Announcer: Welcome to the Vets First Podcast, a research-based conversation centered around the VA health care system, its services, and patients. From Iowa city, Iowa, here’s your hosts: Dr. Levi Sowers and Brandon Rea.

Levi: Welcome back to the Vets First Podcast! I’m Dr. Levi Sowers, with me as always is Brandon Rea.

Brandon: Hello, everyone!

Levi: Today is our fifth episode and we’re gonna be shifting gears a little bit to kidney transplants, and how the Iowa City VA health care system is one of the leaders in the United States for kidney transplants. Brandon’s gonna introduce a little bit so to what kidney disease is in the United States, how prevalent it is, and some of the stats surrounding that.

Brandon: Starting bare bones, what is the kidney? Kidney is an organ in your body whose job is to filter your blood. They remove waste and help your body control its fluid balance, and when your kidneys don’t work well, water and waste will build up and cause other health problems, including heart disease and high blood pressure. Chronic kidney disease affects over 15 percent of eight U. S. adults, which equates to about thirty seven million people, and nine out of ten people don’t really know that they have chronic kidney disease, because one out of two people with very low kidney function, who are not on dialysis assisted blood filtering, do not know that they have chronic kidney disease.

Levi: Chronic kidney disease is more common in people sixty five years or older. Roughly thirty eight percent relative to seven percent people in people ages eighteen to forty four years old. It’s more common in women than men. Fifteen percent to twelve percent, and chronic kidney disease is more common in non-Hispanic blacks; sixteen percent, than in non-Hispanic whites at thirteen percent, or non-Hispanic Asians at twelve percent. We don’t know why this is, probably due to genetic causes, but it’s something that you should take note of. In Hispanic population about fourteen percent of people have chronic kidney disease.

Brandon: So with chronic kidney disease what are the risk factors? Diabetes and high blood pressure are the major causes of chronic kidney disease in adults and other risk factors include; heart disease, obesity, family history, AKA genetics, as Levi alluded to, to past damage the kidneys in older age, keeping kids healthy healthy by managing your blood sugar, and blood pressure, is pretty key.

Levi: There’s multiple ways to prevent chronic kidney disease when detected early. The main thing is you need to control risk factors for kidney disease such as high blood pressure and high blood sugar levels, so uncontrolled diabetes is one of the number one causes for chronic kidney disease. And then you know, keeping a healthy body weight through a balanced diet and physical activity can help people with chronic kidney disease. And ultimately testing for chronic kidney disease regularly, in people who have diabetes, high blood pressure, or other risk factors for chronic kidney disease, is very important.
Testing and treatment; you know it's interesting, because as you'll hear later on in episode seven, with Doctor Christie (Thomas), he talks about how people don't feel ill or notice any symptoms until chronic kidney disease is quite advanced. In fact they start to get sick and that's how they know that they have it, and by that time it's often very advanced. In terms of testing the only way to find out if people have chronic kidney disease, is through simple blood and urine tests. They can determine, through levels of different components in your blood, that the kidneys are properly filtering what needs to be filtered, and you know, they can detect waste products produced by muscles, then they can test urine for protein as a sign of kidney damage. But you know ultimately if chronic kidney disease goes unchecked, you end up with kidney failure, and that's when the kidneys are so damaged that their function is so low that the person can no longer survive. These people often have to go on to dialysis to maintain some semblance of a normal lifestyle, and so when people have kidney failure they'll often need a transplant. And before they receive a transplant, they're going to need dialysis, which you'll hear some of the people we interview, the Veterans who interview, we interview Dr Christie Thomas, we'll talk about this in the next three episodes.

Facts about in stage kidney disease or kidney failure is that in twenty sixteen there were nearly a hundred twenty five thousand people United States this started treatment for it and more than seven hundred twenty six thousand four on dialysis the United States or living with a kidney transplant which is a huge number and really surprised me when we're doing some of the research for this every day in United States more than two hundred and forty people on dialysis die waiting for a kidney transplant African Americans are about three times more likely than whites to develop in stage kidney disease and for every three non Hispanic who develop in stage kidney disease or kidney failure four Hispanics develop it.

