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SLOWLY AND EXPENSIVELY ...

DIABETES CAN KILL YOU

THIS IS HOW BAD IT CAN GET ...



KATE LONG | Sunday Gazette-Mail

Bill Hall, 64, of Barbour County, had a port in his arm so a kidney dialysis machine could clean his blood three times a week. Diabetes took his leg and kidneys. In January, he died of heart failure brought on by diabetes. "He was a wonderful man," said nurse Barbara Weaner.

'Diabetes is not for sissies'

By Kate Long Staff writer

LKINS — For four hours, Bill Hall used to lie on a padded vinyl recliner, one arm stretched out, two thick needles sticking out of it. One needle drained the blood from his body. The other put it back.

His blood ran through a humming kidney dialysis machine. The machine cleaned it of toxins. His kidney used to do that before it quit working.

Hall, 65, fought in Vietnam. One of his legs was amputated at the knee. He didn't lose it to the war. He lost it to diabetes, which cut off the circulation to his foot. His leg had to be amputated so gangrene wouldn't infect his whole body.

"Diabetes is not for sissies," he half-joked in December.

Some days, he showed up at the Elkins kidney dialysis clinic in the dark, at 5 a.m. Three days a week, so do about a dozen others. Before the sun came up, they all lay on the vinyl recliners, each doing the same thing.

Lona Kittle, who used to run a diner in Belington, can't see out of one eye. Diabetes blinded it. She hopes to save the other. She likes the recliner in the corner.

Linton Wright, a retired Forest Service soil scientist, used to maintain an active schedule as a Jehovah's Witness minister. He can't do that anymore. He doesn't have any energy after running his blood through the machine.

Three days a week, patients come to the clinic and attach themselves to a machine for four hours. "After you're finished, you go back home and recover," Wright said. "The day is shot."

They're all in Stage 4 kidney failure. Usually, it could have been prevented, says nurse practitioner Barbara Weaner.

"We have people in their 20s coming to this clinic," Weaner said. "It's happening earlier and earlier. People don't understand until it's too late that they can prevent it. It's sad."

Hall lost his job after his kidneys shut down, because he had to be on dialysis three days a week. He used to travel a lot for his job. "I loved to go places," he said in November. But he couldn't skip treatments.

He went on disability. "I didn't have much choice," he said. The toxins kill a person if they stay in the blood.

"They've got mobile units you can take home, but people get infections from that," he said. He lived on an isolated Barbour County farm, "so far out, I don't want to risk it."

In December, he was hoping for a kidney transplant. "As long as he stays on dialysis, he probably won't die of kidney failure," Weaner said then. "Ninety percent of people on dialy-

No symptoms until it's too late

- Type 2 diabetes takes six to 10 years to develop. During this "prediabetes" time, it can be prevented with exercise and diet. Full-blown diabetes can be controlled and slowed through exercise, diet, and medication, as needed.
- Uncontrolled diabetes can lead to blindness, neurological damage, leg or arm amputation and chronic kidney disease.
- A person can lose 80 to 90 percent of kidney function and not have symptoms. It doesn't hurt. The amount, look and smell of urine does not change.
- Diabetics are advised to get a microalbimun urine test every year. If kidney disease is caught early, it can be reversed, and dialysis can be avoided.
- Symptoms of advanced kidney disease include swollen ankles, feet and hands; shortness of breath; high blood pressure; confusion; poor appetite; nausea and vomiting; dry, itchy skin; and fatigue.
- At particular risk are diabetics, people with hypertension and/or heart disease and obese people.
- For more information, visit the National Kidney Foundation website at http://kidney.org

Source: National Kidney Foundation

sis die of heart attack or stroke."

In early January, at age 64, Bill Hall died of heart failure. "It was heartbreaking," Weaner said.

Dialysis in W.Va. costs

\$147 million a year and counting

In 2009, 1,897 West Virginians were on dialysis, according to the National Renal Data System. Their dialysis treatment cost more than \$147 million. Taxpayers pay much of that.

Hundreds more West Virginians go on dialysis every year. The number has doubled since 1993, when there were 929. "Dialysis clinics are popping up everywhere in West Virginia," said Gina Wood, director of the West Virginia Diabetes Prevention and Control Program.

