



Cecilie Nelson, Temecula, CA
AKF Ambassador



WINTER 2024 | VOL. 9.4 AKF in ACTION

Fighting kidney disease and helping people live healthier lives.

2 Shot talk: Which vaccines should you get when you're living with kidney disease?

8 How genetic testing can help unlock answers to kidney disease

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How AKF has been working for you in 2024

2024 has been a very successful and impactful year, as we continue our work to fight kidney disease and help people live healthier lives. Here are some highlights of our work on behalf of the kidney community.

Kidney Disease Education and Programs

AKF has hosted several educational events, including:

- **Kidney Action Week**, the nation's only free, online conference that provides engaging content for members of the kidney community. Each day of the conference had a different theme and focused on topics such as living well with kidney disease, kidney health equity and innovations in the kidney disease space. To watch the recordings of the event, visit bit.ly/KidneyActionWeek2024. AKF's sixth annual Kidney Action Week will take place March 3–7, 2025.
- **Dialysis at Home**: A Virtual Kidney Community Event, which is a key part of our Kidney Health for All™ initiative and seeks to help improve education and accessibility of home dialysis to underserved communities.

AKF also convened nearly 100 medical and industry leaders and patient advocates in September for our fifth annual summit of our Unknown Causes of Kidney Disease (UCKD) Project in our nation's capital. Up to 15% of people with kidney disease don't know the cause of their condition, making it difficult for medical professionals to diagnose them and identify the best treatment plan. The UCKD Project works to expand access to genetic testing, reduce barriers to quality care, engage providers and empower patients.

In April, we launched our national kidney health equity media campaign to bring greater awareness of kidney

disease within Black and Hispanic/Latino communities, the two groups most disproportionately affected by kidney failure in the United States.

Over the summer, we were thrilled to announce our partnership with Olympic gymnastics champion Suni Lee for our Know Your Kidneys initiative, a comprehensive program that provides a roadmap to better kidney health. Over the last few months, Suni has helped raise awareness about the impact kidney disease has on people of all ages and the importance of knowing the cause of your disease.

Advocacy

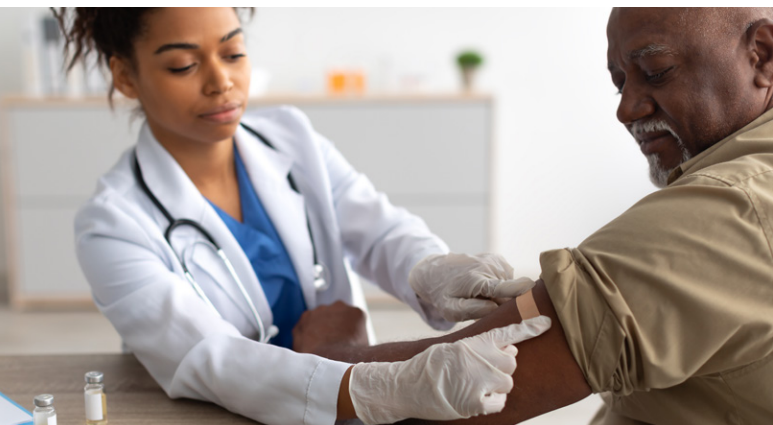
In May, 37 AKF Ambassadors – kidney patients, caregivers and living donors from 22 states across the country – joined us for 67 meetings with lawmakers in Washington, DC to urge them to support legislation and policies that will improve the lives of people with kidney disease.

In September, AKF trained 20 members of AKF's Rare Kidney Disease Action Network in Washington, DC for AKF's Rare Kidney Disease Advocacy Day. The advocates met with lawmakers and requested their support for legislation that would significantly improve research, treatment and diagnosis of rare kidney diseases.

Charitable Assistance

So far this year, AKF is proud to have provided lifesaving treatment-related financial assistance to more than 55,000 people living with kidney failure through our Health Insurance Premium Program, including helping more than 1,300 people get off dialysis by providing financial assistance that makes transplants possible. In addition, we provided direct financial assistance to nearly 10,000 people through our Safety Net Program and more than 1,600 patients impacted by natural disasters.

If you are interested in working with AKF, visit KidneyFund.org/get-involved to find out how to become a Kidney Health Coach, advocate for kidney patients and fundraise for AKF.



Shot talk: Which vaccines should you get when you're living with kidney disease?

