

ESRD Network # 12 Patient Newsletter

Providing kidney patients and their families information on diet, health, and kidney disease.

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"When Your THIRST is at its WORST"

Mr. Lee Deuell, a long-time dialysis patient, wrote the following article. He has written various articles for dialysis patients to improve their overall care. This newsletter will provide information on fluid restriction and tips to assist you in controlling your fluid intake.

By Lee Deuell

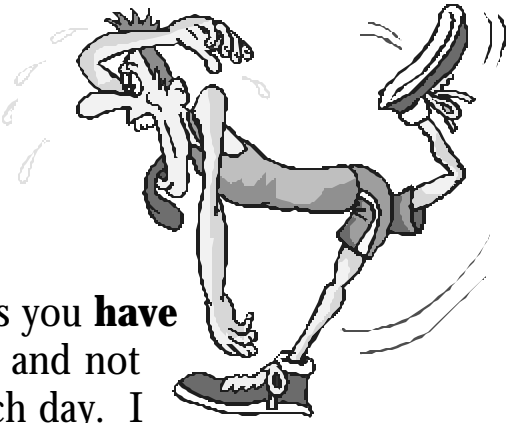
"On October 10, 1999, I observed my 25th year on dialysis. During this time, many patients and family members have asked me what I do so I do not gain a lot of weight between treatments. When I began, I was given a book with several suggestions on how to limit my intake. Ironically, at that time I had a lot of output. I was not placed on a fluid restriction, and still am not on one, so I didn't pay much attention to the suggestions. Because my output has gradually decreased over the years, I have become more aware of needing to restrict myself. I have compiled a list of methods that have worked for me, and may help you as well.

If you're having trouble drinking (actually, no patient should have any trouble **drinking**; it's **not** drinking where the problem lies!), and gaining too much between treatments, you must realize that most of what you drink has no way of leaving your body since your kidneys don't work properly.

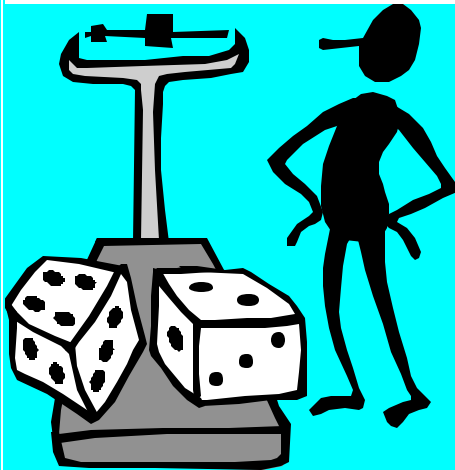
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Of course, some fluid is lost through perspiration, bowel movements, breathing, and blowing your nose. In fact, between 600 and 800 cc of fluid are lost daily through such “insensible losses.”



Even if you are on a restriction, there is no law that says you **have** to drink it all! I find it's easier for me to “skip” a day, and not drink anything that day, than to try and limit myself each day. I usually skip Saturdays, but occasionally I skip several days in a row. It seems once my tongue knows what fluid is like, it wants more and more, even if I know I shouldn't have any more. Of course, the following day you can't “double up”, and have twice your normal limit. It also helps to not start drinking early in the morning. Wait at least until the noon meal.



When I skip days it gives me some control over my dialysis and my life. If you overdo one day, just skip the next day. If you have dialysis the next day, do not drink anything before you get on.

A few years ago, the doctor and I decided that, since I was on for about four hours each treatment (twice a week), I could gain about four kilograms of weight between treatments. If I did not gain that much I could have some ice before getting on. I never have ice after

my treatments. Now I am on three and a half hours each time (three times a week), so I try not to gain more than 3.5 kg.

Going along with this, I've never been able to understand it when I see patients eating ice after their treatment. They're increasing the amount of weight that will need to be removed during their next treatment. It's better to not have any fluid the rest of that day, even if you dialyzed early in the morning.

A long time ago I set an arbitrary time of 8:00 p.m. to stop drinking for the day. I just know that when 8:00 rolls around, I can't have any more. Even if I'm allowed more that day, I feel guilty if I drink after 8. This, in effect, “shortens” the day!



Here's an obvious hint: Don't eat much salt or salty foods. They make you thirsty. Sweet foods also make me thirsty.



