Mark La Rose, a kidney transplant recipient, and his son Stephen.
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**About our Cover**  Single dad Mark La Rose is full of gratitude. He’s thankful for the unwavering devotion of his 16-year-old son Stephen who cared for him when he was ill, and for the generosity of a stranger who donated her organs to save his life. After suffering from diabetes for 31 years, Mark’s kidneys began to fail and he was placed on the national waiting list for both a kidney and pancreas transplant. Since receiving his combined transplant in 2005, he and Stephen have begun pursuing their passions for photography and world travel in earnest. But besides their upcoming trip to Tokyo, the two are on a mission to spread the word about organ donation and the importance of early detection, especially for people like Mark whose diabetes put him in the high risk category for kidney disease. They are working together with the National Kidney Foundation to accomplish that goal, and have even rallied Mark’s coworkers at AIG Insurance Company to team up in support of the Kidney Walk for the last few years. **Cover photo:** Erica Berger

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**Contributors:** Christina Chekalos, Geraldine Connors, Verena Huettnereder, Patricia O’Connor, Kelly Robertson, Bryan Van Steenbergen
Dear Friends,

It became apparent in 2007 that the need for our programs and services has never been greater. We already knew that the increased incidence of diabetes and hypertension in the U.S. would impact the rates of kidney disease. What we didn’t know was how dramatically the number of Americans living with chronic kidney disease (CKD) had increased. A major study released this year estimates that the number of American adults living with CKD is 26 million—a dramatic 30 percent increase over the last decade.

One of the most disturbing aspects of these findings is the number of people—literally millions of Americans—who are completely unaware of their condition. Because kidney disease can go unnoticed for so long, patients are often facing kidney failure by the time it is discovered. Early detection—absolutely essential in treating CKD—can slow the progression of the disease.

Expanding Our Efforts

In 2007, we initiated many activities that reflected the urgency and magnitude of this discovery. We’ve stepped up our efforts to promote early detection for those at risk for kidney disease—people with diabetes, high blood pressure or a family history. Our public outreach efforts urged people to take the simple tests to determine kidney function. We worked aggressively to reach primary care physicians to ensure that blood and urine tests to check the kidneys are part of regular medical checkups.

Most significantly, we continued to expand our Kidney Early Evaluation Program (KEEP™), which, in its 10th year, achieved a major milestone by screening the 100,000th participant. As KEEP grows, it also continues to evolve with new components and scientific elements that allow us to learn more about valuable patient outcomes over time.

In the area of kidney disease research, where we already spend $3 million annually, the Board of Directors voted to double the research budget over the next five years. This is the 40th year of our esteemed research program, and over the decades we have provided more than $73 million in grants to nephrologists, kidney researchers and scientists.

An increase in the number of patients also calls for appropriate advocacy efforts. We continued to vigorously defend kidney and dialysis patients and transplant recipients in Washington, D.C., through a number of channels. Perhaps most visibly this year, we established the NKF Take Action Network, an eadvocacy system that allows people to immediately e-mail their representatives in Congress when urgent legislative and policy issues arise. Over 7,600 messages urging action were directly delivered to Congress through the network in 2007.

Staying a Step Ahead

Finally, in order to more effectively serve all of our constituents, we are undergoing a major reorganization. In 2007, we began the transition from an affiliate-based structure to a division-based, centralized organization. This paradigm shift enables the local offices to focus more on critical activities like delivering programs and fund raising, while the National Headquarters assumes most administrative responsibilities, including finance, information technology and human resources. So far, the transition is progressing smoothly and we will continue to move the process forward over the next few years.

This annual report showcases the skills, talents and passion of the health care professionals, volunteers and advocates who helped us serve the needs of kidney patients and their families in 2007. We urge you to read on to see how we are preparing to meet the needs of the increased number of people facing kidney disease while working to accomplish our mission: preventing kidney and urinary tract diseases, improving the health and well-being of individuals and families affected by these diseases and increasing the availability of all organs for transplantation.

We are proud of the National Kidney Foundation, which is making important strides and progress towards preventing kidney disease and its consequences. Keep reading to learn more about these efforts, the people who benefit from them and how you can help.

We thank you for your interest, participation and support.

Allan J. Collins, MD, President
Chuck Fruit, FACHE, Past Chairman
John Davis, CEO

Supporting our mission: We need your help today.

www.kidney.org
World Kidney Day

NKF used the fast-growing global awareness day to spread the word about early evaluation for kidney disease.

The National Kidney Foundation did more than just talk about risk factors on World Kidney Day, an international event observed in more than 40 nations worldwide. On March 8, NKF issued a call to action for all those at risk to get screened, and provided free screenings in 23 cities across the U.S. to those at risk—anyone with diabetes, high blood pressure or a family history of kidney disease. The foundation was honored to ring the NASDAQ Closing Bell on World Kidney Day. Our message, NKF logo and 30-second TV spot were given prominence on the NASDAQ screen in New York City’s Times Square throughout the day. Across the nation, dozens of communities recognized the foundation and the importance of early detection and treatment with World Kidney Day proclamations.

NKF Board Member, Jeanne Phillips, aka Dear Abby, carried a call for early evaluation in her popular column. Additional media coverage shone the spotlight on this growing national health issue, with features in major print and broadcast outlets around the country. The news reports generated 7,000 calls for information and 105,000 Web page views.