Most of the country is now experiencing colder weather when viruses spread more, so now is the time to protect yourself against diseases. This is especially true for people living with chronic kidney disease (CKD).

According to the Centers for Disease Control and Prevention, all people living with kidney disease, receiving dialysis treatments or living with a kidney transplant are immunocompromised. This means that your immune system does not work as well as it should, and you are at a higher risk for infectious diseases, like COVID-19, respiratory syncytial virus (RSV) or influenza (flu). Being immunocompromised means that vaccines are especially important for helping you maintain a healthy immune system.

Have questions about vaccines? The best thing you can do is talk to your doctor, but here are some answers to common questions to help you get started in protecting yourself this winter.

Are vaccines safe?

All vaccines that you receive at a pharmacy or from your doctor are approved by the Food and Drug Administration (FDA). This means that they have been studied to make sure they work, and they are safe.

Should I get the COVID-19 vaccine?

Yes. It is safe and recommended for patients at all stages of kidney disease, patients receiving dialysis and transplant recipients.

Should I get the flu vaccine?

Yes. The influenza or flu shot is a vaccine that you should receive annually. Patients with kidney disease are at a higher risk of developing serious flu complications, which can lead to being in the hospital and potentially death.

The flu virus changes every year, and a new vaccine is developed to protect from the newest strains. This is why it is important to get vaccinated each year.

Should I get the RSV vaccine?

It depends. Patients 60 and older with chronic kidney disease are at an increased risk for severe RSV and should receive the vaccine. RSV is a respiratory virus like COVID-19 and the flu.

What other vaccines should I know about and make sure I'm up to date on?

You should ensure you are up to date on routinely recommended vaccines for the general population. These include varicella (VAR or chickenpox), tetanus/diphtheria/pertussis (TDAP), human papillomavirus (HPV and genital warts), varicella-zoster virus (shingles), pneumonia and hepatitis B (HBV).

Can I get more than one vaccine at a time?

It is possible to receive multiple vaccinations at the same time. For example, you can receive both your COVID-19 and flu shot at the same appointment, which means only needing to visit your provider once. Talk to your health care provider about scheduling multiple vaccines in the same appointment. They can give you guidance on best practices for vaccines and what to expect if you are getting multiple shots.

To read our full blog post on vaccines, visit bit.ly/ShotTalkBlog.

Visit bit.ly/AKFVaccines to see our full webpage on vaccines and kidney disease.

AKF is grateful to Moderna for their support of our vaccine educational materials.

Disclaimer: *The information provided here is not intended to replace professional medical advice, diagnosis or treatment. Please consult your primary care doctor and/or nephrologist about your specific health care needs, including which vaccines you should get.*



AKF supports dialysis and post-transplant patients affected by major hurricanes

This fall, AKF turned on its Disaster Relief Program to aid dialysis and post-transplant patients living in areas impacted by Hurricane Helene and Hurricane Milton, both of which brought destructive storm surge, high winds, damaging tornadoes and flooding, and resulted in widespread evacuation orders. AKF's Disaster Relief Program is the nation's only rapid-response system that provides emergency financial assistance to dialysis and recent transplant patients, who are especially vulnerable and prone to hardship during a natural disaster.

In the aftermath of Helene, emergency grants of \$250 were made available for dialysis and post-transplant patients living in the affected counties in Florida, Georgia, North Carolina, South Carolina, Tennessee and Virginia, with more than \$232,000 in grants provided to 932 patients. Grants of the same amount were also made available to affected counties in Florida and Georgia in the aftermath of Hurricane Milton, leading to more than \$111,000 provided to 451 patients. These grants help patients replace lost

medications and kidney-friendly foods, pay for temporary housing and transportation to treatment, and replenish clothing and personal essentials that have been lost due to the natural disaster or the need to evacuate with little to no notice.

Visit bit.ly/MiltonInfo to learn more about AKF's relief efforts following Hurricane Milton.

Visit bit.ly/HeleneInformation to learn more about AKF's relief efforts following Hurricane Helene.

AKF is grateful to the many corporations, foundations and other friends who have offered critically needed aid to these efforts, including the American Society of Nephrology, Ardelyx, Aurinia Pharmaceuticals Inc., CorMedix, CSL Vifor, the Foundation for Kidney Patients, Otsuka America Pharmaceutical, Inc., the Schattner Foundation and Traverre Therapeutics, Inc.



