# News From The Northland

Organ Transplant

**Support Group** 

Volume 21, Number 3

July—September 2014

#### www.holsg.org

### Tuesday, July 8th: 7:00 PM: Open Discussion

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, 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.

### Saturday August 9th Summer Luncheon 11:30-2:30

Come and enjoy our summer get-together. We are meeting at Aces on 29th, in Superior, WI. from 11:30—2:00PM We will order off the menu. As usual, a Laila and Susie Sale is planned so clean out your attic and garage and bring an item for the sale. Please RSVP to Glenn Peterson at 218-879-5758 or glennpete5@msn.com.. Please RSVP by August 6, 2014.

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#### **Tuesday October 14th: 7:00 PM** Life Source

Teresa Turner, Community Advocacy Coordinator, will speak about the new Ambassador Program, and introduce Kaitlyn, 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

## AN IMPROVED KIDNEY MATCHING PROGRAM:

An improved kidney matching system will take effect in late 2014. It will help more people have longer function with their transplanted kidney. It will also shorten the wait for some groups of people who often wait a very long time because they are hard to match with most kidneys. Transplant candidates will not lose credit for any time already spent waiting, which is a major factor in kidney allocation. Patients who began dialysis before being listed for a transplant will have their waiting time backdated to their first dialysis date. People who need a kidney for a long time will be matched with kidneys expected to have the longest function. People who have trouble with dialysis will be offered kidneys that may last a shorter time, but will allow the patient to discontinue dialysis. This news comes from Brian Shepard who is the CEO for UNOS, the United Network For Organ Sharing.



**Cares and Prayers:** 

To the Family of John Moline. John passed away April 11, 2014.

Eathan Skare who received his second liver on April 24th.

Happy Birthday and Best Wishes-		
This Issue:		
Marge Stenstrom	Liver	7/3/1997
Travis Hanson	Kidney	7/10/1999
Jackson Beattie	Kidney	7/12/2012
Darrell Sampson	Kidney	7/18/1990
Janet Moran	Kidney	7/19/2000
Jim Hendy	Kid/Pancreas	7/19/2007
Mary Manderscheid	Kidney	7/25/2004
Arlee Wilkes	Kidney	7/25/2008
Dwight Morrison	Heart	7/28/2004
Leta Sisto	Kidney	7/31/1997
Heather Krisiak	Heart	8/1/2013
Tom Griffin	Liver	8/11/2000
Jack Altonen	Kidney	8/11/2004
Tom Saburn	Heart	8/13/2004
Shirley Kuberka	Heart	8/27/2004
Judy Lovedahl	Kidney	9/2/1986
Harvey Genedek	Heart	9/3/1991
Jim Wester	Kidney	9/5/2006
<b>Leroy Evans</b>	Kidney	9/16/1999
Bill Fronckiewic	Liver	9/28/2002
<b>Christy Buetow</b>	Heart	9/28/2008

### "News & Notes"

### The following people gave presentations promoting organ donation.

March 24, 2014 Cloquet Drivers Ed. Tom Saburn, Beth Sandstrom

March 26; Solon Springs Drivers Ed., Tom Saburn

May 4: Jackson Beattie Kidney Foundation Fund Raiser: Dorothy and Jerry Johnson, Kathy Hein, Katie Pfeffer, Joan Plante, Pam Carlson, Glenn Peterson, Heather and Craig Krisiak, Sara and Dave Beattie.

May 17: Duluth kidney Walk: Denise Dugart, Katie Pfeffer, Joan Plante, Kathy Hein, Dorothy Johnson.

June 5: United Health Fair; Dorothy and Jerry Johnson,

Heather Krisiak, Kathi Hein, Glenn Peterson.

June 12: Fond du Lac Health Fair; Kathi Hein, Katie Pfeffer, Glenn Peterson

June 23: East High School, Driver Ed; Tom Saburn

July 4th Superiors Annual Parade: organized by Mary Jacobson and Dorothy and Jerry Johnson and participation by many members of our group.

Welcome: New members: Daniel Rosin, Heart, 6/21/2013 and Dave and Sara Beattie whose son Jackson received a kidney 7/12/2012

### VCA's: Vascular Composite Allographs

As of July 2014 VCA's otherwise known as face and hand transplants, will be considered organs by the federal government. The same kind of rules that apply to allocation of other organ transplants, hearts, kidneys, lungs, etc. are being developed for VCA transplants. UNOS formed a committee of VCA experts to develop national policies and procedures to ensure that all patients who need a hand or face transplant are considered fairly, and that we maintain the best possible outcomes for recipients. The UNOS committee will vote on the committees initial recommendations on June 23, 2014 to coincide with the government regulations. These policy areas include informed consent by donor families and a process to match donors with candidates based on how long patients have waited.

Continued from page four— Being in a coma is not brain dead. Brain death results from trauma, stroke or lack of oxygen where medical doctors aggressively work to save lives but cannot. Patients are placed on a ventilator until the decision to recover organs, or not, and then the patient is removed from the machine.

### USE OF THE PROPER TERMINOLOGY, AND UNDERSTANDING BRAIN DEATH.

Words influence how others think about the work we do. They create impressions and expectations. Insensitive words can contribute to public misconceptions about organ and tissue donation. It is suggested these words are a better choice. Harvest-people don't grow in straight rows like corn. Crops are harvested, people aren't. PROCURE, RECOVER, or RETRIEVE are better words. Cadaver— is a dead body intended for dissection. DECEASED DONOR is less sensitive. Tissues from donors are not products. Respect for the donor is better served by just naming the specific tissue and its uses. BRAIN DEATH: Brain death is the total cessation of brain function, including brain stem function. There is no blood flow to the brain, the brain no longer functions and never will. The deceased remains on a ventilator in order to maintain organ function until organ recovery can take place. It is incorrect to report that the patient is on life support, which gives the impression that the donor is "kept alive" so that organs can be donated. Continued back on page three:

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NEWS FROM THE NORTHLAND

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