UP FRONT

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<th>2007</th>
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<th>8,000</th>
<th>10,000</th>
<th>12,800</th>
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<td>by the numbers</td>
<td></td>
<td>health care professionals benefited from NKF membership</td>
<td>golfers participated in local NKF Golf Classics</td>
<td>clinicians received CME/CE credits through NKF</td>
<td>NKF program volunteers nationwide</td>
<td>calls to NKF’s kidney information hotline</td>
<td>kidney patients, families and friends participated in 88 Kidney Walks nationwide</td>
<td>donations to NKF Kidney Cars</td>
<td>members of NKF’s “People Like Us” patient empowerment group participated in advocacy and education activities</td>
<td>people at risk for kidney disease have received free early evaluation screening from NKF</td>
<td>patients, family members and professionals benefited from the quarterly newspaper Family Focus</td>
<td>awarded from NKF and its affiliates in grants to 100+ researchers and scientists</td>
<td>in direct financial assistance to kidney patients</td>
<td>visitors to <a href="http://www.kidney.org">www.kidney.org</a></td>
<td>media impressions helped tell the NKF story</td>
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Can You Tell Me How to Get to Hope Street?
While Hollywood’s superheroes drew crowds to theaters, NKF unveiled its own original cast of cartoon characters as part of a major new educational initiative called Hope Street.

Hope Street delivers CKD education in an emotional and engaging way, using a “graphic novella,” or cartoon series format. It tells the story of a group of patients and their health care team in a dialysis unit that is similar to hundreds of centers across the country. The novella journeys through the lives of the fictional characters and spotlights key milestones along the way, including the shock of being diagnosed, role-reversals in family relationships, work-related stress and coping with underlying medical conditions. NKF also offers educational tools for professionals and patients that coincide with the themes in each issue. Hope Street motivates professionals and people on dialysis to talk about their experiences and feelings concerning dialysis. More than 25,000 copies of Hope Street, complete with posters and educational tools for both patients and their health care team, were delivered to dialysis units across the U.S. this year.

“Hope Street is terrific way to capture the attention of those who would otherwise not seek out patient information. Education always empowers and the cartoon series helps patients be self advocates in managing their own kidney disease.”
Laura Weber, Kidney Recipient
San Jose, CA

“Hope Street is eye-catching and I know patients will respond very positively to the program. The more hands-on material we have, the better it is for the patient. Our patients will definitely relate to the characters and their struggles.”
Carol Stephens, Dietitian
Ozarks Dialysis Services
Springfield, MO

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STUART BOWERS | Generosity is in His Genes
Stuart Bowers, a senior executive at the Baltimore-based investment leader Legg Mason, believes it’s no big deal that he gives an abundance of time and money to the National Kidney Foundation, and he isn’t shy about asking those around him to do the same. “Most people think it’s hard to ask for money,” says Bowers, 48. “I don’t find it difficult. Not if it benefits the NKF.”

Fund raising for the Maryland affiliate of the NKF is a Bowers’ family tradition. Stuart’s father, David, a litigation attorney, was a polycystic kidney disease patient who was on dialysis for 18 years. “He just worked court dates around dialysis,” says Stuart. Dialysis didn’t keep David from serving as local board president or from fund raising either. In 2006, the Maryland affiliate established the Bowers Family Research Award for Polycystic Kidney Disease, which offers an annual $10,000 grant for research into polycystic kidney disease. Stuart inherited the disease, along with the family commitment to the foundation. He, too, has served as board president and has been active on dozens of committees, from the Gift of Life Gala to the Golf Classic. Stuart was diagnosed at 18, but, unlike his father, he never needed to go on dialysis. In 1998, he underwent a preemptive transplant with a kidney donated by his sister, Julie. “It was the scariest day of my father’s life,” Bowers recalls. “He had a daughter donating a kidney and a son receiving one.”

Though their father died in 2000, his commitment to the NKF lives on through his children. “I can’t imagine not being involved,” says Stuart. “What can I say? It’s a family thing.”

Your Donation Dollar at Work
Your Donation Dollar is well spent with the National Kidney Foundation.
More than 81 cents of every dollar goes directly to programs and services supporting patients and their families.
Patient Services

Listening to the experts—those affected by chronic kidney disease (CKD)—helped NKF develop its patient services this year. Through a needs assessment survey, patients from around the country and their family members weighed in on issues that they confront every day, from emotional isolation to financial worries and choosing long-term care. NKF responded by offering support services, educational initiatives and materials to the more than 26 million American adults with CKD and the 341,000 on dialysis. NKF also reached out to those at risk with free screenings to promote early detection.

Patient Support and Assistance

People with CKD often feel isolated from friends, coworkers and even family members. To help minimize the loneliness, NKF presented programs that fostered communication among those who share the kidney disease experience. Summer camps for children with kidney disease, patient picnics and support groups were organized all over the U.S.

NKF affiliates and divisions also helped alleviate the financial burdens CKD imposes on families by providing nearly $4 million in direct patient assistance. When paying the rent, getting a ride to dialysis or buying essential nutritional supplements was simply impossible, NKF stepped in with much-needed financial assistance.

Helping Families Choose Long-Term Care

Finding a long-term care residence for a loved one can be a daunting task, especially for those whose family members are on dialysis. To help families select the choice that is right for them, NKF developed the “People Like Us” Long-Term Care Residence Chronic Kidney Disease Checklist. The checklist guides families by identifying important issues when looking for a residence, including specialized staff training, proximity to treatment and dialysis-friendly diet.

Free Screenings for Those At Risk

The foundation’s Kidney Early Evaluation Program (KEEP™) offers free screening for those at risk—anyone with high blood pressure, diabetes or a family history of kidney disease. The program, which screened its 100,000th participant in 2007, is finding kidney disease at the earliest stage when prevention of kidney failure is still possible. This year, KEEP provided three simple tests that determine kidney function to tens of thousands across the U.S.

Insights on Dialysis

Written by Patients Themselves

A two-part NKF book series on dialysis, made its debut this year. Getting Ready for a New Normal and A New Normal: Life on Dialysis—The First 90 Days broke new ground by exploring the emotional and physical adjustment to dialysis. Written by people who have experienced the treatment themselves, the series provides a unique, firsthand look at the myriad of concerns facing people who are new to dialysis.

