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Living for another day

Dialysis treatment, support give hope after renal failure

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The scene is almost unworldly. It starts with a large, colorless room lined with beeping machines the size of refrigerators.

Next to each one is a plain, dentist-like chair.

And inside each chair is a person, usually seemingly healthy, tethered to the machine through blood-filled tubing.

It's not a place anyone wants to be.

But for dialysis patients, people living without a functioning kidney, the center is where they spend half a day, three days of every week of their lives.

The machines, beeps and circulating blood are their way to stay alive.

"It's hard to walk through the doors three days a week," said Paula Sypian, a patient at Fresenius Medical Care Loveland Dialysis.

"But you do it because you have to. You do it for the hope that you'll get a kidney."

Dialysis

Nearly everyone at the center is being treated for end-stage renal disease, meaning their kidneys have failed or are close to it.

Each about the size of a standard computer mouse, the two organs are a vital part of the body, acting as its sewage system to remove waste products and excess fluid.

Without them, the toxins and fluids that are supposed to be removed remain in the blood. If they're not, they will overload the body, and the person will die.

Dialysis works as a mechanical kidney, keeping a body in balance.

The treatment uses a machine to filter the blood. Through two needles, all of a patient's blood is run through the machine, filtered and put back in his or her bloodstream — a process that cycles many times during each dialysis treatment.

The only way for a person with kidney failure to survive without dialysis is to get a kidney transplant, either from a live donor or one who has died.

More than 485,000 people are being treated for kidney failure around the country, according to the National Kidney Foundation. About 60 people seek dialysis at the Loveland center, almost all of whom

visit it three times a week.

The process of staying alive may be the same for each dialysis patient. Yet the stories of how they got there, how they cope and what keeps them going is anything but ordinary.

Winona

She's only 56 years old, but Loveland's Winona Harrison looks aged beyond her time.

Her face is wrinkled, her hair thinning. And during dialysis, she hardly has the strength to adjust her frail body in the chair.

Yet while her body is feeble, her spirit is one of the strongest in the room.

Harrison has been going to dialysis for 31 years — a feat rarely seen at the center.

“You just learn to do it,” said Harrison, who hasn't missed a treatment the entire time she's needed dialysis. “That's just what's got to be done.”

Harrison's kidneys failed three decades ago as a result of an untreated infection she had as a child.

Over the years, she received three kidney transplants — but each one failed.

Yet through it all, she's learned to stay positive and survive everything that comes her way.

She's gotten used to the pain, coping with the headaches, fatigue and sick feelings she gets as a result of each treatment. She's also learned to deal with the strict diet, which includes consuming only the slightest amount of liquids, protein and sodium.

The greatest challenge, she said, has been the mental hurdles of dialysis.

“When I first started, I went through ‘Why me?’ and was feeling sorry for myself,” she said.

“But then it hit me. Why not me? What makes you better than anyone else?”

Today, Harrison continues to hook up to dialysis three times a week. She spends the hours of each treatment watching “Judge Judy,” trying to sleep or chatting with her sister, Gwen Ekhoﬀ, who comes to visit every time.

This spring, Harrison's hoping to get back on the transplant list. But until then, she's sticking to routine.

“People ask me how I keep going year after year after year. ‘Aren't you afraid of dying?’” she said.

“None us have any guarantees in life, so I don't even worry about it. ...

“You're given things in life to overcome. This is what I was given.”

Darren

Darren Phillipp was only 21 when he found out his kidneys were failing.

It started with a doctor's appointment for an ear infection. The next day, he was in the hospital, where the doctor told him he'd have to start dialysis.

“I didn't know what dialysis was,” Phillipp said. But when his usually strong father began to cry, he knew it wasn't good.

His condition might have been caused by a kidney problem he was born with. Yet, as is the case for many other patients, the doctors can't say exactly why it happened.

Regardless, Phillipp had to start dialysis, which he continued for two years — until he found a kidney

match.

His sister had an immune system, blood type and other factors so similar to Phillip's that she was able to give him one of her kidneys. Living donors can survive with just one of their own.

With the new organ, Phillip was able to quit dialysis and return to the life he once knew.

But eight years later, after complications from the transplant, his donor kidney quit working.

He had to return to dialysis.

"It was really hard," Phillip said. He was most worried about his sister and how she'd feel. Yet returning to dialysis wasn't easy, either.

"You get annoyed by things, like when someone makes plans for a Wednesday night," said Phillip, who's always at dialysis on Wednesdays. "This place is a tether to you."

Soon, Phillip might be able to get another transplant, this time from his cousin.

Until then, he's trying to get by doing what he loves, including poker nights with friends and spending time with his girlfriend and family members.

"I try to live as normal of a life as possible," he said. "I have breakdowns, but I don't give up."

Paula and Lisa

Loveland's Paula Sypian couldn't stop crying during her first day of dialysis.