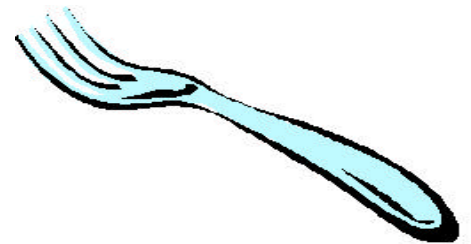
I like to know in advance when I'll be going out to eat; that way, I can plan ahead. No matter what I have I **know** I'll be thirsty after I leave the restaurant. So, I won't drink anything the rest of the day before going. I'll drink very little (if anything) while I'm out; I might just chew on some ice instead. I know I'll be thirstier **after** I eat than I was either **before** or **during** the meal!

Drain your fruits and vegetables! Personally, I don't like the taste of fruit cocktail juice or green bean juice! Why would I even **want** to drink something I don't like? I'd rather enjoy what little I **can** have!

Dry carefully foods that must be washed before eating, like fresh fruits and vegetables. Also, use a paper towel to dry cooked foods after draining them.

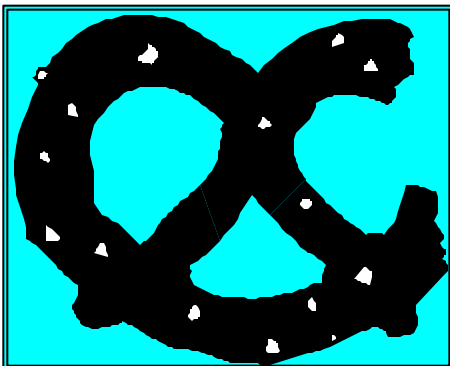
Although it can be messy, and not pretty to look at, spit out the juice when eating juicy foods like watermelon. In this case, it also helps lower the potassium!

The fork is a wonderful invention! It allows liquids to drain through! Use it to eat some of the things you normally use your spoon for. Sherbet, cereal, and soup can all be eaten with a fork. Remember to not drink any of the liquid left in the bowl!



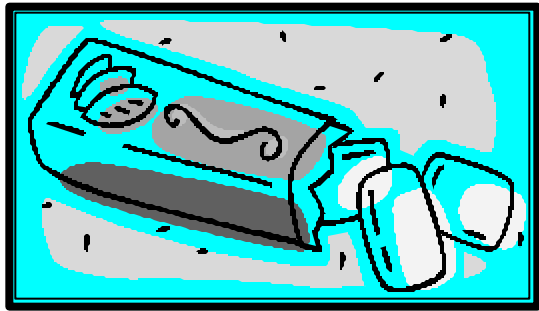
Use a small glass, and allow yourself only one or two glasses of something to drink at a meal. I have gone so far as to actually use a shot glass! Also, don't drink between meals.

Keep your mouth closed while taking showers or in the rain.



Don't drink when you're thirsty: You'll tend to overdo it. Drink when you're **not** thirsty; you won't drink as much. Also, don't drink when you're alone. When others are with you they'll see how much you're having.

Something that works for some, although it doesn't for me, is eating ice instead of drinking. I find it makes me thirstier to eat ice.

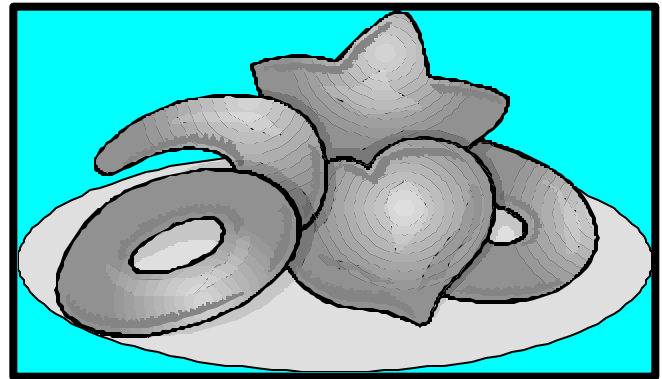


More Tips and Tricks

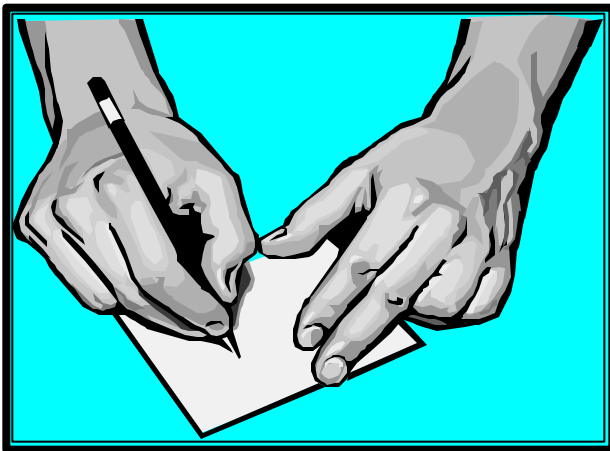
Chewing gum helps produce saliva, which helps you not be so thirsty. You'll often see me chewing bubble gum while I'm on, for this reason.” ***(Please check the policy at your unit. Some units do not allow chewing gum while on dialysis due to choking risks.)***