Above: Kidney patients enjoy a boat ride at Kidney Camp, run by NKF of North Carolina.

www.kidney.org
“Pure and simple, KEEP saved my life and I tell everybody about it.” —Rosalie Swick, Findlay, OH

Most Americans know that monitoring cholesterol is critical to their well-being. Too few realize, however, that measuring their level of kidney function can also provide an important barometer of overall health. As a result, chronic kidney disease (CKD) often goes undetected. A major study published this year indicated that the prevalence of CKD has risen by 30 percent, increasing the number of those living with CKD from 20 to 26 million. NKF rose to this challenge by accelerating its public education efforts about risk factors for kidney disease and the lifesaving benefits of early detection. Through free nationwide screenings, high profile public service campaigns and community outreach, our message reached millions.

Rosalie Swick (above, left) thought her heart would break when she had to give up riding her motorcycle after an accident left her with a back injury a few years ago. “I felt such freedom on my motorcycle,” the 66-year-old retiree says wistfully of traveling in and around her hometown hamlet of Findlay, Ohio. “But that was nothing next to what happened to me this year when I was feeling so weak I could barely walk.”

Doctors at the local hospital told Swick there was “absolutely nothing wrong,” despite three EKGs and her reports of frightening fatigue and unusual lower back pain. That’s when her dear friend Marcia Nye (above, right) read in the local newspaper about NKF’s free health screening being done in Columbus through the Kidney Early Evaluation Program (KEEP)™. She took Swick on a 100-mile trip that saved her life. When Swick saw the line of people waiting for the free examination, she wanted to turn around and go home. “I thought it would take forever, but the KEEP people were organized and handled us all,” Swick says. “I’m not easily impressed, but the KEEP people were fantastic, and smart too.”

Swick is also grateful to her physician, Dr. John Biery, who sent her right to a cardiologist when he received the KEEP test results that showed high blood pressure, among other ailments. The KEEP screening also found that Swick had protein in her urine, an early marker of kidney disease. The cardiologist told Swick she needed immediate heart surgery or she would die. The kidney disease she never noticed had been silently contributing to her heart disease.

Unlike so many others who discover that they have the disease only when their kidney function has deteriorated so badly that the only recourse is dialysis, Swick got the information early enough to manage her kidney disease and also underwent a successful triple bypass surgery. She has resumed going to church and doing all the other activities big and small that give her pleasure. “I don’t shuffle anymore,” she reports, “I stride!”
Every basketball fan knows that on the court Alonzo Mourning, the all-star center with the commanding presence, is a consummate team player. But that’s a mere pickup game next to the off-court teamwork between Alonzo and his beloved wife, Tracy, when it comes to winning the fight against kidney disease.

Beyond time, talent and money, the Mournings present a healthy and hopeful public portrait of kidney disease. Alonzo was just 33 in 2000 when he was diagnosed with focal glomerulosclerosis, which was causing his kidneys to deteriorate quickly and without symptoms. For three years, with careful monitoring and proper diet and medication, Alonzo managed his disease without having to go on dialysis. Then, when his kidneys failed completely, a cousin gamely offered an assist in the form of a donated kidney.

The Mournings’ gratitude is twofold, as are their twin passions on behalf of the National Kidney Foundation: early detection and organ donation. Alonzo and Tracy stress early detection by going for regular check-ups. Tracy even made a public service announcement for the NKF about the importance of getting loved ones, particularly husbands, to see a doctor regularly. “It’s hard to get family members to visit the doctor when they are feeling healthy and active; however, if people wait until they feel that something is wrong it might be too late!”

Alonzo and Tracy urge everyone to sign a donor card, and if they can find it in their hearts like his cousin Jason did, donate an organ to a family member, friend or stranger. “Everyone in need of a transplant is somebody’s father, mother, son, daughter or friend, and that is more important than the game that I play,” says Alonzo. “I only wish that all of the individuals who came forward for me would come forward with the same selfless act of kindness for others who are in desperate need of a transplant!”

“Early detection allowed me to live without needing dialysis or a transplant for three years. Through this time, I was able to return to basketball and, more importantly, do the things I love with my family.”

—Alonzo Mourning, Miami, FL

The increased prevalence of chronic kidney disease (CKD) in the U.S. is attributed to a rise in hypertension and diabetes. These two conditions are major risk factors for CKD, yet so many are unaware of the connection.

NKF addressed this link with its Kidney Early Evaluation Program (KEEP™) that identified and offered free screening through blood, blood pressure and urine tests to those at risk for CKD—anyone with hypertension, diabetes or a family history of kidney disease.

KEEP is designed to find kidney disease at the earliest stage when prevention of kidney failure is still possible. Tens of thousands in communities across the U.S. took the opportunity to benefit from early detection by participating in KEEP, bringing the total number of Americans screened since the inception of KEEP a decade ago to 100,000.

News reports based on KEEP data published in NKF’s official journal, American Journal of Kidney Diseases, informed the public about the impact of uncontrolled high blood pressure on the progression of kidney disease and identified minority groups that need to be most vigilant.
Defining Best Practices

NKF’s Kidney Disease Outcomes Quality Initiative (KDOQI®) continued to improve kidney care through the development of cutting edge practice guidelines. This year, the KDOQI anemia work group was reconvened to review new evidence about anemia management in patients with chronic kidney disease (CKD). Their recommendations that hemoglobin levels be in the range of 11–12 grams per deciliter were published and are being adopted by nephrologists around the U.S.

In response to the spiraling epidemic of diabetes—the number one cause of kidney failure—KDoQI also released the first comprehensive Guidelines on Diabetes and CKD. These guidelines emphasize the prevention of progressive disease through the regular screening and aggressive management of kidney complications in diabetic patients, and they will undoubtedly improve the health of the estimated 10 million Americans with diabetic kidney disease. The Guidelines on Diabetes and CKD were presented to an audience of nearly 3,000 kidney specialists and allied health professionals at the NKF’s premier medical conference—the 2007 Spring Clinical Meetings.

