whereby the kidneys no longer function to clear the body's waste from every day life. The two most common causes of ESRD are high blood pressure and diabetes. Other factors that play a role in this disease are age, ethnicity, auto-immune diseases, and trauma.

Initially the diagnosis of ESRD may seem like a death sentence for patients, however, there are options for patients who are diagnosed with ESRD. Four options available to ESRD patients are:

- 1.) Hemodialysis
- 2.) Peritoneal Dialysis
- 3.) Kidney Transplant
- 4.) Abstinence of Treatment

We will discuss these options individually in the next few issues. Each option has its own unique benefits and consequences. Everyone's own life situation will dictate which option is best for them. Our goal with these articles is to shed light on the various different options and enable you, the reader, your family, and friends a deeper understanding of the world of the kidney patient.



Joke of the day

Why do cows wear bells?
Because their horns don't work.

Did you know?

- 1.) We use a diagnostic tool that is used by NASA, police departments, whales, and bats. Can you guess what it is?
- 2.) Which medical condition seems to improve and/or disappear once you start dialysis?

Answers: 1.) doppler effect 2.) diabetes

Fun fact...

When your kidneys stop working, your body doesn't get rid of the natural insulin produced in your pancreas as easily. Therefore, your own body's insulin continues to work longer to control your blood sugar giving the illusion of "cured diabetes".

The Manager's Message

As the manager of Vascular Action, I have seen firsthand the growth of our center and the improved health of our patients. This growth is based on our patient's satisfaction and trust in the services we offer. This positive result is also attributed to the fact that vascular access care is given by *nephrologists* whose expertise and field of specialty are focused only on dialysis vascular access. It allows us to understand better by experience the problems met by the dialysis patient and the dialysis staff. We are convinced that a healthy dialysis vascular access is the best way for our patients to stay healthy. We will continue to provide quality care to ensure that our patients will not have to worry about missing dialysis treatments because of access failure. Our success is measured by the number of patients with an open vascular access and our continued growth confirms the quality of care that our center offers.

Billing Notes:

After your doctor's visit, we send an invoice to your health insurance. It is very important to let us know which insurance you have.

- All your expenses might be paid;
- You could have a co-pay balance;
Or
- We might be able to bill a secondary insurance.



Please feel free to call the billing office. We are here to help find the best solution for you. (352)-789-1816

Nurse's Notes:

Electrolyte Balance is very important in maintaining your best health.

Being mindful of your lab values each month is one way to help keep you on track with your diet and fluid intake.

As your doctor monitors and reports your lab values to you, make a note of the values that are out of range and ask for suggestions to help correct them.

You are the best advocate for yourself. Ask questions and follow instructions!

Your participation in your care is the key to successful treatment!

Parsley Burgers

Yield: 4 servings
Serving size: 1 patty,
3-ounces

Ingredients:

- 1 pound lean ground beef or ground turkey
- 1 tablespoon lemon juice
- 1 tablespoon parsley flakes
- ¼ teaspoon black pepper
- ¼ teaspoon ground thyme
- ¼ teaspoon oregano

Directions

1. Mix all ingredients thoroughly.
2. Shape into 4 small patties about ¾" thick.
3. Place on lightly greased skillet or broiler pan.
4. Broil about 10-15 minutes, turning once.

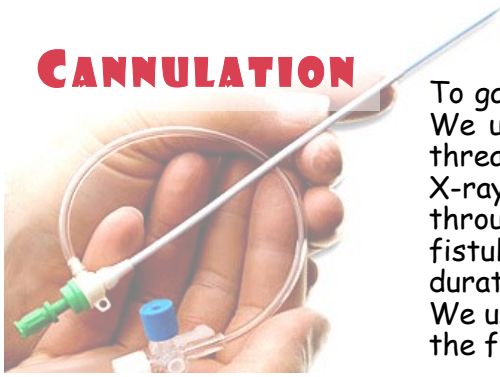
Nutritional content per serving

- 171 calories
- 0 grams trans fat
- 108 milligrams sodium
- 20 grams protein
- 90 milligrams cholesterol
- 289 milligrams potassium
- 10 grams total fat
- 0 grams carbohydrate
- 180 milligrams phosphorus
- 3 grams saturated fat
- 0 grams fiber
- 21 milligrams calcium

Recipe taken from the 3rd Ed. Of Kidney Cooking, Georgia Council on Renal Nutrition, National Kidney Foundation, Georgia Division, Atlanta, GA