“Brushing your teeth, and rinsing your mouth (but not swallowing!), can refresh you and eliminate your thirst.

There's a saying (not true) that “Cookie crumbs don't have any calories.” There's a similar untrue one in the dialysis world: “Ice is not a fluid.” Anything that melts at room temperature is considered a fluid. So, that includes ice, ice cream, sherbet, and Jell-O, as well as the obvious things like water and milk.



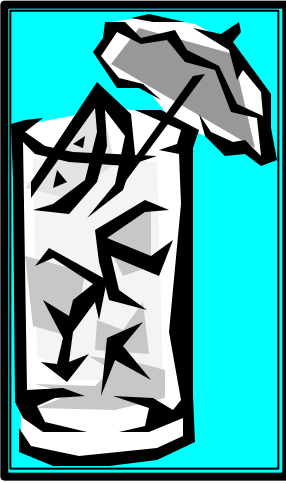
I have learned to take all my pills without liquids, even Procardia XL and Phos-Lo! When I'm an inpatient, I always amaze the nurses when I do that! When I was on Tums, I would chew them up, producing enough saliva to swallow the rest of my pills. If you can't take your pills dry (don't choke to death trying to find out!), use **just** a sip to take them with. Or, try eating a mouthful of food. After it's chewed up, and before you swallow, pop a pill in your mouth and swallow pill and food together.



I keep a record at home of each treatment's gains and losses. This helps me realize just how much I gain throughout the year. I can see how much too much gain is, so I can modify my drinking.

I **love** hot, humid weather! I try to walk and exercise in it whenever possible. This increases how much I sweat, thereby letting me drink “a little” more that day. I say “a little” because it's hard to measure sweat, and I always sweat less than I think I do!

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When I eat a meal, often I will save my fluid for dessert, and have it after eating. This gives me something to look forward to while I'm eating. Plus, it helps me to not drink glass after glass during the meal. Try filling your glass with large ice cubes, then pouring in the liquid you want to drink. Since the ice takes up some of the space in the glass, you can't get as much liquid in. Remember to only have one glass!

Chew your food slowly. This will produce more saliva, so you don't need to drink as much with your meal.

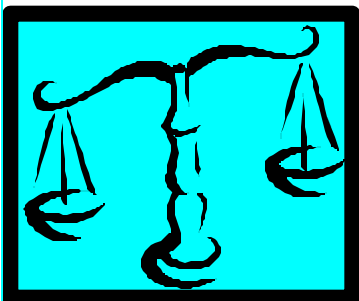
I prefer **cold** drinks. I'm fussy: Liquids need to be refrigerated several hours before I'll drink them. Therefore, if there's nothing **cold** in the refrigerator I won't have anything! Cold water right out of the tap isn't **really** cold. Putting ice cubes in warm pop only dilutes the pop and increases the liquid.

Weigh daily or more often. It's easy to see how much you are gaining. If it's too much, be tough with yourself and don't have any more that day. Often, it just takes will power to follow your restriction. I tell myself that, with God's help, I can do it!



Try measuring your daily allotment when you get up in the morning, and putting it in a jar in the refrigerator. Then drink only from that container throughout the day. If you drink something else, pour out that much from your jar. I once made a 16-ounce bottle of pop last from Thursday when I got off, until Monday when I got on again, without drinking anything else!

It sounds backward, but I only had to measure my fluid intake when I had my unsuccessful transplant in 1975. And then I was "limited" to 2400 cc a day! No more! Now I can have all I want to eat and drink, just so I don't want much!



Be active! Try not to think about drinking. If you stay busy you won't think about being thirsty, and you won't drink so much. As we've seen before, staying active can help you lose fluid, plus it can help lower your blood pressure, and raise your hematocrit!

