Tuesday, April 14th  7:00 PM  Meeting:  Open Meeting

Open discussion for issues, topics, questions, or concerns that need to be addressed. Our meetings are set up to have a program every other month (When speakers can be scheduled), and the next month to be an open meeting. This gives us an opportunity to share, ask questions, or discuss situations, news, or upcoming events.

Tuesday, May 12th:  7:00 PM :   Open Meeting

Open discussion for issues, topics, questions, or concerns that need to be addressed. Our meetings are set up to have a program every other month (When speakers can be scheduled), and the next month to be an open meeting. This gives us an opportunity to share, ask questions, or discuss situations, news, or upcoming events.

Tuesday, June 9th  7:00 PM Meeting:  Life Source– Teresa Turner

Presentation to explain the Ambassador Program, update on Life Source activities and introduce the new hospital liaison for our area.

Meeting at Miller-Dwan Medical Center  
502 E 2nd Street  Duluth, MN  
7:00 to 9:00 P.M.  
Classroom 2 & 3 - Lobby Level

Providing a loving, caring, educational network of support for those waiting or having received an organ/tissue transplant and their families. Web Site: www.HOLSG.org
“News & Notes”

Happy Birthday and Best Wishes:

Congratulations On Another Year!!!

Dan Graves Heart 4/6/2002
Jerry Johnson Heart/Kid 4/22/2005
Eathan Skare Liver 4/24/2014
Paul Wolff Heart 4/27/2013
Jessica Winkels-Hagerl Liver/Kidney 5/1/2011
Joann Miller Lung 5/1/2005
Donna Gayhart Pancreas 5/5/2004
Leroy Lahti Kid/Pancreas 5/5/2005
Joel Stutsman Kidney 5/7/2004
Carol Weiberg Liver 5/15/1989
Robbie Christman Liver 5/18/1993
Marge Kruchoski Heart 5/21/1993
Cindy Zoldak Kidney 5/21/2009
Kathryn Foss Lung 5/22/1999
Katie Pfeffer Kidney 5/26/2007
Colleen Trapp Heart 5/29/2007
Nancy Bubalo Liver 5/31/1996
Marle Ryan Liver 6/12/2001
Rick Benson Kidney 6/15/1995
Walter Gault Liver 6/15/2002
Dan Rosin Heart 6/21/2013
Brian Solseth Kid/Pancreas 6/23/2009

News and Presentations:

1/16/2015 Physical Therapy, Lake Superior College–
Tom Saburn

2/7/2015 Mariner Mall Health Fair: Kathi Hein, Joni Plante, Denise Ducarte, Mary Jacobson, Dorothy and Jerry Johnson, Katie Pfeffer.

2/24/2015: Denfeld Drivers Ed– Tom Saburn

3/7/2015 Women’s Expo Duluth DECC– Gloria Mattakat, Beth Sandstrom, Tom and Nancy Saburn, Dorothy and Jerry Johnson, Joni Plante, Kathi Hein, Glenn Peterson, Mike Jahn, Mary Jacobson.

March: WITC Health Fair– Dorothy and Jerry Johnson, Mary Jacobson, Kathy Hein:

Cares And Prayers

Jackie Jensen Is Recovering
From Gall Bladder Surgery.

Jerry Johnson is recovering from eye surgery. Rick Hailer is doing dialysis three times a week.

Dick Albert is recovering from heart rejection

JuliAnne Vasichek received a new liver Friday February 27.

How To Cut Your Risk Of Heart Valve Damage

Sky high levels of lipoprotein(a) double your risk of severe heart valve damage, boosting odds that you will need a replacement valve sometime between the ages of 60-90 years. Lp(a) stiffens and clogs the walls of valves and arteries which most often results in the need for valve replacement. 25% of adults over 70 have signs of heart valve thickening. The 4 valves in your heart control the flow of blood to your lungs and every cell in your body. A stenotic valve (doesn’t open enough or close properly) reduces blood flow, causing fatigue, shortness of breath and even heart failure. It also boosts your risk for clots, heart attacks and strokes. Risk factors are raised with some things about which you can control. Triggers are high blood pressure, high LDL cholesterol, diabetes, smoking, and a double wide waistline. Keep a lid on your blood pressure. High blood pressure increases your risk by as much as 75%. Eat less sodium and more blood pressure calming calcium, and magnesium found in low fat dairy, fruit, vegetables, beans and 100% whole grains. Statins which reduce cholesterol can cut serious valve harm by 36%. Smoking doubles your risk—cut the smokes!

Cool down inflammation. Inflammatory compounds in your bloodstream are linked to greater risk of valve damage. With your doctors permission, take anti-inflammatory supplements, eat foods that are anti-inflammatory such as the foods mentioned above for blood pressure control. Fruits such as pineapple, strawberries, blueberries, and cherries. Don’t forget the benefit of omega-3. Fish oil, almonds, walnuts, flax, chia and avocados are particularly good. If you have any of the symptoms be sure to mention them to your doctor at your annual physical!!!

Heart Transplant Patients Benefit From New Approach To Immunosuppression: Mayo Clinic

(This article ia actually from 2007. The study continues with the same or better results.)

Standard practice of immunosuppression is to treat newly transplanted heart patients with calcineurin inhibitors (Prograf/Tacrolimous). However these drugs are a major cause of kidney disfunction and do not prevent coronary artery disease. Coronary artery disease is a rapidly progressing disease that develops in many heart transplant recipients and greatly limits long term survival. Five to ten years post transplant, 10 % of patients are on dialysis or need a kidney transplant. Ten years post transplant 50% of patients are waiting for another heart transplant, or have died as a result of coronary artery disease. One study involving 78 heart transplant patients over 4 years found that transitioning stable patients from calcineurin inhibitors to sirolimous showed consistent improvement in kidney function with no rejection of the transplanted heart and no difference in heart function. Another study involving 29 patients reduced or reversed the proliferative changes that resulted in coronary artery disease. Therefore today the standard practice is to transition Patients to sirolimous 6 months post transplant.

Many of us have gone through the experience of getting up early and heading off to the dialysis center to endure the 5 hour process of getting hooked up to the dialysis machine. After dialysis you fell drained of energy and tired which generally completes your day. Only 8% of kidney patients do dialysis at home. Many don’t realize they can, others are afraid to try. New medicare rules that are now in effect give clinics more motivation to control costs and raise the amount centers receive to teach do-it-yourself dialysis. There are two types of home dialysis possible. The more widely used is the peritoneal dialysis using the abdominal lining to clean out waste. Patients pour a fluid into a tube in their belly and drain it out several times a day, or a machine does that while you rest. A second method is home hemodialysis. Blood is drawn through a tube from the arm and pumped through a portable machine where it is cleansed and returned to the body. Patients do this 4-7 times a week for about 2 1/2 hours each time. You can set your own schedule, even travel with the portable machine. People say they feel better because you can cleanse your blood more often and some don’t have to take so many drugs to offset the problems with the toxicity experienced.

In this Issue . . .

- **Tuesday April 14th 7:00 PM**: Open Meeting
- **Tuesday May 12th: 7:00 PM**: Open meeting
- **Tuesday June 9th: 7:00 PM**: Life Source Presentation
- News and Notes: Happy Birthday and Best Wishes
- Cut Your Risk Of Heart Valve Damage
- New Approach To Heart Transplant Immunosuppression
- Patients and Home Dialysis