Brandon: In the United States, people who are eighteen years or older diabetes and high blood pressure are really the main reported causes of end stage kidney disease.

Levi: With all the statistics and information that we just sort-of lobbed at you, the next three episodes (including this one) are going to be about kidney disease and the transplant process here at the Iowa City VA. What's interesting is that, in the last half of this episode, you're gonna hear from two people - one of them is Alysha Scott, who is the caretaker for a Veteran named Jan Scott and we're gonna get her perspective on what it's like for a caretaker to interact with a Veteran that is in in-stage kidney kidney disease. Jan received a kidney transplant and so he's post operation.

Brandon: Our second guest is Rob, who's received a kidney transplant at the VA, and tells us about his experiences of, particularly, dialysis and how this new kidney transplant has changed his life.

(Musical interlude)

Levi: Welcome back to the Vets First Podcast! Today, we have Alysha Scott with us, she's a caregiver for Jan Scott and they come to us from Kokomo, Indiana. They're here to be part of the
kidney transplant program at the University of Iowa, that it has with the VA - there's a collaboration there. Alysha, can you tell us a little bit about your husband’s service?

Alysha: He had served for four years and he was a cook and he served in Louisiana, at a base in Louisiana. He didn’t go to Vietnam; he was in during the Vietnam era but he didn’t go.

Levi: So did he serve for a long time or a short time?

Alysha: Just four years.

Levi: Just four years, okay. And so, when he got out, he never was in a combat situation, but when he got out, did he always get his health care through the VA?

Alysha: No, he was a firefighter for the city of Kokomo for twenty years and he had awesome insurance through them. When he went into renal failure and needed a transplant, a friend of his who went through the VA said, “you should check out the VA, because they have a kidney transplant program also.”

Levi: So how did he start to know that he needed a transplant? What happened?

Alysha: Well, he’s had renal failure for eight years.

Levi: Oh, wow, okay.

Alysha: They just kept saying, you know, “you’re at ten percent, you’re at six percent.” Finally, I said when can he get a transplant? They said he had to start on dialysis first. And when he got put on dialysis, he got put on the transplant list and he was on dialysis for four years before he got the kidney.

Levi: How did he end up choosing the VA for the kidney transplant?

Alysha: They were the ones that got the kidney first.

Levi: Oh, really?

Alysha: We were set up through IU in Indiana and through the VA, there in Indiana, but they do the transplants here in Iowa - the Kidney transplants. So, we came for a week and got evaluated. He was okay, I think we were on the list for two years and we got the phone call - the real phone call, because we had two others that didn’t turn out.

Levi: Can you kind of explain to us, what is that like? Your husbands on dialysis for- how long was it? Four years?

Alysha: Four years, three times a week.

Levi: Three times a week for four years and, like, that's probably - I don't I don't know much about dialysis - but, it's probably a semi-precarious situation?
It’s draining. He would go to dialysis, get there about 5 o’clock in the morning, and get home about noon. And then he would sleep all day.

Levi: So it, like, physically drained him?

Alysha: Physically drained him. And then the next day, if it was like a Friday or Saturday he would be good but by Sunday he...he felt bad again.

Levi: Started getting sick again?

Alysha: Because he needed the dialysis to clear the toxins. And then, Monday, he felt bad because he had dialysis. So he had two days of the week where he actually felt good.

Levi: And he did that for four years?

Alysha: Four years.

Levi: That's crazy. What was it like when you first got that call about the kidney?

Alysha: My goodness, well, with the two before we got one call and we never actually went anywhere - they called us before and told us “nevermind”. And then we were at the airport in Kokomo and we watched the plane come across the Indiana state line and turn around.

Brandon: Oh, man...

Alysha: Within seconds, his phone rang and said that the kidney wasn’t usable. So, those times were just...I mean...

Levi: Very emotional.

Alysha: Just crushing. So when we got the kidney, they called and were, like, “Get your stuff ready, we’ll let you know your flight information and stuff.” It was just like (gasp), you know, you rush and you rush and you’re excited and then...I just don’t know how to explain it. Just so much emotion, like the flight here was “oh my god!”