Meet Chet Alan Bennett, AKF's 2024 Hero of Hope

AKF was delighted to present the 2024 Hero of Hope Award to AKF Ambassador Chet Alan Bennett at AKF's annual national gala, The Hope Affair, on Oct. 8. The Hero of Hope is the highest honor given to a kidney patient in the United States, presented to someone who is making a profound impact in their community despite the challenges of living with kidney failure.

Prior to being diagnosed with end-stage renal failure (ESRD) and crashing into dialysis in 2018, Chet had never been hospitalized and was traveling the world. He spent a year on dialysis before looking for a kidney donor, who turned out to be a former cosmetology student whom he had mentored.

After receiving his transplant, Chet established the C. Alan Foundation, which raises awareness and funds to help people with kidney disease by offering counseling, nutrition, toiletries, education, housing, transportation and support. He also founded The Kidney Kafé to teach people with kidney disease and diabetes how to stay healthy through delicious recipes and daily lifestyle maintenance.

Chet launched his own YouTube show called Kidney Conversations, which gives people a chance to share their own kidney stories, discuss the nuances of kidney disease and increase their knowledge and awareness of kidney-related issues.

For more information on Chet and The Hope Affair, visit bit.ly/HeroOfHope2024.

DIALYSIS AT HOME

Virtual Kidney Community Event



AKF's third annual Dialysis at Home Summit brings the kidney community together to learn about home dialysis

On Oct. 3, AKF hosted its third annual Dialysis at Home: Kidney Community Event, a free online event that provided participants with the opportunity to hear from patients, home dialysis advocates and health professionals about home dialysis options, including the quality of life benefits they provide. This year's summit included sessions on patient and provider care collaboration, home dialysis infection prevention and management, cooking and nutrition, and chronic kidney disease coexisting conditions.

Here are highlights from two of the sessions, in case you missed the summit:

Managing common health conditions associated with CKD while navigating home dialysis

People living with chronic kidney disease often must manage health conditions associated with risk factors of their kidney disease. This panel included three remarkable panelists: Ashia Lee, director of patient education for the Arthritis Foundation; Dr. Quasim Butt, an interventional nephrologist and Kathy Wong, a registered dietitian nutritionist from DaVita Kidney Care. The panelists shared

ways to control health conditions such as anemia, gout, hyperkalemia (high potassium) and hyperphosphatemia (high phosphorus) while navigating home dialysis. They also highlighted the important benefits of working with your health care team to manage or alleviate the effects of these conditions through healthy eating, treatment options and medication management. Ashia Lee discussed the importance of patient advocacy and communication. She also encouraged participants to discuss gout with not only their doctors, but other support systems in their life as well, expressing the importance of building a community to lean on during flare-ups and rough moments.

Cooking and conversation: Lunch time with The Cooking Doc®

People experiencing kidney failure who are on dialysis are encouraged to follow a kidney-friendly food and fluid plan developed by their doctor and dietitian. To help attendees understand how to do this, we were excited to offer an interactive cooking demonstration by Dr. Blake Shusterman, also known as "The Cooking Doc." Often, people living with kidney disease are told what they cannot eat. This session provided an insight and instruction-based approach to cooking.

Dr. Shusterman guided participants through three tasty recipes – a fruit-and-spice infused water, a mashed avocado and chickpea sandwich, and a crustless pumpkin pie. Dr. Shusterman was joined by clinical dietitian Janelle Gonyea and the two discussed aspects of nutrition in relation to home dialysis.

To view all Dialysis at Home sessions, visit bit.ly/HomeDialysisSessions. You can also download AKF's home dialysis resources, available at KidneyHealthForAll.org.

AKF is grateful to Amgen for its support of this educational initiative.

Real people, real success stories with Velphoro

Listen to patients share their personal journeys with Velphoro.

"I would recommend Velphoro because you can break it, crush it, chew it, and it tastes great."

—Anita



"Velphoro helps me control my phosphorus and maintain it."

—Easter

"I could take one phosphate binder instead of six with each meal."

—Antonio



"Ever since we switched my phosphate binder, my phosphorus has been spot on."

—Robert

The paid testimonials provided are representative of that individual's experience, and not all patients may experience these benefits.



Watch their stories at **VelphoroVoices.com**.

Scan the code with your cell phone camera

INDICATION

Velphoro[®] (sucroferric oxyhydroxide) is a phosphate binder indicated for the control of serum phosphorus levels in adult and pediatric patients 9 years of age and older with chronic kidney disease on dialysis.