Recipe Corner

CANNULATION

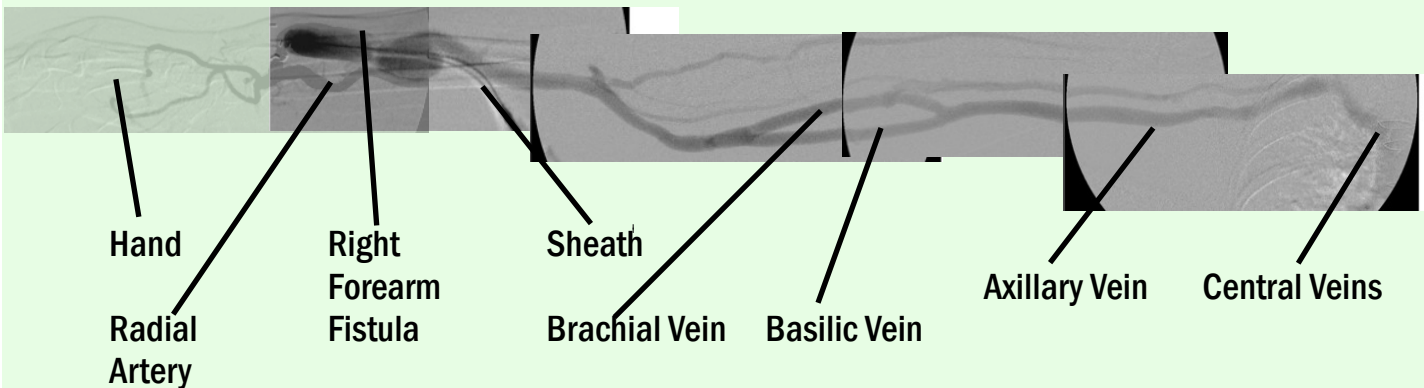


Tech Talk...

To gain access to your fistula, your doctor may use a micropuncture kit. We use the smallest needle to get into the fistula and then a wire is threaded through the needle. After this, the needle is removed. We use X-ray to see what is happening inside your access. While watching through X-ray, a micropuncture sheath is placed over the wire into the fistula and the wire is removed. This sheath remains in place for the duration of the procedure. It is no bigger than your dialysis needles. We use it like a doorway that closes by itself. We can push contrast into the fistula without anything leaking and see your whole fistula or graft.

can'nu·la'tion n. *The insertion of a cannula (tube or hollow instrument) into the fistula or graft.*

This image is showing a fistula created at the wrist.



Principles of hemodialysis and vascular access:

Hemodialysis is the process by which your blood is pulled out of your body and sent to a dialysis machine to be “cleaned” and finally sent back to your body.

This requires several things:

- 1-Access to your blood (catheter, fistula, graft)
- 2-TWO ports or needles to PULL and SEND BACK your blood
- 3-A blood flow through the machine that should reach about 15 ounces per minute (450 cc/min)
- 4-In order to be able to pull 15 ounces of blood per minute we need a vein that has as much blood flow as this amount.
 - Central veins (catheter)
 - Fistula or graft (connection between your arm artery and your arm vein)

See Picture above.

Our next issue will demonstrate the differences between a catheter, graft and fistula .

WORD SEARCH

C A D B A D A M
 Y A L M A Z S S E C C A
 H B N Z O T B V K G R A F T L R
 B C B N Y V E I N D T Z F G D W W V E I
 K A W U E E E R U D E C O R P K Q G S B X
 N R O L S T S I G O L O R H P E N N S E V
 B E N A S S I S Y L A I D I C G B I U C U
 H V T T N W D F X U P L V Q X G T P A C V
 I J G I N T E R V E N T I O N A L P Q A Y
 F A O E W L D O C T O R H Z Z H A Y G
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 Z U P R A F P D J E F D O L K L H
 C P X V I O S J F K H X U R O V V
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 H S A C I T G X P S C
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 R P R

VASCULAR
ACTION
VEIN
MAPPING

FISTULA
GRAFT
CATHETER
CANNULATION

PATIENT
DIALYSIS
ACCESS
CARE

INTERVENTIONAL
NEPHROLOGY
BY
NEPHROLOGISTS

Asunto en Español

En nuestra institucion "Vascular Action" trabajan los doctors B. Leclercq y T. Rogers, ambos nefrologos especialistas en Intervenciones de Accesos Vasculares en pacientes con enfermedad renal en estadio terminal (ESRD). Las causas mas frecuentes son la Diabetes y la Hipertension Arterial. Existen 4 opciones para los pacientes con ESRD: La Hemodialisis (Catheter, AVFistula, AVGraft), Dialisis Peritoneal, Transplante Renal y Abstenerse al tratamiento.

Cosas que debe saber: Mantener limpia, seca, sana y lubricada la piel. Si su acceso es en los brazos, no cargue mas de 5 libras de peso, no empuje ni hale nada pesado, no use reloj, ni duerma del lado de su fistula o graft (infecto). Si es Diabetico, no realice punciones en los dedos de la mano del brazo en que tiene su acceso vascular. Lave sus manos frecuentemente y mantenga un buen balance electrolitico cuidando la cantidad de liquidos y alimentos que ingiere en su dieta.

En nuestro Centro se mantiene el acceso vascular para la hemodialysis, el paciente debe chequear su acceso aproximadamente cada 3 meses, el medico mediante una microvaina atravez de una aguja y con el uso de contraste y rayos X, valora el funcionamiento y repara cualquier evento detectado. Cosas importantes: despues de cada procedimiento, ya sea de dialysis o de mantenimiento usted debe velar por sangramiento o cualquier signo de infeccion. **Recuerde su actitud positiva, su cuidado y nuestra ayuda le aportaran una mayor calidad de vida.**

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Information presented here is intended for the purpose of education and enrichment and is not intended to diagnose or treat any condition or substitute for medical advise.
Consult a qualified physician of your choice for diagnosis and/or treatment.