Levi: So you’re excited, but is it also a little scary?

Alysha: Very scary.

Levi: Because your husband’s about to have-

Alysha: Major surgery. And then we got here and the cab brought us from Cedar Rapids to Iowa City. We got to the hospital, they took our luggage and put it down in the laundry area, and we stayed overnight. The next morning, they said 10 o’clock for the surgery. 10:00 came, and that was really stressing me out, like an hour and a half later they came and were like, “we’re ready, we’re going.” Then the doctor told me to go to the hotel, take a nap...
Alysha: So I ended up going back to the hotel with a lady who was staying there because her husband was getting a kidney transplant and we went for, like, a four hour walk. I was in constant contact with the hospital, you know, “Is he okay?” “Well, he’s still in surgery” and I actually got back to the hospital before he was out of surgery. Everyone here is amazing, as far as the staff, they are amazing. They took such good care of my husband and me, you know, emotionally and things like that; it was great.

Levi: So once the surgery was over did he immediately feel better? Does it take awhile for the kidney to-

Alysha: It has to wake up. Some people wake up “like that”, it took five days to wake up because it’s, like, in shock - it doesn’t do anything. He didn’t have to have another round of dialysis, they were getting ready to put him on dialysis again-

Levi: So not only is it this huge build up of “oh my god are we ever gonna get a kidney?” But after it’s in, is it going to work? Oh, man; that’s gotta be very intense.

Alysha: It was.

Levi: So, when it when it started working, was it like a a quick switch or is it-

Alysha: Yeah, I mean, he felt better quickly but one thing about my husband is - we were here for five weeks in Iowa and then two weeks after returning home, he had a heart attack.

Levi: Oh my gosh.

Alysha: In the time we were here, he was having trouble with shortness of breath and stuff like that. They just didn’t catch the heart issues here so we got him down to our VA, but he got that taken care of at our local VA - they’re wonderful there too.

Levi: So overall you've had a pretty good experience at the VA and what's going on here.

Alysha: Yes.

Levi: That's really cool; is there anything else you'd like to say about the experience or-

Brandon: Or on-going, afterwards?

Levi: Yeah, how long ago did he get his kidney?

Alysha: Three years as of the twenty-fourth. We thought it was the nineteenth but the twenty-fourth is his three year day.

Levi: Of April?
Alysha: April.

Levi: That’s really cool, it’s coming right up, like, next week!

Alysha: Yup, this is our three year check-up.

Levi: And so, since then, has he been pretty good, physically?

Alysha: Yes, after he had the heart attack and got all of that taken care of. Yes. He's starting to get back into the swing of things.

Levi: Fantastic.

Brandon: Having a full week no dialysis?

Alysha: Yes, exactly. I’m just trying to get him a job.

(Group Laughs)

Alysha: You don’t have to work twenty hours a week, I’m just asking, ya know, to get out of the house.

Brandon: I’m hearing a sigh from somewhere.

Levi: Yeah, he’s itching his nose somewhere.

(Group Laughs)

Levi: That’s fantastic. Well, Alysha, thank you so much for spending a little bit of time with us and tell your story and Jan’s story. Thank you for listening today, everyone.

Levi: You just heard from Alysha Scott and now we’re gonna hear from Rob Siwek. Today, we have Rob Siwek from Mansfield, Ohio. He came to Iowa city, as the other kidney transplant people have done, to get his kidney transplant through the VA. He served in the army from 1987 to 1989 in Fort Jackson, South Carolina. Welcome Rob! Thanks for coming, man; thanks for telling us your story.

Rob: Yessir.

Levi: Could you tell me a little about how you decided to join the military and why?

Rob: Okay, when I was a senior in high school, I was kind of a kid that, you know, I didn't like school. I was a really good student, I was an A/B student but I wasn’t really in to school. How parents want you to go to college everything, I thought, “that's not for me.”“ I need a little discipline in my life. So before I was - I wasn't even eighteen yet, I was seventeen when I signed up to join the military and, I'll be honest, it’s the best thing that ever happened in my life.
Levi: That's cool!