Nobody knows exactly how many clinics there are, since existing health-care facilities don't have to get a certificate of need from the state Health Care Authority if they open one. But as of this spring, 35 clinics have certificates

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... BUT IT DOESN'T HAVE TO BE THAT WAY



KATE LONG | Sunday Gazette-Mail

During the winter of 2010-11, Everette Ray Roberts, of Mingo County, was constantly thirsty. He had dizzy spells. He'd wake up sweating. A doctor referred him to diabetes counselor Vicky Lynn Hatfield. "I lucked out," Roberts said. "If it hadn't been for Vicki, I'd probably be in kidney failure now."

'It's up to you whether you do or you don't'

By Kate LongStaff writer

ILLIAMSON — The winter of 2010-11, it snowed a lot in Mingo County. Fifty-four-year-old Everette Ray Roberts was shut in for days, "me and my dog," in a small trailer perched on a steep hillside near Matewan.

"I was constantly dizzy and thirsty," he remembers. "With all the snow, I wasn't getting out and walking around, doing stuff. I'd gained a lot of weight. My eyes got blurry.

A rugged bachelor, Roberts has three ruptured discs in his back "from heavy lifting," he said. "Every job I've ever worked was brute labor, steel mills, basic labor. That takes its toll on a person's body."

"I wondered if I was going nuts from being shut in. I'd get so shaky, shaky, sitting on the couch watching TV, and I was pouring down the 24-ounce bottles of pop, five or six of them a day. It was like adding gasoline to the fire, all that sugar, but I didn't know it.

"All I knew was, I was terrible thirsty. I kept a gallon of water sitting beside me for when I ran out of pop."

Then he started gasping for breath. "I couldn't sleep. I'd get real, real sweaty." He had to keep running to the bathroom. "I thought maybe it was high blood pressure or something."
"I didn't have a clue what was going on. I

had no idea what danger I was in."

He was one of an estimated 69,000 West Virginians who have dishered but don't know it.

ginians who have diabetes, but don't know it.

Roberts "grew up rough on a humungous farm" in Wayne County, he said, where "all us kids worked hard to make the place go, and our dad taught us to deal with problems and not complain." He toughed it out.

Living on an isolated Mingo hillside, "going to the doctor in the snow is not exactly easy, and it's expensive," he said.

When he finally did go, "the doctor said, you've got all the symptoms of diabetes. My sugar was up the high 400s. My A1C, the three-month blood sugar, was 12.5." Normal A1C is around 2. Anything above 7 is considered bad.

"The doctor said it was a good thing I didn't wait any longer to come in."

His doctor referred him to diabetes educator and nurse practitioner Vicki Lynn Hatfield in Williamson. Hatfield and her partner help about 500 of Mingo's estimated 3,500 diabetics figure out how to control it from day to day, despite sometimes-harsh realities of life: shortage of

cash, two jobs, kids, and so on.
"I lucked out," Roberts said. "If it hadn't

Want to prevent or control diabetes?

Advice from Vicki Lynn Hatfield, diabetes educator

- 1. If you are overweight, reduce your body weight by 5 to 7 percent (usually between 10 and 20 pounds). Once you get there, set the next 5 to 7 percent goal.
- **2.** Increase physical activity to 150 minutes per week. By reducing weight and increasing exercise, you can reduce your risk of diabetes by 58 percent, according to Diabetes Prevention Program research.
- **3.** Wear a pedometer and try to log 10,000 steps a day.
- **4.** Cut sugary drinks such as soda and fruit-juice mixes from your diet. Drink more water.
- **5.** Strive to eat five servings of fruits and vegetables daily. An apple is a serving, as is a cup of most vegetables. The vitamins, mineral and fiber in these foods help you feel full longer, decreasing cravings.
- **6.** Watch portion sizes. Measure foods like cereals, chips or snacks to make sure you are not consuming extra servings.
- **7.** No one should eat more than two fast-food meals per week. When you do eat fast food, pick healthier selections (a good resource is CalorieKing.com).
- **8.** Fill your pantry and fridge with healthy food choices. Eliminate junk foods in your home, particularly those that you have trouble resisting.
- **9.** Find a walking/exercise partner. You will be more motivated if you have someone to help you stay accountable.
- **10.** Find ways to gradually spread healthier food choices and exercise habits to your entire family.

been for Vicki, I'd probably be in kidney failure now," he said.

He and Hatfield went over what he ate, how often he ate, his schedule, his physical activity. She had him keep a list. To get rid of his dizziness, shakiness and blurry vision, they planned specific ways he could change what he ate or when he ate and increase physical activity every day, They got his medicine adjusted.