The Kidney-Heart-Diabetes Connection

The connection between kidney disease, diabetes and heart disease was also the focus of NKF’s Kidney Learning System (KLS™) initiatives this year. In addition to creating and distributing a collection of 13 professional education and patient teaching tools based on the KDOQI Guidelines on Diabetes and CKD, KLS educated professionals working outside of the kidney community on the links between CKD, heart disease and diabetes.

KLS presented a number of CME activities for primary care physicians and heart specialists. “Kidney Disease and Primary Care: Screening and Early Intervention to Reduce Morbidity and Mortality” was a symposium for primary care physicians that focused on the detection and evaluation of CKD. The symposium included recent data from NKF’s Kidney Early Evaluation Program (KEEP™) that shows how screening can help delay disease progression and prolong life, most specifically in patients with diabetes, high blood pressure and cardiovascular disease. A “Grand Rounds” symposia series was offered to cardiologists, endocrinologists and primary care physicians throughout New York State, addressing the growing epidemic of diabetes as it relates to CKD. This program is serving as a model for diabetes and CKD awareness for other states as well.

The fight against kidney disease continued on the global stage through a call to action at NKF’s Annual Spring Clinical Meetings and a Cardi-Kidney-Diabetes Global Consensus Conference. At a special session held at the Clinical Meetings, experts warned of the growing problem of CKD around the world and presented steps governments should take to address this public health crisis. The Global Consensus Conference drew nephrologists, cardiologists, endocrinologists and primary care physicians who identified practical approaches to early identification and collaborative management of risk factors in CKD, cardiovascular disease and diabetes.

A patient checking blood sugar levels.

Since our patients’ needs can only be met by well-informed professionals, the NKF ensures that kidney care specialists never stop learning. By creating and offering an array of internationally recognized Continuing Medical Education (CME) opportunities, as well as clinical practice guidelines and companion learning tools, NKF is enabling kidney patients to benefit from the latest research and science.

Above: More than 3,000 health care professionals attended educational sessions at the NKF’s 2007 Spring Clinical Meetings in Orlando, FL.
"The primary care physician is the obvious first contact for patients. If the primary care doctor and the nephrologist work together, they can manage the patient’s care so much better. It’s about getting this crucial information out there. That’s what I love to do."

― Cynda Ann Johnson, MD, Roanoke, VA

Nearly 100,000 Americans are currently awaiting transplants of lifesaving organs. Every single hour, five new names are added to the organ transplant waiting list, and every day 17 people die while waiting. Through awareness campaigns, education and support, the NKF is working to change those numbers.

Above: Kim Burdakin (far right) looks on as her mom hugs Gene Toth, the father of Kim’s liver donor, 17-year old Steven Toth who died in a tragic accident. Burdakin and her mom met the Toths for the first time at the NKF U.S. Transplant Games.
Donor Awareness Campaigns

The organ and tissue donor message was broadcast through NKF’s Donate Life Month Campaign in April and the Holiday Gift of Life initiative at year-end. Both promotions pointed out the impact of the number 97,000—the number of Americans on the waiting list for lifesaving organs. The holiday campaign urged consumers to take a break from typical gift-giving with a new tradition that wouldn’t break the bank—signing up for organ donation. “Share your spare” was encouraged as the true spirit of personalized, holiday giving that doesn’t cost a cent. Working with print and TV media outlets, the foundation put the spotlight on those who actually gave the gift of life. NKF reminded Americans that one such gift could ultimately fulfill many wish lists, since one organ and tissue donor has the potential to save more than 50 lives.

Improving Transplant Care

Research has shown that those who receive transplants without ever going on dialysis are more likely to keep the transplanted kidney for a longer period of time and to avoid going on dialysis. A comprehensive survey of those most closely involved in the kidney transplant process, NKF identified barriers to early comprehensive survey of those most closely involved in the process, NKF identified barriers to early transplantation for those with chronic kidney disease. Through a consensus conference with top leaders in the field and a comprehensive survey of those most closely involved in the kidney transplant process, NKF identified barriers to early transplantation and has begun putting plans in place to address this issue.

Lack of adequate financial resources, not enough education and difficulty finding living donors were cited as key roadblocks. NKF is working to remove these barriers through patient empowerment, education, advocacy and action on the legislative front.

Support for Transplant Recipients

Sharing ideas and experiences with those who are in the same situation is invaluable when coping with any health issue, and NKF’s Coffee House Conferences™ program offered transplant recipients a venue for this support. Hundreds participated in group-style sessions around the country where they addressed hot topics such as coping with depression, reducing the risk of cancer post-transplant and learning how to advocate for one’s own health care.

Living Donor Web Site

Most people who are considering becoming living donors turn to the Internet first when seeking information about the issue. NKF’s efforts to educate potential living donors were recognized in a 2007 report in Kidney International. The foundation’s Web site, www.livingdonors.org, was ranked #1 in terms of coverage, accuracy and quality. The report identified this site as being both the most comprehensive and most visited living kidney donation site on the Web.

Support for Transplant Recipients

For Those Who Give and Grieve

Two valuable NKF publications are For Those Who Give and Grieve, which offers help and hope to donor families, and Transplant Chronicles, an online source for information and support for transplant recipients.

ROSE D’ACQUisto | Tireless Donor Advocate

Rose D’Acquisto suffered a loss so sudden, so painful and so permanent that she believed she could not bear it. A writer, Rose was 34 and wildly in love with Tony, her artist husband, when on Sept. 23, 1996, an undiagnosed brain tumor hemorrhaged and plunged him into an irreversible coma. He was just 35. “Then, I met an angel in the form of Tony’s intensive care nurse,” Rose says. “She asked if he wanted to be an organ and tissue donor.” From the depths of her grief,Rose knew immediately what her gentle husband would have wanted.