Rob: A little discipline, you know, I've always respected Veterans all my life. My dad was a marine for years and I just always-

Levi: Did you grow up in Mansfield, Ohio?

Rob: Yes, born and raised Mansfield, Ohio.

Levi: That's cool, so why do you choose the army?

Rob: No particular reason. I just, one thing is, at that time I could join for two/three/four years but a lot of other branches you had to join for four years and, at the time, I thought, “I don't know if this is going to be for me.” But the two year thing, I went to see a recruiter and it just went well - it went really well. The recruiter now still lives in Mansfield, he's a really good friend of mine.

Levi: Oh, that’s really cool! What did you do in the military?

Rob: I did supply - 76 Yankee; I was a supply.

Levi: Sweet, so you did a two year stint, and then you got out of the military and did you immediately start using the VA for healthcare?

Rob: Well, I was diagnosed with diabetes when I was in the military about three or four months before I was going to get out.

Levi: Type 2 diabetes?

Rob: No, type one.

Levi: Oh, that’s late?

Rob: Insulin dependent, yes. I was nineteen, it was, like, May of 1989 and my ETA date was August 31, 1989. So I could stay in, which I did until then and then I did my time, but when I first got out they had me sign up for benefits because they said I was 20% - considered 20% disabled. Because I contracted diabetes when I was in the military.

Levi: So you got 20% service connected?

Rob: Yes, service connected through the VA. So when I got out, I could automatically start going. Now, at that time, Mansfield didn't have a clinic, like an outpatient clinic, so I had to drive to either Columbus or Cleveland which is an hour away. And I did that; I mean, they took care of my care with anything related to my diabetes.

Levi: Oh, that’s fantastic. So did you have a good experience with that?
Rob: Oh, it was fantastic. When I first started going there, it just seemed like it was a lot busier then because there weren't as many places to go but I've never - I'll be the one guy, probably, that you talk to that has never had a complaint ever about anything with the VA.

Levi: Fantastic, we like to hear that.

Rob: I understand how it is and, don't get me wrong, because I've seen people complain, I've seen professionals on TV, I've seen it and that has never been my experience ever to any place I've ever been - especially here, this has been...

Levi: Yeah, Iowa City has really good VA, I think.

Rob: It is fantastic.

Levi: You're here for a kidney transplant or you did get a kidney transplant-

Rob: Actually, got a kidney-pancreas transplant.

Levi: Oh, you got the double one?

Rob: Yeah, I got the double transplant.

Levi: Okay, that's something I'm curious about, why is it a double transplant?

Rob: Because, well I've read up on it, but what had happened is I got sick with the flu.

Levi: How long ago was this?

Rob: 2017. January. You know, I had gone through all the care with the VA for thirty years here, well, about twenty-eight years and I've been going to the VA for all of my treatments, all of my doctor appointments and I got sick with the flu. Well, dumb me - I'll be honest I was a dummy - I didn't go to the doctor right away. So I got really sick at home and I was puking up blood because I puked so much that I tore my esophagus and I got dehydrated. So my kidneys weren't the best to begin with because of being thirty years diabetic, but they were still functioning okay. Then when I got sick I got dehydrated and I was in ICU for six days because I tore that esophagus and was puking blood; I didn't know it was blood, I just thought it was dark bile. After I got out of the hospital there, I went to the VA and they told me that my kidneys were failing. They were at 10% - somewhere in there.

Levi: Were you feeling pretty crummy at that point?

Rob: Eh, I wasn't feeling great, but I didn't think it was that bad. So I went back to work and, about two weeks later, I started to get some swelling in my ankles and swelling in my legs and the VA doctor called me and said, “you need to get to the hospital right away.” So I went to the VA hospital, the next day they put me on dialysis and said my kidneys were at about 5%.

Levi: What was that like?
Rob: First, it's kind of a shock to you, because I'd heard horror stories about dialysis and I didn't really know a lot about it. But I knew that it’s what it is - I mean to save my life I had to do dialysis. They put me on dialysis and I was in the hospital for three or four days and then they sent me home. Said, “you’re gonna have to do dialysis three days a week.”