If you're having trouble with large weight gains treatment after treatment, realize you **can** break the cycle, and drink less! These ideas work for me most of the time. Heck, I'm only human!" Sincerely, Lee Deuell

Helpful Hints for Fluid Control

Journal of Renal Nutrition, Volume 1, No 4 (October), 1991:p188

Your fluids are restricted to: _____ ml = _____ cups = _____ ounces per day.

All foods contain some fluids; however, only those that are liquid at room temperature need to be counted. The following foods should be measured and counted as fluids:

Water – (including that taken with pills), milk, cream, non-dairy creamer, coffee, tea, fruit juice, vegetable juice, soda pop, alcohol, soups, non-carbonated sweetened, fruit flavored beverages

- Gelatin, fruit-flavored (1/2 cup = 1/2 cup fluid = 4 ounces = 120 ml)
- Ice cream or sherbet (1/2 cup = 1/2 cup fluid = 4 ounces = 120 ml)
- Pop ice on a stick (1 double = 1/3 cup fluid = 3 ounces = 80 ml)
- Ice cubes (size may vary; let three ice cubes melt in an 8-ounce measuring cup and determine the fluid content.)

Fluid Table

1 Quart -----	4 cups -----	32 ounces -----	980 ml
1 pint -----	2 cups -----	16 ounces -----	480 ml
	1 cup -----	8 ounces -----	240 ml
	1/2 cup -----	4 ounces -----	120 ml
	1/3 cup -----	3 ounces -----	80 ml
	1/4 cup -----	2 ounces -----	60 ml
2 Tbsp -----	1/8 cup -----	1 ounce -----	30 ml
1 Tbsp -----	-----	1/2 ounce -----	15 ml

PREVENTING FLUID OVERLOAD

Name _____ Facility Number _____

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

FORK
 GAINS
 INVENTION
 KILOGRAMS
 MEASURING
 OUNCES

OUTPUT
 POPSICLES
 RESTRICTION
 SALIVA
 SHOTGLASS
 SWEAT

TARGET
 TREATMENT

Just the Facts: Fluid and Dialysis

The following is an excerpt from Life Options Rehabilitation Program supported by Amgen Inc. They can be contacted at 603 Science Drive, Madison, WI 53711, (800)-468-7777, and www.lifeoptions.org



Why Are My Fluids Limited?

One of the jobs of healthy kidneys is to remove extra fluid from the body. When the kidneys fail, dialysis can remove some of the fluid. But, you also need to drink or eat less fluid.

What Happens if I Have Too Much Fluid?

If you come to dialysis with too much fluid, your treatment will make you feel bad. Your blood pressure may drop, so you feel dizzy or faint. Your muscles may cramp. You may have headaches, nausea, or pass out.

Over time, too much fluid can harm your body. Too much fluid can cause a type of heart failure. Your feet or legs may swell up with fluid. This is called *edema* (a-dee'-ma). You may feel short of breath if extra fluid goes to your lungs.

What Counts as a Fluid?

Anything you drink is a fluid. This includes water, coffee, tea, soda pop, milk, beer, wine, and so forth. Some foods can count as fluids, too. Any food that is liquid at room temperature, like ice cream or popsicles,

is a fluid. Soups, thin stews, and watery foods like watermelon count as fluids too.

How Much Fluid Can I Have?

How much fluid you can have depends on how much urine you make. If you make a lot of urine, you can have more fluid. If you make no urine, you can have less fluid. Measuring your fluids for a while will help you get used to your limit.

What Does Salt Have to do With Fluid?

Salt makes you thirsty. It also makes your body keep more water. Healthy kidneys remove extra salt. When the kidneys fail, most people must limit salt and fluid. Ask your **dietitian** how to make foods taste good without adding salt.



What is Dry Weight?

Dry weight is your weight without extra fluid. It is used as a target for each treatment. At your dry weight, you should feel good after dialysis. This is often measured in Kg (kilograms). Each Kg equals 2.2 pounds.

Summer Salads that Satisfy

Recipes courtesy of iKidney.com

Chicken-Apple Slaw with Celery Seed Dressing

Serves 14

Ingredients:

1 medium head cabbage, shredded
1 cup raisins[®]
2 crisp red apples, diced small
1/4 cup toasted sliced almonds
24 ounces (6 whole) chicken breasts
cubed and cooked

Dressing:

1 cup oil
1/2 cup sugar (or consider substituting
Splenda[®])
1/3 cup cider vinegar
1 Tbsp. celery seed
1/4 cup grated onion
1 tsp. dry mustard

Directions:

Combine dressing ingredients ahead of time and refrigerate. Once chilled pour over salad ingredients and toss.

