

# Beans, Beans the Magical Fruit More You Eat the More You....

July is National Baked Beans Month, a time to celebrate the legumes and enjoy a favorite American side dish. Beans belong to the legume family. Beans are not only delicious but also incredibly nutritious. They're rich in fiber, vitamins, and minerals, making them a fantastic addition to any diet. While beans can be higher in potassium, a mineral generally restricted in patients on dialysis, beans can be a great addition to a renal friendly diet. Here are some of the health benefits of beans:

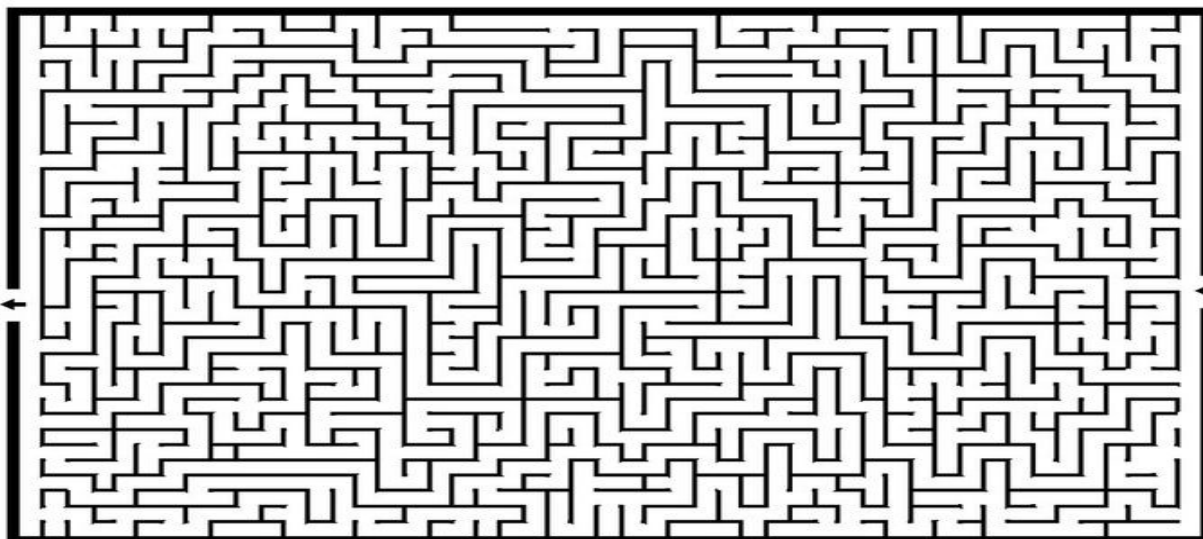
- ◆ **Fiber Powerhouses:** Beans are packed with dietary fiber, which supports digestive health, helps regulate blood sugar levels, and promotes satiety.
- ◆ **Plant-Based Protein:** They provide an excellent source of vegetarian protein, making them ideal for vegans and vegetarians.
- ◆ **Rich in Vitamins and Minerals:** Beans contain essential nutrients like folate, magnesium, and iron.
- ◆ **Heart Health:** Regular bean consumption may help lower cholesterol levels and reduce the risk of heart disease.
- ◆ **Gut Health:** The fiber in beans supports a healthy gut microbiome

Let's explore the potassium content in various beans:

White Beans or Cannellini (1/2 cup, cooked):	203 mg
Kidney Beans (1/2 cup, cooked):	227 mg
Navy Beans (1/2 cup, cooked):	184 mg
Great Northern Beans (1/2 cup, cooked):	213 mg
Pinto Beans (1/2 cup, cooked):	210mg
Black Beans (1/2 cup, cooked):	253mg
Chickpeas/Garbanzo beans (1/2 cup, cooked):	137mg
Lentils (1/2 cup, cooked):	316mg
Lima Beans (1/2 cup, cooked):	969 mg
Adzuki (Red) Beans (1/2 cup, cooked):	612 mg



Use this information to find low potassium legumes to enjoy with your meals. Please talk with your Registered Dietitian if you have any questions on how to add beans into your diet.