Levi: You got a fistula?

Rob: Yes, I still have it in me - I still have my fistula. I didn't get that for about three four months after I started dialysis took a while you know you got to do a lot of tests.

Levi: When this first happened, were you scared?

Rob: A little bit, yes, a little bit. Got a pretty good support group with my day and my step mom, they live down the street from me and they've been pretty good about, you know, and I honestly know a few people - one of my best friends, his girlfriend, well, his fiance now - she said she had a kidney transplant about eighteen years ago and she was fantastic, just talking to me about it. And then, I coach high school baseball and there’s a guy that coaches high school softball (girl’s softball), he’s had two kidney transplants. So I talked to him a lot and it really helped; I was scared at first but once I talked to them - they're like, “you know, it is what it is.” I tried to tell people this too. I had a really good friend of mine that I work with, a lady and she’s a little older than me and her mom, they had told her that she needed to do dialysis and she refused. Well, guess what, she died. So that kinda, you know, hits me that I know what's going on with that. So I was scared, but, then again, I was like, “I've got to do this to live.” Right after that, the doctors at the VA outpatient in Cleveland, Ohio with the Louis Stokes VA center started talking about transplant. First, they were just talking about kidney transplant and then they started talking about kidney-pancreas transplant and I was all in. I mean, to me, to save my life - to change my life. I was all in. You come to some doctors or surgeons and they say, “Do you want to get a transplant?” and, for quality of life, “Yes.” They've told me there are people that actually qualify for transplant that didn't want to get one and I didn't understand it. But, they told me some stories about it and I’m like, “They said this is the best.” I came out to the University of Iowa in April, 2018 for evaluation, to go through all of these tests and everything.

Levi: Oh, about a year ago then?

Rob: Yeah, so I went through a bunch of tests, I mean millions of tests. But, I came in here when I met with the surgeons at the University of Iowa who did the surgery, they actually told me that they had a guy one time that qualified for transplant and, he was older - maybe in his fifties, maybe close to sixty - but he said that he didn’t want a transplant because he liked to go to dialysis to socialize. I was kind of shocked because I thought, “Get a transplant, go out there and socialize after!”

(Group Laughs)

Rob: You know? And I know it really isn't for everybody because it’s a major surgery and some people can’t go through and you have to go to a lot of tests, you have to be healthy. Can't have
cancer, you can’t have all the things, you know, diseases. I probably went through fifty or sixty different tests between it.

Levi: What was it like to be on dialysis?

Rob: You know, for some people it's different and for me it wasn't bad. It's just time consuming, because I was going for four hours and fifteen minutes. By the time you go in and get hooked up, by the time he gets you off and you get everything ready - because I used to have troubles, low blood pressure, because it takes all the fluids out of you that you put on - you're there five/five and a half hours.

Levi: How often?

Rob: Three days a week. I was going every Tuesday, Thursday, and Saturday. Now, when I was working before I got on disability, I was going to work from 3:30 in the morning till 11:30 in the morning. Then, at noon I was gone on dialysis until about 4:30 and then a lot of times I went to school (not during baseball season, but like in football, soccer, and basketball season) around the clock. So I’d go there for, you know, three or four hours; so it was pretty rough. It didn't really wear me down, as far as the dialysis, you just didn't have the energy you did. Now, I know some people, when they do dialysis, a lot of friends - I have a lot of friends still - when they do it, I mean, it really bangs ‘em up, man. When they get done, there's not a lot they can do - go home, take a nap, you know, a lot of times, when I was working, I'd go there and as soon as they’d hook me up, I'd fall asleep. Because I was tired from work and all that. Then, after I got on disability, which was around November 1, 2017 - I remember because my daughter got married at the end of October in Florida in 2017 and I had to go down there and even when I went to Florida I had to do dialysis. I was down there about three weeks, you know, for a wedding and everything in it. It was okay, but after that I started disability and I quit working because it was just too much. Then I start doing dialysis Tuesday, Thursday, and Saturday at five o'clock in the morning so I was done by ten o'clock. Gave me more time to recover and then, you know, with the stuff I do at the school.