“I’m not going to pretend it wasn’t an excruciatingly painful decision,” recalls Rose. “We were Romeo and Juliet—if Tony died, I was supposed to have died too. The donation allowed me to walk out of that hospital holding onto a little piece of something that in time opened up and has become more than I ever could have imagined.” That something was hope, which Rose has been passing on to others in a myriad of ways ever since. Among her volunteer efforts, Rose is on NKF’s National Donor Family Council (NDFC) Executive Committee, helping to shape public policy and improve the care of and support for donor families. And despite working full-time, Rose is the editor of NKF’s For Those Who Give and Grieve, a quarterly newsletter of profiles, poems and other writings for donor families. She also shares her own story, promoting donation as the greatest gift of love.

“There’s nothing I wouldn’t do for the NKF,” she says. “They understand that the stories of kidney patients, transplant recipients and donor families are all linked together.” Rose has managed to go on, marrying a fellow writer. “When Tony died, my heart died with him,” she says matter-of-factly. “But when I met my husband Paul, I grew a second heart.” Sometimes Paul worries that her involvement with the NKF forces her to relive the trauma of Tony’s death, but she says it’s exactly the opposite.

“When I hear someone else’s story, I’m amazed at their strength. . . . donor families are the kind of people you can only hope to know because they’re so magnanimously generous.”

“Donor families are the kind of people you can only hope to know because they’re so magnanimously generous.”

—Rose D’Acquisto

St. Paul, Minnesota

For more information on helping loved ones to give the gift of life, visit www.kidney.org/donate.
Cardiovascular Disease

Patients receiving dialysis treatment for kidney failure have a much higher rate of cardiovascular disease (CVD) than non-dialysis patients, and an increased variability of their blood pressure. Steven M. Brunelli, MD, an NKF Research Fellow at the University of Pennsylvania School of Medicine, is measuring blood pressure variability in hemodialysis patients and assessing whether this is associated with increased rates of CVD. His results may lead to new treatments for high blood pressure to reduce CVD in hemodialysis patients.

Inflammation and Kidney Disease

NKF Research Fellow Christopher Ryan Keller, MD, of the University of California, San Francisco, is studying the relationship between markers of inflammation in the body and declines in kidney function, as measured by a new marker called cystatin C. His findings could confirm the importance of detecting and treating inflammation in early kidney disease.

Diabetes and Kidney Disease

Diabetes is the leading cause of CKD in the U.S., accounting for about half of the new cases of kidney failure each year. Currently, there is no way to predict which diabetic patients will respond to treatments aimed at slowing the progression of CKD. Uzma Mehdi, MD, an NKF Research Fellow at the University of Texas Southwestern Medical Center in Dallas, is working on “biomarkers” that will help predict who will respond to these interventions, thereby improving the safety and effectiveness of treatment.

Hemodialysis Access

Hemodialysis is the most common type of treatment used to replace kidney function. In hemodialysis, a dialysis machine and special filter called an artificial kidney, or dialyzer, are used to clean the blood. In order to receive hemodialysis treatment, patients must have an access, or entrance, to their bloodstream. Arteriovenous fistulas (AVFs), or entrance through the veins, are the preferred type of access because of lower rates of infections. However, only a third of U.S. dialysis patients have a functioning AVF, as many AVFs fail to mature enough to support the hemodialysis blood circuit. Tal Kopel, MD, an NKF Research Fellow at Boston University School of Medicine, is currently evaluating blood vessel function before fistula creation and measuring fistula blood flow after surgery. Dr. Kopel hopes to elucidate the mechanisms underlying fistula maturation failure.

In addition, she hopes to determine whether fistula maturation failure can be identified much earlier. The ultimate goal is to increase the number of hemodialysis patients with functioning AVFs and improve the health of these patients.
For complex diseases such as kidney disease, finding ways to help patients take control of their own care can be quite challenging. If we can help patients not just simply stay alive, but enjoy a good quality of life, well, that’s extremely rewarding.”

– Kerri Cavanaugh, MD
Nashville, TN

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Empowering patients to speak up when it comes to their own health care and ensuring that their voices are heard in the halls of the U.S. Congress is the focus of NKF’s advocacy initiatives. This year, policymakers paid attention to kidney disease and organ donation issues as a result of these activities. Throughout 2007, NKF’s “People Like Us” patient advocates gave voice to the millions of Americans living with chronic kidney disease (CKD). Patient “fly-ins” to Washington, D.C., and over 100 Congressional visits helped lawmakers hear firsthand what it means to live with CKD and how their support for specific legislation can change lives for the better.

Above, left to right: NKF President Dr. Allan Collins met with U.S. Representatives Danny Davis (D–IL) and Mark Kirk (R–IL) at the Capitol in Washington, D.C., on World Kidney Day 2007.

DR. KERRI CAVAUNAUGH | Blending Logic, Hard Science and Human Behavior

Kerri Cavanaugh loves blending the comforting logic of hard science with the glorious messiness of human behavior. Cavanaugh, 34, got hooked on the human psyche while at Dartmouth, from which she graduated cum laude with a degree in chemistry and a minor in psychology. As part of a psych class assignment, she hit the streets with a questionnaire and asked strangers about “their sun care behavior.” Sound a shade on the light side of science? To Cavanaugh, it was invaluable training and it has served her well.

Now at Vanderbilt University Medical Center, Cavanaugh is passionate about being a nephrologist. “It’s a fantastic sub-specialty,” she says. “It involves a complex disease, multiple treatments, an ever-changing field . . . it’s very exciting! And, as a nephrologist, I can establish very deep relationships with patients.” Cavanaugh recently received a National Kidney Foundation Young Investigator Award to study health literacy and numeracy. Translation: how patients’ reading and math skills help or hinder their ability to manage a complex disease. She is using the NKF grant to understand how dialysis patients control the amount of fluid they drink between dialysis sessions.