IMPORTANT SAFETY INFORMATION

- Velphoro chewable tablets must be taken with meals. Velphoro should be chewed or crushed. Do not swallow whole. Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and other supplements. Velphoro can interact with other medicines.
- Tell your healthcare provider if you have any of the following: peritonitis (an infection) during peritoneal dialysis, significant gastric or liver disorder, recent major gastrointestinal (GI) surgery, a history of hemochromatosis or other disease that results in iron buildup in the body. People with these conditions were not

included in clinical studies with Velphoro, and your healthcare provider will monitor your iron levels while you are taking Velphoro.

- Velphoro can cause side effects. The most common side effects are discolored stool, diarrhea, and nausea. Tell your healthcare provider if you have any side effect that bothers you or that does not go away.
- Discolored (black) stool is considered normal if you are taking an oral medication that contains iron, like Velphoro. Discolored stool may mask gastrointestinal bleeding, which was not a side effect of Velphoro in clinical studies.
- Before taking Velphoro, tell your doctor if you are pregnant, plan to become pregnant, or are breastfeeding.

Velphoro is available by prescription only. For additional Safety Information, please see full Prescribing Information at **Velphoro.com**. To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Medical Care Customer Service at 1-800-323-5188 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Brief Summary:

Please see Full Prescribing Information for additional information

**What is Velphoro and how should it be used?**

Velphoro (sucroferric oxyhydroxide) is a phosphate binder used to control phosphorus levels in adult and pediatric patients 9 years of age and older with chronic kidney disease on dialysis.

How should Velphoro be taken?

Chew or crush Velphoro tablets, do not swallow whole.

The recommended starting dose for adults and pediatric patients 12 years of age and older is one 500 mg tablet three times daily with meals.

The recommended starting dose for pediatric patients 9 to <12 years of age is one 500 mg tablet two times daily with meals.

Follow all directions on your prescription label. Your physician may adjust your dose, as often as weekly, by 1 tablet per day until you meet your phosphorus goal.

How is Velphoro available?

Velphoro (sucroferric oxyhydroxide) is available as a 500 mg chewable tablet.

Is there any reason that you cannot take Velphoro after being prescribed by your doctor?

No.

Important note

Velphoro has not been studied in patients with peritonitis while on peritoneal dialysis, or those who have stomach or liver disorders, iron diseases, or those who have had abdominal surgeries. Tell your doctor if you have or had any of these.

What are some possible side effects?

The most common adverse drug reactions to Velphoro chewable tablets in hemodialysis patients included discolored stool (12%) and diarrhea (6%).

Discolored (black) stool is considered normal if you are taking an oral medication that contains iron, like Velphoro. Discolored stool may mask gastrointestinal bleeding, which was not a side effect of Velphoro in clinical studies.

The following adverse reactions were identified after Velphoro had been on the market by some patients and were reported voluntarily.

Tooth discoloration

Skin rash

The risk information provided here is not comprehensive. To learn more, talk about Velphoro with your healthcare provider or pharmacist. The FDA approved product labeling can be found at www.velphoro.us/ or 1-800-323-5188.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Medical Care North America at 1-800-323-5188 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

What should you discuss with your physician when taking Velphoro?

Some drugs may interact with Velphoro. Tell your health care provider(s) about all medicines you use now and any medicine you start or stop using.

Tell your doctor if:

You are pregnant or nursing

What happens if you take more than prescribed?

There are no reports of overdose with Velphoro in patients. Low phosphorus levels should be treated by standard clinical practice.

Velphoro has been studied in doses up to 6 tablets per day.

HOW SUPPLIED/STORAGE AND HANDLING

Velphoro is a chewable tablet supplied as brown, circular, bi-planar tablets, embossed with "PA 500" on 1 side. Each tablet of Velphoro contains 500 mg iron as sucroferric oxyhydroxide. Velphoro tablets are packaged as follows:

NDC 49230-645-51 Bottle of 90 chewable tablets

Storage

Keep the bottle tightly closed in order to protect from moisture.

Store at 25°C (77°F) with excursions permitted to 15 to 30°C (59 to 86°F).

Distributed by:

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Two AKF Ambassadors share what it is like living with a dialysis catheter

Dawn Edwards, an AKF Ambassador, knows full-well that relying on a catheter to receive dialysis treatments can be challenging. In 1992, she was diagnosed with post-streptococcal glomerulonephritis, which caused her kidneys to fail when she was just 22 years old.