Levi: How long were you on the transplant list?

Rob: Actually about two days.

(GroupName Laugh)

Levi: You’re the second person, the guy before you was on there for six.

Rob: Yes, two days. Officially, they had told me that there's a good chance - I came out here in April - she said there’s a good chance. I did all the tests, I kept doing everything they said and I actually got a call from Dawn, she’s like a coordinator here, and she called me on a Thursday or Friday. They had called me from Cleveland and the lady said, “you’ve been put on the list”, I believe that was on Thursday. Dawn called me on a Friday and said, “I’m not sure if you’ve heard yet, but you’ve been put on the list.” I hadn’t even gotten paperwork yet, because they usually
send you paperwork. They called me on Saturday evening and they told me, at eight o’clock
-Dawn called me and said, “You’re second in line. They’re a great possibility that you could get a
call.”

Brandon: Did that catch you off guard?

Rob: Well, yeah, because I called my dad and, you know, because it's one of them where you,
you know, I've been preparing for it, I got stuff packed, myself, but my dad had to come with me
because he was my support person. I called him at eight o’clock and I said there's a good
possibility I might get a call sometime soon. He said, “Okay, I'll pack tomorrow.”

(Group laughs)

Rob: Well, Dawn called me back at midnight, she said “They're picking you up in Mansfield.”
Mansfield is a small city, we don't have a great big airport - we don't have a big hub or anything,
only small flights - it's an air guard base there. So she said, “There will be a plane picking you up
at three o'clock in the morning in Mansfield, to pick you up.” I call my dad and he's like, “Okay, I
gotta get everything ready,” you know right? And, what happened is, my daughter in law came
and picked me up.

Levi: So you got a call at midnight?

Rob: Yes.

Levi: And you're like I gotta get on a plane at three?

Rob: Three, three AM, yeah.

Levi: Wow.

Rob: Yeah, so it ended up being about by the time the plane got there and left and everything, it
was about four AM by the time we flew out. We flew directly from Mansfield on a small medical
airplane, it was like three seats, a cot, and a pilot and, you know, it's just me, my dad, and the
pilot.

Levi: Is it a propeller plane or is it a jet?

Rob: No, it was a propeller plane.

Brandon: Oh, cool.

Rob: It was a small, small, plane. My dad was scared to death because I have a brother-in-law
who flies ultralight, so we'd ask as we got on the plane - it was the funniest thing, ya know, it
was cold in October and there's a little bit of ice and, you know, we're going great but the pilot
starts looking at the wings with a little flashlight while he’s flying and he’s looking to make sure
there's no ice.
Rob: My dad is scared to death, you know, he's flown a million times but he was kind of scared to death. Me, I had headphones on, listening to my phone, listening to music, kind of relaxing. So I told my brother about this when I got back and he said the reason they do that is because, with small planes, they don't want to use the battery. Because the battery has something to do with all the instruments and stuff, so he said, “yeah, a lot of pilots do that, they look at it that way” and it made sense once you get it. Yeah, so I was on for two days.

Levi and Brandon: Oh, wow.

Levi: So you got to Iowa, came to the VA here, and you were a match?

Rob: Well, actually, she told me I was a match, on the phone, and that's why they flew me out because I was a match.

Levi: Were you nervous?

Rob: I was a little nervous, but I was anxious. You know? I didn't come over here to the VA, they sent me directly to the University of Iowa hospital and prepped me. Which is a great thing, because what happened is, you know, the VA only fly you and your support person out, well, my step mom, what she did was - she drove out and she actually got here before I went into surgery. I didn't go into surgery until about maybe 4:30 or five o'clock in the evening. Which worked out great, because she wanted to be here and everything and she had to drive out and get stuff ready, you know?

Levi: So you got your surgery and it went well?

