

Frontiers in Palliative Medicine

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Complex Cases of Liver and Kidney Disease

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Learning Objectives

- **Contrast the experience of advanced kidney and liver disease with that of advanced cancer**
- **Apply the phrase “Hope for the Best, Plan for the Worst” to manage patients and families with liver and kidney disease**
- **Identify a strategy for managing common coping styles that impede timely care planning**

Case 1...

- 88 yo F with End Stage CHF
Pulmonary HTN
Chronic Kidney Disease baseline Cr 2
H/O Renal Mass
- Meds
 - Furosemide 60mg IV 3 times per week +
Torsemide 20 mg PO daily
 - If weight gain, ↑ Torsemide to 40mg

...Case 1...

- **Unable to tolerate dobutamine**
- **Does not want to return to the hospital**
- **Other symptom issues**

Nausea

Dyspnea

Neuropathic pain secondary to Diabetes

Chronic recurrent UTI

...Case 1

- **Cr increased to 2.2**
- **Miserable and fluid overloaded**
Furosemide 100mg IV qd and
Zaroxolyn 10mg qd
This resulted in 20lb weight loss
Cr remained 2.2

Case 2

- 76 yo M with ESRD on hemodialysis
Diabetes
Gastroparesis causes N / V
- Hospitalized with sepsis
related to aspiration
- Ascites
- Albumin 2.4
- Protein 5.7

Case 3...

- **31 yo M w Type 1 diabetes
ESRD on hemodialysis**
- **Parents died when he was young,
raised by his grandparents**
- **His grandmother recently died
He does not “ get along with his
grandfather ”**

...Case 3...

- Numerous admissions for dyspnea secondary to volume overload
- Often skips dialysis sessions or cuts them short by an hour or two
- Even after full dialysis sessions, he patient is deconditioned and complains of dyspnea on exertion

...Case 3

- **Worsening baseline nausea**
- **Long history of gastroparesis**
- **Chronic back pain**
- **History of substance abuse**

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Gandhi... You need to be the change you want to see in the world...