“I started on in-center hemodialysis, then went to peritoneal dialysis,” said Dawn. Following a kidney transplant that lasted from 2003 to 2010, Dawn began home hemodialysis, which she has been on ever since.

“When I started in-center hemodialysis, I used a fistula [a surgical connection between one of your arteries and one of your veins],” said Dawn. “After about two and a half years, I got an infection in the fistula and lost it.”

Since then, Dawn has used catheters — which are plastic, flexible tubes that are inserted into a vein — to receive dialysis because doctors could not get a working vascular access point on her body. “We’ve gone from various locations on my body because [the catheters] were clotting and had to be moved,” said Dawn. “Now, we are on the last [available] spot on my body, and [my doctors] have been working on keeping that open. It’s been a battle, as I’ve been dealing with infection after infection.”

Infections are common in people who are on hemodialysis, and the Centers for Disease Control and Prevention reports that while people with any type of vascular access can develop an infection, catheters have the highest risk of infection.

Dawn said the exact cause of her infections was not clear, but she is working to reduce the stigma that she feels

has been placed on patients. “The kidney community and medicine in general has a nasty habit of stereotyping the word ‘infection’ and pushing blame back on the patient, making it seem as if the patient is not clean,” she said. “It’s unfortunate, as it makes [patients] feel like they’ve done something wrong. People with kidney disease are susceptible to infection, and you can be as clean as humanly possible, but infections are a part of life.”

AKF Ambassador Della Major, who has used catheters to dialyze after lupus nephritis caused her kidneys to fail, echoed this sentiment. Like Dawn, Della is unable to use fistulas, as her doctors were not able to get her blood flowing properly through them. She has worked hard to prevent catheter-related infections but has still gotten them. However, she and Dawn emphasized that exercising infection prevention measures — such as frequent handwashing and cleaning equipment — is still important. “Make sure technicians are swapping out their gloves and that your access point is not exposed to open air,” said Della.

There are also new strategies and technologies that people who use catheters to dialyze can look into to help reduce the likelihood of infection, such as antimicrobial impregnated catheters and catheter lock solutions. Antimicrobial impregnated catheters are special catheters that are coated with medicines like antibiotics that kill bacteria. Catheter lock solutions have a special liquid, sometimes an antibiotic, that also kill bacteria.

Both Della and Dawn emphasized that caretakers and loved ones play a critical role in keeping patients healthy physically and emotionally. “If you see something, say something,” said Dawn. “Any slight difference in that loved one may be something serious.” However, Della said that loved ones of people on dialysis also need to work to be calm, stabilizing presences in their loved ones’ lives. “Let the patient tell you what they need, because the last thing we need is for you to be [panicking] over something while we’re mentally trying to deal with [the situation].”

Dawn stressed that while using a catheter to receive dialysis is not always easy, you can still live a happy and full life. “You [should] live every day to its absolute fullest potential, and do the things that make you happy,” she said. “I don’t want people to feel bad because [catheters are their means] of vascular access. We need that access, and I am alive because I have a catheter. It may not be the vascular access of choice, but it is the vascular access for life.”

This article is supported by CorMedix Inc.



— How genetic testing can help unlock answers to kidney disease

Maggie Westemeyer, a genetic counselor and the director of clinical genetic services in the Organ Health Division of Natera, answered questions about genetic testing and how it can help patients unlock the answers to their kidney disease and get the treatment they need.

What is a genetic test? Are there different kinds? If so, what are they and how do you know which test to get?

There are many different kinds of genetic tests ranging from tests that examine one genetic mutation to tests that examine many genes (panel tests), as well as exome or genome sequencing tests that look at all of the genes related to human health. Your health care provider or a genetic counselor can help you decide what genetic test is right for you based on your medical and family history.

How is a genetic test performed?

Genetic testing is typically performed on a blood or saliva (spit) sample. Genetic tests analyze your DNA for differences (also known as mutations or variants) that can cause genetic conditions.

What can you learn from a genetic test?

Genetic testing can give several possible results. The test may confirm a diagnosis or give a new diagnosis. Genetic testing can be negative, which means no genetic changes are identified. Negative results are most informative when a person is tested for the same disease-causing variant(s) that a family member has. Genetic testing can

sometimes have uncertain results, which means there is not enough information to tell if a genetic change is benign or disease-causing.