“This is very important because patients who take in too many fluids and gain too much weight have a higher risk of dying than those who control their intake of fluids,” she says. The research will tell her where the breakdowns occur. For example, do patients understand clearly how much fluid they are allowed to drink, why the limits exist and what happens if they overdo it? Solutions might include an education class geared specifically to that one crucial aspect of health management.

Cavanaugh, who also sees patients and teaches, recently gave birth to her second son. His two-year-old brother was already keeping her and her surgeon husband well-occupied. Still, she remains tireless in seeking creative and effective ways for kidney patients to take control of their care.

“If we can help patients not just simply stay alive, but enjoy a good quality of life, well, that’s extremely rewarding.”

– Kerri Cavanaugh, MD
Nashville, TN
"I’m in a really good position to communicate with all kinds of folks, from doctors and health care policy heads to aides on Capitol Hill. I feel passionate and obligated to be a voice of kidney patients who otherwise might not be heard." -Celeste Lee, Durham, NC

**Taking Legislative Action Online**

To mobilize concerned patient advocates, family members, health care professionals and other supporters, NKF launched the “People Like Us” Take Action Network, an electronic advocacy tool that educates and prompts its members to get involved in key legislative issues as the need arises.

The Take Action Network, with participants from all 50 states and 97 percent of U.S. Congressional Districts, mixes the Internet with old-fashioned pen and paper to place the kidney and organ donation communities at the doorstep of Capitol Hill.

Since the launch in April, over 7,600 letters were sent to Congress through 10 separate Take Action alerts. These communications resulted in the securing of additional co-sponsors for our key legislative priorities.

**Shaping Public Policy**

To help improve prevention and early detection, NKF requested that lawmakers expand funding for the Chronic Kidney Disease Control Program at the Centers for Disease Control and Prevention (CDC). In response, Congress provided $2 million—a 14 percent increase from last year. These additional funds will help the CDC work together with state health departments to develop community-based approaches to improving early detection, treatment and education of health professionals.

NKF worked closely with Representative Dave Camp (R-MI) and Senator Richard Durbin (D-IL) to help introduce a bill in Congress that would eliminate the time limitation of Medicare coverage for immunosuppressive drugs.

Under the current Medicare End Stage Renal Disease (ESRD) program, kidney transplant recipients who are not disabled or over 65 are only eligible for benefits for the first 36 months following their transplants. These benefits include coverage of the anti-rejection drugs they must take daily for the rest of their lives.

The foundation’s advocacy efforts for this issue included a “fly-in” of “People Like Us” advocates from North Carolina, South Carolina and Georgia who received training on how to present their issues to Members of Congress. The “People Like Us” group then used their newfound skills to visit 18 House and Senate offices. As a result of their efforts, six Representatives signed on as co-sponsors for the Medicare Immunosuppressive Bill.

**CELESTE LEE | Patient Advocacy is Her Passion**

Celeste Lee (above left with fellow dialysis patient, Tamasha Burns) became a philanthropist and health care advocate at the ripe old age of eight. She was watching Saturday morning cartoons when an ad came on about hosting a community carnival for the Muscular Dystrophy Association (MDA). “I grabbed my crayon and wrote the phone number on a box of cereal. Actually, right on Cap’n Crunch’s head!”

She proudly raised $600 for the MDA.

At 42, Lee no longer writes in crayon, but her enthusiasm and effectiveness haven’t diminished. Despite a demanding career as Chief of Staff for the President and CEO of Duke University Health System and Chancellor for Health Affairs, as well as thrice-weekly dialysis treatments, Lee is a tireless powerhouse for the NKF.

As an editorial board member of Hope Street™, the animated novella featuring characters dealing with the many ups and downs in kidney dialysis patients’ lives, Lee reached back into her childhood to help flesh out their issues. Her experience is firsthand, as Lee was just 17 when an autoimmune disease destroyed her kidneys. She was on dialysis for three years before receiving a transplant. A decade later, the organ failed and she returned to dialysis.

Lee was one of the original 100 patient advocates chosen to participate in the launch of NKF’s “People Like Us” patient empowerment initiative on Capitol Hill. Since then, she has gone to Washington, D.C., several times, seeking support for kidneyrelated legislation and encouraging policymakers to join the Congressional Kidney Caucus.

She is also an ardent believer that dialysis patients deserve consistent and quality care, and has fought for systematic training and standardized licensing of employees in such facilities. “Dialysis is lifesaving, but it’s also time consuming and tough on patients. I want every kidney patient to have the care they deserve,” says Lee, who advocated for the passage of the 2007 Kidney Care Quality and Education Act.

“I love life,” shares Lee, who whips around town in a convertible, “and what makes me feel great is helping other patients. Call it a virtual hug. Sounds corny, but it’s true.”
Kidney Walks

More than 40,000 walkers stepped out in support of the millions of Americans with cKD at 88 Kidney Walks held across the country, continuing the trend of growth for this popular and successful event. Kidney Walks were held in 16 new cities, raising awareness and more than $3.5 million for patient services and research.

NKF Golf Classic

NKF’s Golf Classic is one of the largest charity-based golf programs in the U.S. In 2007, this signature fundraising program attracted more than 10,000 golfers who hit the links at local tournaments throughout the country, raising over $4 million. The program received support from national corporate partners, including Ping, Golf Digest, Tourneau, Pebble Beach Resorts and AT&T.

Kidney Cars Program

More than 40,000 people donated their vehicles to Kidney Cars in 2007, generating nearly $12 million to support our lifesaving programs. Sixty-five percent of donations were made online, a practice that reduces costs, eliminates hassle and increases profit.