Ingredients:

1 medium cauliflower
1/2 cup sliced scallions
1/2 cup chopped celery
Black pepper to taste



Approximate analysis per 1/2 cup serving

Protein	16.5 grams
Sodium	49 mg
Fat	19 grams
Carbohydrate	22 grams
Calories	288 kcal
Calcium	54 mg
Phosphorus	141 mg
Potassium	340 mg

Mock Potato Salad

Serves 12

Approximate analysis per 1/2 cup serving

Protein	16.5 grams
Sodium	49 mg
Fat	19 grams
Carbs	22 grams
Calories	288 kcal
Calcium	54 mg
Phosphorus	141 mg
Potassium	340 mg

1/2 cup chopped green pepper
1/2 cup chopped parsley
2 tsp. mustard powder
2 Tbsp. cider vinegar

3/4 cup mayonnaise
Paprika to garnish
3 hard-boiled eggs,
chopped
1/2 tsp. celery seed

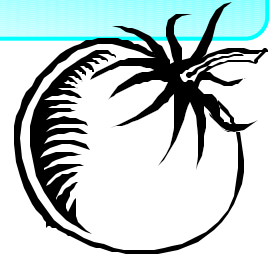
Directions:

Steam cauliflower until tender, but not soft. Place florets in a large bowl, toss in scallions, celery, green pepper, and parsley. In a small bowl, combine remaining ingredients and pour over items in large bowl. Toss to coat evenly and garnish with paprika if desired.

Celebrate the Bounty of Summer and Fall

Renal Friendly Salsa

Recipes courtesy of iKidney.com



Makes about 2 ½ cups

Ingredients:

1/4 cup finely chopped or minced red onion
1/2 cup drained and rinsed canned corn*
1/2 cup green pepper finely chopped
1/2 cup red pepper finely chopped
1/2 cup plum tomato (remove seeds) finely chopped
3 shakes tabasco sauce
Ground fresh black pepper
Juice from 1/2 lime
1/4 cup white vinegar

Approximate analysis per 2 Tablespoons

Protein	1.8 grams
Sodium	5.6 mg
Fat	1.3 grams
Carbohydrate	1.5 grams
Calories	18 kcal
Calcium	0 mg
Phosphorus	5 mg
Potassium	30 mg

Directions:

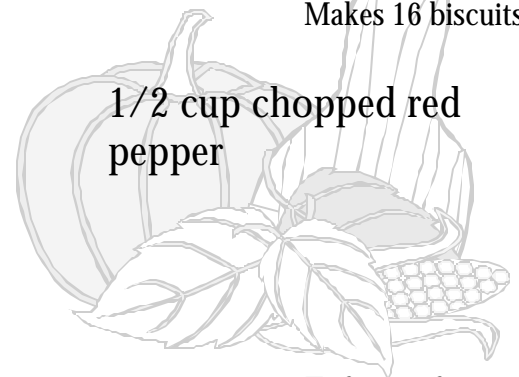
Mix well and serve chilled. Use unsalted crackers or unsalted tortillas to control your sodium intake. *Using frozen corn may lessen the amount of sodium in the recipe.

Ingredients:

3 cups flour
4 tsp. baking powder
1/2 tsp. baking soda
1/2 tsp. cumin
1/4 cup vegetable oil
1 cup canned pumpkin
1/2 cup non-dairy creamer
2 large eggs, lightly beaten
1/2 cup chopped green onions

Harvest Pumpkin Biscuits

Makes 16 biscuits



1/2 cup chopped red pepper

Directions:

Preheat oven to 425 degrees. Spray baking sheet with cooking spray. Combine flour, baking powder, baking soda, and cumin. Add oil and mix well. In a small bowl, mix together pumpkin, creamer, eggs, green onion and red pepper. Add pumpkin mixture to flour mixture. Stir until soft dough is formed. With floured hands, pat dough into a large circle about 1 inch thick. Cut into wedges – do not separate. Bake for 10 –15 minutes.