Roberts went to Hatfield's group diabetes selfmanagement classes at Williamson Memorial

SEE **EVERETTE, 5C**

EVERETTE

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rial Hospital. He learned how to shop for food that wouldn't set off his blood sugar, how to read his own blood sugar levels, tricks of coping with depression.

"Everette is somebody who, once he found out how to control his diabetes, he took the reins," Hatfield said. A year later, his blood sugar was in normal range. He requires less medicine to keep it there.

"He doesn't have a lot of money and he doesn't have a lot of education, but he learned very quickly how to do it. And, just as important, he did it," Hatfield said.

"We've got plenty of patients who don't have a lot of education and income, but that doesn't have to stop them," she said. "Appalachian people in general are very capable. I have found that if I can get people the information, most will apply it, with whatever means they have."

"I recently saw a woman who was paying a neighbor \$100 to drive her to Huntington to see a specialist who'd check her blood sugar, see her five minutes, maybe adjust her prescription, then tell her when to come back. She had had diabetes for 20 years, and in all that time, nobody'd ever talked with her about what she eats or how she could help herself with physical activity."

Hatfield taught her how to check her own blood sugar and manage her diet and increase her exercise. "Her blood sugar levels dropped enormously," Hatfield said. "She's so proud of herself. She had no idea she could do that."

"People are not born knowing the symptoms of diabetes, and they aren't born knowing how to control it," she said, "and it takes more than a 15-minute doctor visit to help

EVERETTE IN OCT. 2011



EVERETTE IN APRIL 2012



pop, eating right and staying active has made a world of difference." **Everette** Robertson said in April. "I don't aet sweats and blurry vision anv more, I've got a lot more energy, and my outlook is better."

"Quitting soda

KATE LONG Gazette-Mail photos

them get a handle on all they need to know."

"There's a whole lot more to it than what I thought there'd be," Robertson said. Hatfield dished it out to him in small steps, he said. He learned what foods would keep him stable and how to lower his blood sugar by taking a walk, how to buy healthy foods on a budget.

"I stay on the move now, 24/7," he said. He eats better food and less food, he says. "I cook for myself. I take the skin off my chicken, and bake it instead of fry it. I make myself a lot of salads. I like salad and I put all kinds of stuff in them, vegetables, meat."

He lost more than 30 pounds, dropped from 271 to 240. By last fall, he had cut his A1C level down to 7. He quit drinking pop. He does yard work for others. "It's a lot of extra exercise," he said.

This month, his A1C is down to 5.1. He sees clearly. He is still losing pounds. "It's still a battle,"

he said in April, "but nothing like it was.

"I would tell anybody, the bottom line of it is: If you don't set it in your mind that you're going to get it under control, then it's not going to get better," he said. "It's up to you whether you do or you don't."

"I used to call Vicki every week, on Thursday," he said. "It really helped to have somebody to report in to," he said. "When I got discouraged, she kept me going." Now he checks in once a month.

"I wish I could have gotten to him earlier," Hatfield said. "And lots more like him."

A Matewan native, she keeps trying new ways to stamp out diabetes in her home county. Two years ago, she helped start a Mingo County diabetes coalition. Now they have a five-year grant for \$50,000 a year through Marshall University to spread diabetes awareness and prevention through the county.



Is there a warning sign on the back of your neck?

- Acanthosis nigricans (AN) often looks like a dirty neck. It can also be velvety, darker skin in other creases, such as under the arm or at the elbow crook.
- It means the person's body is not processing insulin normally. That makes it a possible warning sign of diabetes.
- About three out of 10 diabetics develop an AN marker. Not all diabetics have it.
- Five percent of West Virginia children have AN markers, more than twice the national average, according to West Virginia University's CARDIAC program.
- Doctors recommend that people of any age with an AN marker be regularly screened for diabetes.

Hatfield now offers diabetes prevention classes. "People tell their neighbors what they learned. So it's spreading," she

The coalition plans to post symptoms of diabetes in store windows and on telephone poles all over the county. "We want people to know they can catch it early. If we can get people to go after it like Everette has, our diabetes rate should drop."

Reach Kate Long at katelong@wvgazette.com or 304-348-1798.



"We've got plenty of patients who don't have a lot of education and income, but that doesn't have to stop them. Appalachian people in general are very capable. I have found that if I can get people the information, most will apply it, with whatever means they have."

VICKI LYNN HATFIELD

Diabetes educator, Mingo County