# Two Delicious Bean Recipes:

## Chickpea Salad:

### Ingredients:

- 1 can (15 oz) chickpeas (garbanzo beans), drained and rinsed
- 1 cucumber, diced
- 1 red bell pepper, chopped
- 1 small red onion, finely chopped
- 1 cup cherry tomatoes, halved
- Fresh parsley or cilantro, chopped
- Juice of 1 lemon
- Olive oil
- Salt and pepper to taste



### Instructions:

1. Combine all the ingredients in a large bowl.
2. Drizzle with olive oil and lemon juice.
3. Season with salt and pepper.
4. Toss well and refrigerate for at least 30 minutes before serving.

## Lentil Soup:

### Ingredients:

- 1 cup green or brown lentils, rinsed
- 1 onion, chopped
- 2 carrots, diced
- 2 celery stalks, chopped
- 3 cloves garlic, minced
- 4 cups vegetable broth
- 1 can (14 oz) diced tomatoes
- 1 tsp ground cumin
- 1 tsp ground coriander
- Salt and pepper to taste
- Fresh parsley for garnish



### Instructions:

1. In a large pot, sauté the onion, carrots, celery, and garlic until softened.
2. Add the lentils, vegetable broth, diced tomatoes, cumin, coriander, salt, and pepper.
3. Bring to a boil, then reduce heat and simmer for about 30 minutes or until lentils are tender.
4. Garnish with fresh parsley before serving.

Enjoy these nutritious bean recipes, and feel free to get creative by adding your favorite herbs and spices!



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## UNLOCKING HOPE: EXPLORING KIDNEY DONOR VOUCHERS AND INNOVATIVE STRATEGIES FOR FINDING A DONOR

*By Karol Franks*

I would like to share an amazing program called the donor voucher program. Are you familiar with it? This paired exchange program offers an innovative way to encourage living kidney donations and save lives. The program is associated with the National Kidney Registry, and most transplant centers offer this option to potential living donors. This program differs from a typical swap or paired exchange transplant program.

The donor voucher program is a unique initiative which allows individuals to donate a kidney in advance. The donor gives the voucher to a person who is in immediate need of a kidney who can then choose to use the voucher for themselves, or if they receive a deceased kidney instead, can pass it on to a loved one in need for future use.

Another type of voucher allows a prospective donor to receive a voucher for a family member who may need a kidney in the future. This is particularly beneficial in cases where a parent wants to donate to their child who may need a transplant in the future, but the parent wants to donate now to make sure the child has a backup.

Unfortunately, transplants are only a form of treatment, and many long-term kidney survivors require more than one kidney transplant.

The idea for vouchers came about back in 2014, when retired judge Howard Broadman asked UCLA's Kidney Transplant Program a unique question: If he donated a kidney to a stranger, could his 4-year-old grandson, who had kidney disease, get priority for a transplant in the future? Broadman's grandson's kidney disease was expected to lead to kidney failure in 10 to 15 years, requiring a transplant. By that time, Broadman would be about 80 years old, too old to qualify as a donor. Broadman's December 2014 donation initiated a chain with three recipients.

There are two significant advantages to the voucher program. First, the donor can schedule the surgery at a time which is convenient. Secondly, the recipient who they donate on behalf of receives priority in the kidney donor pool, increasing the chances of finding a suitable match more quickly.

Here is one scenario. Let's say I am interested in donating my kidney to help someone but I do not know anyone in immediate need of a kidney. Instead of donating directly to a specific individual, I can donate through a designated transplant center. In return, they will issue a voucher which can be transferred to someone else in need, whether it be a family member, friend, or even an anonymous recipient.

In another scenario, let's consider a person who initially intended to donate a kidney to a friend or family member. However, due to a change in the intended recipient's medical condition, the recipient became ineligible to receive the kidney. However, the donor still wants to donate to another person in need. The donor can start a chain of life-saving donations.

I remember reading a story which illustrates this situation. A person was unable to donate a kidney to their own mother due to changes in the mother's transplant eligibility. Instead, the donor chose to honor their mother by participating in the voucher program and donating their kidney to someone who needed it sooner.