Approximate analysis per biscuit

Protein	3.8 grams
Sodium	51 mg
Fat	4.5 grams
Carbs	19 grams
Calories	132 kcal
Calcium	17 mg
Phosphorus	74 mg
Potassium	119 mg

Fluid Weight Gain

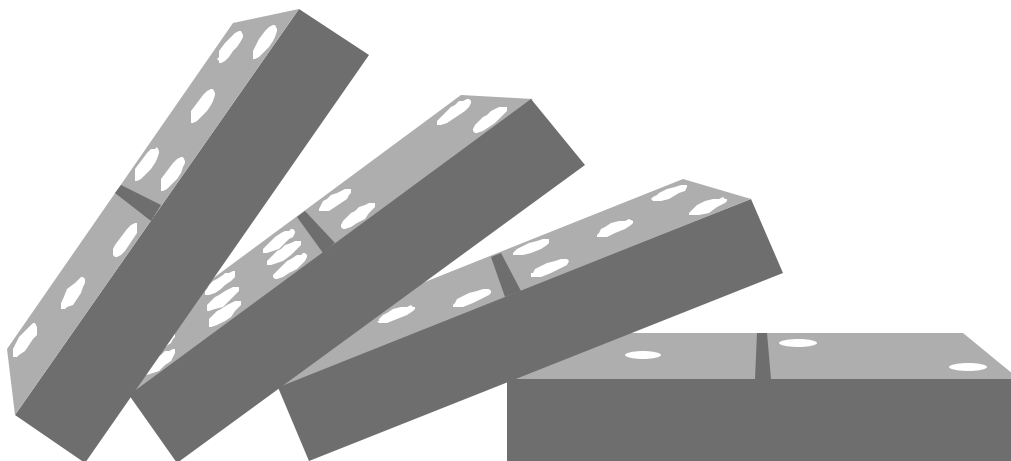
Contributed by Gil H.

Dry Weight:

“Your dry weight is your weight without excess fluid. You may have this weight if your kidneys could have removed the excess fluid from your body. Your dry weight is determined by your doctor, based on his/her experience and your input. Your dry weight should be the lowest you can reach while still feeling well. Note that your dry weight is not a sacred number. After the weekend it may be more difficult to remove all the extra fluid you gained, so be it. You should follow changes in your dry weight and inform your doctor. If you have just started dialysis your dry weight may rise, as you feel better.

Weight gain as a result of fluid retention has some distinctive signs. You have to know your body and be able to recognize swelling and puffiness in the ankles, feet, wrists, fingers, face, eyelids, and other places. In addition, there is a pattern of blood pressure change that repeats during dialysis. Change in this pattern implies gaining or losing weight, (but also change in blood count). A good digital scale at home is a big help in controlling your weight. A cheap bathroom scale is not good enough. Note that the scale in the unit may be a little off from yours. This offset may change slightly over time.

Avoid false weight readings due to different clothes and shoes. Shoes may weigh as little as 0.1 kg (slippers) to as much as 2 kg. Pants may weigh from 0.3 to 1 kg. Jackets may add 1 to 2 kg. Be sure that the scale reads zero before stepping on it.



Gil H. is another long-time dialysis and transplant patient. When the word spread regarding the latest newsletter topic, he happily offered a contribution. Some of his experiences are similar to Mr. Deuell's, but both agree that it is worth repeating!

Fluid Weight Gain:

Fluid restriction is not about how much you drink but how much you gain, and that is not gain per day but gain between treatments. If you make urine or sweat you can drink more.” **(Weight gains over 3.0 kg can be difficult for anyone to remove. It may cause cramps, dizziness, and low blood pressure during treatment. The smaller you are, the harder high weight gains are on your heart. Gains over 3.0 kg are not advised due to the stress it places on your heart and circulatory system. Remember, 1 kg is equal to 2.2 pounds. 3 kg equals 6.6 pounds.)**

“There are many ways to reduce thirst and drinking. Cutting on sodium is the most effective way.

Some unusual ways are:

- ☞ Drink very hot or ice cold (and carbonated) beverages.
- ☞ With cold beverages, fill and swish it in your mouth, drain it over the sink, then swallow what's left in your mouth.
- ☞ Try candies, ice cubes, frozen grapes, frozen lemon wedges, or popsicles.
- ☞ Keep yourself busy.
- ☞ Don't spoil the joy of drinking by swallowing pills. Take all pills that can be taken with food: chew the food until you are ready to swallow, then put the pills in. This is easier than taking pills with water.
- ☞ Don't drink while you eat. With a few refills you may drink too much without notice. Enjoy your drink after the meal.
- ☞ If you must drink during the meal pour a glass before you eat and don't refill it.”

DISCLAIMER

The previous articles were submitted by patients and professional staff. Before changing anything in your diet or dialysis, PLEASE check with your physician, dietitian or nurse. Your health care team has the most knowledge regarding your own personal needs.

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