Rob: Yeah, it went extremely well to begin with. I had little complications, like when I first got out of ICU, I had some problems with feeling dizzy. They discharged me from the hospital in, like, four days. They told me some symptoms to watch out for, like if I was bleeding because they connect the pancreas to your intestines and stuff like that. They said if you look like you have blood when you go to the bathroom - in your stool - you should watch out for that. Well, when I went to the hotel here, I went to the hotel and, it was about the middle of the night, I said I have got some problems. So what they did is my dad and step mom brought me right to the emergency room here at the VA and they sent me back over and I had to stay in hospital for another - they had said that sometimes with it, when you have that surgery, there will be a little excess bleeding where they've connected the pancreas or the kidney and what happens is you'll bleed out. Well, what they want to make sure is, and they didn't really change anything, it will heal itself and it did. So I was over in the hospital another three or four days.

Levi: So your kidney woke up pretty quick?

Rob: Yeah, the kidney automatically and the pancreas did too. They were working great, you know, they were fantastic.
Levi: So did it feel different already?

Rob: No, because I had tubes down my throat and, I'll be honest, I wasn't in pain- well, a lot of pain - it was just kind of uncomfortable. Because I had staples down the front of me where they put it but I wouldn't say it was pain though. I had one time where they had put me on a liquid diet and I drank some, like, vegetable broth and it kind of made me sick and I was really sick of that. But other than that, the care at the University of Iowa was fantastic, surgeons were- I gotta tell you a funny story about the surgeon. When you’re in surgery you don’t know, but when I first got prepped and they took me into surgery around 4:30 or five o’clock they wheel you in and they put you on the operating table and they’re prepping you with all the stuff and hooking me up and the surgeon, the guy who’s doing the surgery, he's standing over here and he looks over at me and goes, “This is your kidney and your pancreas” and he was doing like this and he was playing with it because they do something with it with some fluids and stuff. I just went, “I didn't really want to see that” and I looked at the nurse that was standing there and they were hooking up all the stuff and I went, “Go ahead and knock me out.”

(Group Laughs)

Rob: Like I said, I wasn't nervous, I was more anxious to get it done. I've lived my life as a diabetic for thirty years, I've taken four shots of insulin for thirty years now and they have told me it's going to be life changing - if everything works out it's gonna be life changing.

Levi: How long after the surgery did you really start to feel better?

Brandon: How well did the new pancreas work for you?

Rob: Oh, fantastic! I've honestly - they told me last time I was here for the three month checkup, that you only need to check your blood sugar every couple days - I still check it every morning when I get up and the highest it's been ever since I had surgery was 120 - which is still good but, in the last month, the highest it's been was 102, it's fantastic with that. And don't get me wrong, I don't go out and eat donuts and, you know, I'm not - because thirty years of eating, it was a different diet from having dialysis because there’s a lot of stuff you can’t eat doing dialysis that you can regularly eat. I was a big salad eater before I started dialysis - you can’t eat that because all the vegetables retain water and it makes your body retain water and when you retain water when you do dialysis the more you put on the worse it is taking it off. You cramp a lot. I would say feeling like, “better-better”, it took about three weeks- three and a half weeks. When I went home - I was here about almost four weeks before I left and what happened was my dad and step mom drove home and I flew home and the guy I coach baseball (with our head coach), he picked me up at the airport. When I got back that night, my parents weren’t back yet, I started to feel terrible. Started getting a little diarrhea, started throwing up, just, you know, I was trying to drink water and do something. What they told me, when I and what I did was, I called my son (my son is twenty six) and I called him and I said, “you got to take me to the hospital, to the VA hospital, it's about an hour away” and he said, “no problem.” You know, he knew I just came home. I went up there and they said some of the medicines it takes a long time with the anti
rejection medicines given and I was kind of having a reaction to it. So I was having diarrhea, I was throwing up, but I stayed in the hospital - this was over Thanksgiving.

Levi: Last year?

Rob: 2018 after I had the surgery on the twenty-first, I went in the hospital like the seventeenth of November and I left the twenty-sixth. I was there during Thanksgiving which was the greatest thing. They got the medicines straightened out, so everything was back to normal and I felt great and, knock on wood, I haven’t had any trouble.

Levi: Cool.