Employee Giving

As part of a corporate philanthropic partnership with CB Richard Ellis (CBRE), the leader in the commercial real estate services industry, CBRE’s 17,000 employees raised $400,000 to support the NKF. This Fortune 500 company encouraged employees to contribute financially and to become personally involved with its partner organizations. CBRE employees across the country reached into their wallets and then rolled up their sleeves to volunteer and participate in NKF local affiliate events serving families and patients with chronic kidney disease (CKD).

Healthy Kidney 10K

More than 7,000 runners hit the pavement at the third annual Healthy Kidney 10K race held in New York City’s Central Park in May. The race, which spotlighted the importance of kidney health while raising more than $280,000 for NKF, is supported by the Embassy of the United Arab Emirates in memory of Sheikh Zayed. The former UAE president benefited from American expertise and research when he received a kidney transplant in 2000.

Whether they were employees, fitness buffs, family members of kidney patients or recreational golfers, NKF’s 2007 donors experienced the lifesaving importance of the foundation’s programs in a way that was up close and personal. New alliances were forged, grassroots fundraising initiatives grew and corporate partnerships were strengthened.

Above: Congressman Charles Rangel (D-NY), (left) Chairman of the House Ways and Means Committee, and New York State Senator Marty Golden (R-C Brooklyn) lead the 2007 Kidney Walk at New York City’s South Street Seaport.

Dathan Ritzenhein, an Olympic champion, broke the Central Park 10K record and pledged his $7,500 winnings to the NKF.

Verena Huetteneder

Patient Services  |  Public Education  |  Professional Education  |  Organ and Tissue Donation  |  Research  |  Advocacy

www.kidney.org
As president of the Patina Restaurant Group and longtime CFO for Restaurant Associates, Rich Stockinger spent lots of time crisscrossing the country and making big restaurant deals. Then, seven years ago, the peripatetic businessman came to a grinding halt. Scheduled for knee surgery, the Franklin Lakes, N.J., resident got an emergency cancellation call from the hospital just 24 hours before the operation. When he innocently asked, “Is the doctor okay?” Stockinger was floored by the answer: “The doctor’s okay, Rich, but you’re not.”

Routine blood work showed there was something seriously wrong with Stockinger’s kidneys, and he was urged to see a kidney specialist immediately. “I was quite startled,” recalls Stockinger, 49. “I thought I was in excellent health.”

“Christine was quite vocal,” he says, laughing. “She would pick up every packaged item, even in the supermarket, read the sodium content and announce that I was not allowed to eat it!” He didn’t dare argue with his little expert. Stockinger’s sister, Susan, stepped in for the next chapter of his life, offering one of her own kidneys to her beloved brother. Since December 14, 2005, when he underwent the transplant, her kidney has been working just beautifully, Stockinger happily reports.

Once he knew he’d be okay, Stockinger decided it was time to make sure others got the chance he had. Though busy as ever, he made time to join the Board of the National Kidney Foundation serving Greater New York. “I thought I was in excellent health.” With a combination of support from his wife and three children, excellent medical care and lifestyle changes—including a low-sodium diet enforced by his youngest daughter, Christine (pictured above), now 13—Stockinger managed to stave off kidney failure for five years.

Once Stockinger knew he had a donor, he decided to become a Kidney Walk fundraiser, too. “I was quite startled.” He says, laughing. “She would pick up every packaged item, even in the supermarket, read the sodium content and announce that I was not allowed to eat it!” He didn’t dare argue with his little expert. Stockinger’s sister, Susan, stepped in for the next chapter of his life, offering one of her own kidneys to her beloved brother. Since December 14, 2005, when he underwent the transplant, her kidney has been working just beautifully, Stockinger happily reports.

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<td></td>
<td></td>
<td>Upstate New York (Rochester area) 585.697.0874</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Western New York (Buffalo area) 716.835.1323</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>New Mexico</td>
<td>New Mexico</td>
<td>505.830.3542</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>North Carolina</td>
<td>North Carolina</td>
<td>704.552.1351</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Ohio</td>
<td>Ohio</td>
<td>614.481.4030</td>
<td><a href="http://www.kidnfeohio.org">www.kidnfeohio.org</a></td>
</tr>
<tr>
<td>Oklahoma</td>
<td>Oklahoma</td>
<td>800.282.0190</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Oregon</td>
<td>Oregon</td>
<td>888.354.3639</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>Pennsylvania</td>
<td>Alleghenies (Western Pennsylvania, including Pittsburgh area) 412.261.4115</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Delwara Valley (Southeastern Pennsylvania, including Philadelphia area) 215.923.8611</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Rhode Island</td>
<td>Rhode Island</td>
<td>717.278.0222</td>
<td><a href="http://www.kidneyhealth.org">www.kidneyhealth.org</a></td>
</tr>
<tr>
<td>South Carolina</td>
<td>South Carolina</td>
<td>803.799.3870</td>
<td><a href="http://www.kidney.sc.org">www.kidney.sc.org</a></td>
</tr>
<tr>
<td>Tennessee</td>
<td>Tennessee</td>
<td>East Tennessee (Knoxville area) 865.688.5481</td>
<td><a href="http://www.kidneytn.org">www.kidneytn.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Middle Tennessee (Nashville area) 615.383.3887</td>
<td><a href="http://www.kidneytn.org">www.kidneytn.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>West Tennessee (Memphis area) 901.683.6185</td>
<td><a href="http://www.kidneytn.org">www.kidneytn.org</a></td>
</tr>
<tr>
<td>Texas</td>
<td>Texas</td>
<td>North Texas (Dallas area) 214.351.2393</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Southeast Texas (Houston area) 713.952.5499</td>
<td><a href="http://www.nkfehtx.org">www.nkfehtx.org</a></td>
</tr>
<tr>
<td>Utah</td>
<td>Utah</td>
<td>801.226.5111</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Vermont</td>
<td>Vermont</td>
<td>804.288.8342</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Virginia</td>
<td>Virginia</td>
<td>804.288.8342</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>National Capital Area 202.244.7900</td>
<td><a href="http://www.kidneydc.org">www.kidneydc.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>West Virginia 804.288.8342</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Wisconsin</td>
<td>Wisconsin</td>
<td>262.821.0705</td>
<td><a href="http://www.kidney.org">www.kidney.org</a></td>
</tr>
<tr>
<td>Wyoming</td>
<td>Wyoming</td>
<td>720.748.9991</td>
<td><a href="http://www.kidneywyo.org">www.kidneywyo.org</a></td>
</tr>
</tbody>
</table>

**Division**

**Direct Services Area**

All offices are affiliates, except as noted.
### Financial Highlights

The figures on this page depict the combined financial activities of the National Kidney Foundation and its affiliates for fiscal year 2007.