You may wonder why someone would donate a kidney without knowing the recipient. The brilliance of this program lies in its cascading impact. By making an upfront kidney donation, it can initiate a series of kidney transplants for those in need.

Vouchers are an incredible concept which can change someone's life. Thanks to living donors and the voucher program, two of my family members have received kidney transplants.

The voucher program requires a living donor who is willing to donate a kidney. The most effective way to find one is to ask family and friends, since they are often more willing to help. However, other methods exist for finding a living kidney donor. Strategies which people have used, such as sharing their stories on social media platforms like Facebook, Instagram, and TikTok, have increased the chances of successfully finding a living donor. Some have even utilized billboards, yard signs, and writing on car windows to attract attention and find potential kidney donors. These approaches have proven effective in reaching a wider audience and have gained significant media attention.

*hope*

## Infectious Disease and the Kidneys

During the month of July, the education focus will be on common infections that can happen that involve the kidneys. These types of infections come from the urinary system, or more commonly called the urinary tract, which is made up of the kidneys, the ureters, the bladder, and the urethra. Most people are born with two kidneys and each kidney has a ureter that extends down into the bladder (see Figure 1).

### **What is a urinary tract infection (UTI)?**

In healthy kidneys, urine is made from the extra fluid and waste removed from the blood by the kidneys. Urine moves down the ureters into the bladder where it is stored until it is expelled through the urethra. When bacteria (a type of germ) multiply in any area of the urinary tract, an infection, called a UTI, can occur.

### **What are the symptoms of a UTI?**

A person with a UTI may experience a burning sensation when urinating, feel like they need to urinate more often, have pain when urinating or pressure in their back or lower abdomen, may see blood in the urine, or notice their urine is dark, cloudy, or smell differently, have a fever, and/or feel nauseated or vomit at times. These symptoms need to be treated right away. If left untreated, bacteria can move up the ureters and cause an infection in the kidneys. A kidney infection, called pyelonephritis, can be more serious.

### **Who is at greatest risk for getting a UTI?**

Anyone can get a UTI; however, women tend to get UTIs more frequently because their urethras are shorter than men's making it easier for bacteria to get into the bladder. Men who have enlarged prostate glands may experience a decrease in their urine flow. This blockage of urine flow may cause a UTI.

People with diabetes are at higher risk of developing infections, in general, and includes getting UTIs. It is important to keep blood sugar levels within target ranges to help prevent infections from developing.

Having an indwelling urinary catheter (or tube going into the bladder) over a few days or longer is a risk factor for developing a UTI. Bacteria on the catheter tube can move into the bladder and cause the infection. It is important to keep the urinary catheter as clean as possible to decrease the risk of infection.

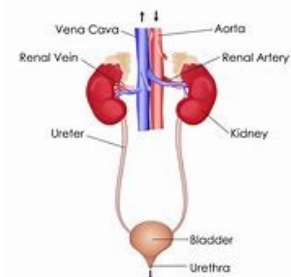
### **How is a UTI diagnosed and treated?**

The healthcare provider (doctor, nurse practitioner, or physician assistant) will order a urine test called a urine analysis. The results will tell the healthcare provider if an infection is present and if so which bacteria are causing the infection. This information allows the healthcare provider to order the right kind of antibiotic. \*Note: it is important to remind the healthcare provider of having chronic kidney disease or kidney failure so they prescribe an antibiotic that will not further harm the kidneys. The antibiotic may be taken for 1-2 weeks.

### **How are UTIs prevented?**

There are several things that can be done to lower the risk of developing a UTI:

- Drink fluids. Water is best if you tolerate it.
- Urinate when you have the urge to pee.
- Wipe from front to back to keep the bacteria in your bowels (or intestines) from getting into your bladder.
- Keep your genital area clean. Wash the area after having sex.
- Empty your bladder before and after having sex.



In most cases, if UTI symptoms are treated right away, the infection does not further damage the kidneys. Treating urinary blockage right away, like with an enlarged prostate or kidney stone, will also help to protect the kidneys.