"It was quite a shock to me," said the 60-year-old. "I didn't expect to end up here. I didn't have notice I would wind up in dialysis."

Her doctors still don't know what caused her kidneys to fail, but they told her dialysis was the only way to keep her alive.

"Knowing I have to be dependent on a machine" was the hardest part, she said.

"It was pretty devastating news because I'm an active person, and I wanted to lead a fairly normal life."

For Sypian, it seemed like an end-all. Yet during her first day of tears she found an unexpected friend sitting across the room.

Lisa Wickman, another patient, tried her best to chat with Sypian and make her comfortable.

The 47-year-old had been in treatment only one month herself — her kidneys failed after being damaged by a previously undiagnosed case of lupus.

But already, "I'd figured out the world wasn't such a terrible place," she said.

"I don't mind the chair that much. It doesn't bother me the way it does other people. I guess that's my gift."

Through the next few treatments, the women continued to talk to each other from across the room. Finally, the staff decided to move them in chairs next to each other — and they've been inseparable ever since.

"Lisa and I have become very dear friends. Chair friends," Sypian said. "I don't know what I'd do most of the time without Lisa."

Each dialysis session, the two chat about everything from Wickman's gardening to Sypian's grandson. All the while, Sypian shares her candy with Wickman, who busily knits baby hats, which she sells to

help pay for treatment.

“Sometimes it’s just nice to talk,” said Wickman, adding that everyone in the center has become very close.

“We’re like a family, like a little village.”

Both women credit their friendship as part of the reason they’re able to get by — even at times when it’s hard to stay positive.

Sypian twice has been ready to get her daughter’s donor kidney but both times was too sick for the operation. Now, their immune systems may be too different to match.

Wickman has found a match in her brother but doesn’t have enough money to pay for the transplant surgery.

“I can’t see my way out the other side of this,” she said.

Yet through it all, the friends are grateful for what they have.

“We’re pretty lucky,” Wickman said. “Another place and another time, (dialysis) wasn’t available.

“We’ve got a lot to be thankful for — the joy that we’re still alive.”

Frequently asked questions about chronic kidney disease

How common is chronic kidney disease? About one in every seven or eight adults is diagnosed.

Am I at risk? Primary risk factors include diabetes, high blood pressure, cardiovascular disease, a family history of kidney disease and age over 60. Secondary risk factors include obesity, autoimmune diseases, urinary tract infections, systemic infections and kidney loss, damage, injury or infection.

Can chronic kidney disease be prevented? Taking care of overall health helps protect kidney health. Wise practices include exercising regularly, following a low-salt diet, controlling weight, monitoring blood pressure and cholesterol levels, not smoking, drinking alcohol only in moderation and getting an annual physical.

What are the warning signs of chronic kidney disease? Most people have no symptoms until the disease is advanced. Signs of advancing chronic kidney disease include swollen ankles, fatigue, difficulty concentrating, decreased appetite, blood in the urine and foamy urine.

Should I get tested? Doctors recommend that people with risk factors get tested.

What tests should I get? The two most essential are a urine test and a blood test.

If chronic kidney disease is diagnosed, will I need to see a specialist? Not if it’s caught early and you’re otherwise in good health. If it’s advanced or advancing rapidly, however, or you have other health problems as well, your doctor could recommend that you immediately see a specialist.

Can chronic kidney disease be cured? Usually not, which is why early detection is so crucial.

— National Kidney Foundation

Facts about chronic kidney disease

- 26 million American adults have chronic kidney disease, and millions of others are at increased risk.
- Early detection can help prevent the progression of kidney disease to kidney failure.

- Heart disease is the major cause of death for all people with chronic kidney disease.
 - High-risk groups include those with diabetes, hypertension and a family history of kidney disease.
 - African-Americans, Hispanics, Pacific Islanders, American Indians and seniors are at increased risk.
- National Kidney Foundation

Kidney health

March is National Kidney Awareness Month. To learn more about kidney disease and becoming a donor, visit the National Kidney Foundation at www.kidney.org.

Gwen Ekhoﬀ, center, spends time with her sister, Winona Harrison, right, as she undergoes a dialysis treatment March 11 at Fresenius Medical Care Loveland Dialysis.

Reporter-Herald photos/CHRISTOPHER STARK

Patient care technician Ben Zwiebel, right, tends to Winona Harrison during a dialysis treatment at Fresenius Medical Care Loveland Dialysis on March 11.

Winona Harrison of Loveland talks about dialysis during one of her treatments at Fresenius Medical Care Loveland Dialysis. She has undergone the treatments for 31 years but has accepted her situation as her way of life.

Darren Phillipp of Fort Collins receives a dialysis treatment at Fresenius Medical Care Loveland.

Reporter-Herald/CHRISTOPHER STARK

Loveland residents Lisa Wickman, left, and Paula Sypian share a laugh as they have a dialysis treatment Friday. The women have become good friends and say they use each other for support while going through the procedure.