Who should consider getting a genetic test?

There are several reasons to consider getting a genetic test, including: 1) to diagnose a genetic condition if you have symptoms, 2) to learn whether you have a genetic condition that runs in your family, and 3) to learn whether you could have a child with a genetic condition. A genetic counselor or health care provider can help you determine if genetic testing is right for you.

How can genetic testing benefit someone living with kidney failure?

Genetic testing can help inform decisions about a kidney transplant. Genetic testing may be recommended for both kidney recipients and kidney donors.

How can someone get a genetic test and how much do they cost?

Most genetic testing is ordered by a health care provider. The cost of genetic testing can range from under \$100 to more than \$2,000 depending on the type and complexity of the test. In many cases, insurance covers the cost of genetic testing.

What are the next steps for someone after they have received the results of their genetic test?

Review the results with your health care provider or a genetic counselor to understand the meaning of the results in the context of your health and family history so that any appropriate next steps can be taken.

What are the next steps for someone interested in genetic testing?

Speak with your health care provider or meet with a genetic counselor to determine if genetic testing is right for you.

To read the full blog post about genetic testing, visit bit.ly/NateraGenetics.

For more information about genetic testing, visit AKF's website.

AKF recently launched "Answers Unlocked," an educational campaign about genetic testing. This campaign is supported by Natera.



Meet AKF's first Kidney Health Coach Health Equity Grant awardees

In November 2023, AKF was pleased to launch its pilot Kidney Health Coach (KHC) Health Equity Grant program to help expand the reach and impact of KHC by enabling organizations and coaches across the country to reach at-risk communities and spread health messaging in CKD prevention and management.

In the first year of the grant program, AKF awarded 29 coaches and four organizations with grants. Here are highlights of how these four organizations used their grants.

Kidney Champion Foundation

The Kidney Champion Foundation educates historically marginalized and underserved communities of people living with kidney disease while fighting for inclusive and equitable access to care.

"With the support of AKF, we have been able to enhance our outreach efforts and connect with communities that are often overlooked in kidney health education," said Crystal King, founder and executive director of the Foundation. "The grant has contributed significantly to the success of our program by providing the resources we need to set up professional workshops, distribute educational materials and engage with the community in meaningful ways."

Kidney Disease Screening and Awareness Program (KDSAP) at University of California, Berkeley

UC Berkeley's KDSAP is an undergraduate student-run organization that provides free kidney disease screenings and educational presentations in underserved communities across the Bay Area to improve kidney health and promote health equity.

"We have used the information AKF provided us to edit our awareness presentation slides, and we have relied on

them as a source of funding for our screenings," said Tanvi Yalamanchili, vice president of Berkeley's KDSAP. "During our spring 2024 screenings, we served 173 patients and have conducted further outreach through our awareness presentations. During this current fall semester, we have already served 71 patients in our past two screenings, and we have five more screenings coming up."

KDSAP at the University of Southern California (USC)

USC KDSAP is led by students and provides free kidney health screenings and health education to underserved communities in Los Angeles. Currently, USC KDSAP is in the process of expanding its reach to elementary and middle school students by incorporating engaging scientific experiments for kidney health awareness in collaboration with USC's Health Sciences Education Program.

"The money from this grant will help us develop new educational materials and flyers, as well as purchase equipment for our screenings, such as blood pressure cuffs, gloves, glucometers, lancets and so much more," said Mugil Shanmugam, secretary of USC KDSAP. "The money from the grant goes a long way in ensuring that we can conduct screenings for years to come."

Pine Bluff (AR) Chapter of the Links, Incorporated

The main goal of the Pine Bluff Chapter is to spread awareness about chronic kidney disease prevention and educate those who are at risk of developing it. Pine Bluff hosts in-person kidney disease education sessions in the community, including conferences, libraries, health fairs and banquets.

"We have been able to reach more of our community by providing kidney disease education in local churches, schools, libraries, health fairs and community centers," said Nicole Bates, a chapter member. "We are grateful for the opportunity to expand our community outreach through the funding received from American Kidney Fund's Health Equity Grant."

The Kidney Health Coach grant program is a priority outreach initiative under AKF's Kidney Health for All™ campaign. We are grateful to our corporate sponsors Boehringer Ingelheim and Lilly and Company, Travele Therapeutics, Vertex Pharmaceuticals Incorporated, AstraZeneca, Merck and Co., Otsuka America Pharmaceutical, Inc. and Sanofi, who have made this work possible.