Rob: None. I've got a granddaughter who’s two years old and I watch her, a couple times a week - sometimes once a week, sometimes twice - but if she's sick my daughter-in-law and my son know that I can't babysit. I can't get sick. So they know if something's wrong with her, I can't come over. So I've done a good job of that you know, I haven't - knock on wood - I haven't gotten sick yet. I'm around a lot of kids at baseball and when I'm at basketball, I just try to be careful.

Levi: Wash your hands a lot and everything,

Rob: Yeah! Yeah, so the care here was fantastic. When I was here in the hotel, I had to come every other day to give blood - same now, I still get a lot of blood work - I was doing twice a week when I first had my surgery, after three months I went once a week, now I'm gonna start twice every two weeks. They'll raise something like a medicine - one of my anti-rejection medicines - they'll raise it up a little bit or they’ll lower it but other than that most everything has been spot-on.

Levi: Life changing?

Rob: It’s been a life changer for me.

Levi: So can I ask you a question I haven’t asked the other patients yet - what does it feel like to get another person’s organs inside of you?

Rob: You're happy for yourself, but you gotta remember - like with the kidney-pancreas - somebody has passed away. It's really tough. They give you a packet here, to write a card, and say what you want, you know, if the family can contact you. Which I did, I wanted to, I wrote that letter and I actually cried. I'm not one to cry a lot. I wrote that before I left to go home from here - to go back to Ohio. They give you a card to write on and they give you some ideas of what to say - you don't say a lot about your last name and stuff like that - you just kind of...I just, you know, I'm very thankful that people out there because when I was a kid, when I first got my driver's license, I was an organ donor. I tell a lot of people now, if you're healthy, you should be an organ donor....Then you gotta think, somebody passed away. They tell you who it is - not the name- like mine, the young man because, he was young compared to me, I'll be off fifty this year
and he was twenty five years old. He died, they didn't tell me how he died but he died in Colorado.

Levi: Do you ever get the chance to meet the family?

Rob: Well, you can, if they want to meet you first. I sent the information to the-

Levi: Is that something you'd be interested in doing?

Rob: Oh yes, very definitely. I am so thankful, you guys just don't know how life changing it is.

Levi: No, no I can't-

Rob: People don't know and, like I said, I’ve known a lot of people - people close to me that have had transplants - and, you know, the one girl, my friend’s fiance, she got it from her brother. She got her kidney from her brother. And actually my sister, when I first got diagnosed with the kidney problems, my sister wanted to get tested and she got tested but she wasn’t a match so I've got another sister but she's not in the greatest health so I didn't even say anything, personally and I haven't seen her - I don't see her very often. So I understand how that is and if they ever want to meet me, I would go with them in a minute. I would really want to thank them, because, first of all, their son was an organ donor because they have actually taught him well. Not just because I’m a Veteran, I see this everywhere, you know, I'll be honest, I go to breakfast every morning about the same time every morning and I sit with a lot of guys at the restaurant. I go to the same restaurant and I sit with a lot of older guys that are Veterans from, you know, whether it be Vietnam, you know, some are Korean war, and I sit and talk to them - it is the most fantastic thing in the world. That’s just how it is. Not just because they’re Veterans, they are great to talk to, they enjoy talking about their service and I really like. Something like this, you now, I would love to do it. I would be the first to say, “yeah, i would jump on a plane right now and go out to meet and just to thank them, personally.” People don’t know if you’ve never had to go through it, but it’s tough, you know?

Levi: Well, Rob, thank you so much for talking to us today, man; it's really great to hear your story and thank you!

Rob: I appreciate you guys and, like I said, I appreciate everything that the VA does for me, personally, and for everybody. Like I said, I've seen horror stories that people say and I'm like, “That's never happened to me.” They've been-

Brandon: Nothing's ever perfect but it’s good to hear the good things.

Rob: And people should hear that because it is...you know, they did serve our country and they have you know most...

Levi: We have a moral obligation.
Rob: It is and, like I said, even from day one, they've been fantastic to me. I've never had a problem...it's been so great.

Levi: Cool that's good to hear - thank you for listening everyone!

Announcer: This concludes today's Vets First Podcast. For questions or comments relating to the program, please direct email correspondence to vetsfirstpodcast@gmail.com. Thanks for listening!