#### Public Support and Other Revenue

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>$33,097,641</td>
<td>41.5%</td>
</tr>
<tr>
<td>Net Special Events</td>
<td>$14,031,055</td>
<td>17.6%</td>
</tr>
<tr>
<td>Program Service Fees</td>
<td>$21,222,918</td>
<td>26.6%</td>
</tr>
<tr>
<td>Government Grants</td>
<td>$4,420,713</td>
<td>5.5%</td>
</tr>
<tr>
<td>Membership Dues</td>
<td>$923,123</td>
<td>1.2%</td>
</tr>
<tr>
<td>Other Income</td>
<td>$6,045,404</td>
<td>7.6%</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>$79,740,854</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

#### Expenses

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Services</td>
<td>$15,842,238</td>
<td>22.0%</td>
</tr>
<tr>
<td>Professional Education</td>
<td>$14,600,921</td>
<td>20.3%</td>
</tr>
<tr>
<td>Public Health Education</td>
<td>$12,821,347</td>
<td>17.9%</td>
</tr>
<tr>
<td>Community Services</td>
<td>$10,302,194</td>
<td>14.3%</td>
</tr>
<tr>
<td>Research</td>
<td>$4,920,257</td>
<td>6.8%</td>
</tr>
<tr>
<td>Management &amp; General</td>
<td>$6,854,310</td>
<td>9.6%</td>
</tr>
<tr>
<td>Fund Raising</td>
<td>$6,567,867</td>
<td>9.1%</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$71,909,134</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

#### Liabilities

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loans Payable</td>
<td>$573,042</td>
</tr>
<tr>
<td>Accounts Payable &amp; Accrued Expenses</td>
<td>$6,433,418</td>
</tr>
<tr>
<td>Deferred Income</td>
<td>$5,314,771</td>
</tr>
<tr>
<td>Other Liabilities</td>
<td>$832,205</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>$13,153,436</strong></td>
</tr>
</tbody>
</table>

#### Total Assets

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and Cash Equivalents</td>
<td>$20,177,933</td>
</tr>
<tr>
<td>Investments</td>
<td>$43,518,383</td>
</tr>
<tr>
<td>Accounts Receivable</td>
<td>$12,506,424</td>
</tr>
<tr>
<td>Inventories of Educational &amp; Campaign Materials</td>
<td>$617,520</td>
</tr>
<tr>
<td>Prepaid Expenses</td>
<td>$1,223,156</td>
</tr>
<tr>
<td>Property, Plant &amp; Equipment, net</td>
<td>$4,426,431</td>
</tr>
<tr>
<td>Other Assets</td>
<td>$1,186,045</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$83,655,892</strong></td>
</tr>
</tbody>
</table>

A complete copy of fiscal Year 2007 NKF financial statements audited by Ernst & Young, LLP and the combined statements for NKF and its affiliates as compiled by NKF staff are available on the NKF Web site at www.kidney.org or by request from the National Kidney Foundation, Marketing & Communications Department, 30 East 33rd Street, New York, NY 10016.
HOW YOU CAN MAKE A DIFFERENCE

When you support the National Kidney Foundation, you become part of a network of people who are committed to improving the lives of those affected by kidney disease. You will help advance research, patient services, advocacy, and public and professional education programs that will lead to lifesaving results for kidney patients.

Become a Member
If you’re a doctor, nurse, health care professional, patient, organ donor or family member, you can join the NKF. Membership benefits include subscriptions to peer-reviewed journals, information-packed newsletters, continuing medical education programs and numerous opportunities for networking and advocacy.

Donate
Make a donation in your own name, in memory of someone special or to commemorate a holiday, birthday, wedding or other special occasion. Invest in the future by planning a gift today that will help patients tomorrow. Support the NKF through your estate plan by making a bequest or donating a portion of your insurance policy.

Participate
Participate in a kidney walk, golf tournament or other special event across the country. Donate your used car or used golf clubs to the NKF and breathe new life into critical programs for patients and families with kidney disease.

Volunteer
Whether you want to volunteer on a regular basis or just occasionally, there are a number of opportunities available to you, including volunteering at fund raising events and kidney screenings, serving on boards or committees or donating your professional expertise to advance our mission.

Visit www.kidney.org to learn more about membership, donation opportunities and volunteering.

“Early detection—absolutely essential in treating chronic kidney disease—can slow the progression of the disease . . . We’ve stepped up our efforts to promote early detection for those at risk for kidney disease—people with diabetes, high blood pressure or a family history of kidney disease. Our outreach efforts urged people to take the simple tests necessary to determine kidney function and we worked aggressively to reach primary care physicians to ensure that these simple tests are part of regular medical checkups . . . We continued to expand our Kidney Early Evaluation Program, which offers free screenings to thousands in cities across the country . . .”

- John Davis, CEO, National Kidney Foundation

TO LEARN MORE ABOUT KIDNEY DISEASE, EARLY DETECTION OR TO SUPPORT OUR INITIATIVES VISIT WWW.KIDNEY.ORG