For more information on the Kidney Health Coach program, visit bit.ly/KHCCoach.

Thank you to our corporate members for their support in 2024

Champion



Patron



Advocates and Friends



wishing you a

JOYFUL HOLIDAY SEASON!



AKF staff spotlight



Name: Gina Johnson

Hometown: Germantown, Maryland

What do you do at AKF? I am a Patient Support Coordinator. I work with AKF's grant assistance programs including the Health Insurance Premium Program, Safety

Net, Disaster Relief and Living Donor Assistance grants programs. I assist users of AKF's Grants Management System (GMS) by answering GMS messages, Helpdesk Tickets and phone calls. I also work to improve patient support efforts through projects like updating the virtual assistant on the GMS website and creating training materials and guides for internal and external GMS users.

Why are you passionate about fighting kidney disease?

Kidney disease can impact anyone and is often preventable. Kidney failure not only diminishes a person's quality of life due to health complications, but also imposes significant health care costs. Educating individuals on prevention and supporting those already facing end-stage renal disease is essential for mitigating these effects.

What is the best part of your job? Working with patients is the best part of the job by far. Patients often contact Patient Support when they are confused or frustrated with the grant process. Being able to reassure them and assist them in getting the help they need makes everything worthwhile.

What are your favorite hobbies outside of work? I have a passion for all things creative, especially hobbies that blend math, science and art. I enjoy painting, drawing, animation and writing, as well as coding web programming and app development.

Kidney Kitchen®



This and other recipes can be found at kitchen.kidneyfund.org.



Cranberry Clafoutis

Makes: 8 servings

Serving size: 1 wedge of clafoutis



Prep time: 30 min

Cook time: 45 min

Recipe contributed by
Family Cook Productions

Nutrition facts

(1 serving = 1 wedge of clafoutis)

Calories = 206
Carbohydrates = 25 g
Sugar = 15 g
Fiber = 1 g
Calcium = 49 mg
Fat = 10 g
Saturated Fat = 6 g

Trans Fat = 0 g
Protein = 4 g
Phosphorus = 70 mg
Cholesterol = 84 mg
Sodium = 109 mg
Potassium = 93 mg

Ingredients:

1 ½ cups (150 grams)
cranberries, fresh
3 Tbsp turbinado sugar
3 medium eggs
1 cup milk
5 Tbsp butter, unsalted

1 tsp vanilla extract
⅔ cup unbleached flour
¼ cup sugar
½ tsp cardamom, ground
¼ tsp sea salt

2 Tbsp powdered sugar
(optional, included in
nutrient analysis)

Special Equipment:

9-inch pie dish

Directions:

1. Preheat oven to 400°F.
2. Toss together cranberries and turbinado sugar in a small bowl and spread them evenly in a 9-inch pie dish.
3. Bake for 20 minutes, until cranberries start to caramelize. Transfer cranberries from the pie dish to the small bowl and set aside. Reserve the pie dish for later use.
4. Whisk together eggs, milk, 4 tablespoons of the butter (melted), and vanilla in a large bowl.
5. Add flour, sugar, cardamom and salt. Mix well.
6. Butter the pie dish with the remaining 1 tablespoon of butter. Pour the batter into the dish.
7. Bake for 10 minutes, until almost set, but still loose in the center. Remove from the oven and arrange the cranberries evenly on top of the almost baked batter.
8. Bake for 15 more minutes. Cool slightly and dust with powdered sugar (if using).
9. Divide pie into 8 wedges and serve while warm.



Cooking Tip:

To ensure a super-smooth batter, you can process the ingredients in a blender if you wish.

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KidneyFund.org

AKF is fighting on all fronts as the nation's leading kidney nonprofit. Sign-up to receive our monthly e-newsletter to get the latest updates at KidneyFund.org/sign-up.

What's Inside:

- Making an impact in 2024
- Shot talk: Vaccines that are important for kidney patients to receive
- AKF supports dialysis and post-transplant patients affected by hurricanes Helene and Milton
- Meet Chet Alan Bennett, AKF's 2024 Hero of Hope
- AKF's third annual Dialysis at Home Summit brings the kidney community together to learn about home dialysis
- Two AKF Ambassadors share what it is like living with a dialysis catheter
- How genetic testing can help unlock answers to kidney disease
- Staff spotlight
- Kidney Kitchen® recipe

