



Hi this is Mathea Ford, with the Renal Diet Headquarters podcast this is week number 39, and I want to talk this week about what foods are the best to help improve your anemia with chronic kidney disease.

You can find all the information that we talked about and links to the information and my books and other topics at

[renaldiethq.com/039](http://renaldiethq.com/039) and if you want to send me a comment or question, you can email me at [podcasts@renadiethq.com](mailto:podcasts@renadiethq.com).

I want to say thanks for the opening of the podcast to all the listeners who take their time every week and listen to what I have to say and I appreciate it very much. And I just wanted to say that for moment. This week I want to remind you that we have a renal dialysis cookbook out. It's about breakfast foods that you can eat. With dialysis and it more high protein foods, lower sodium, or phosphorus and potassium. If you're in stage four kidney disease or stage five. And you wanted to try some of those dishes you could... there probably going to be... Well you might just if there's something that has a protein shake in it or something that has protein powder, you could take that out.

We're going to work further on getting more recipes out there for you and working on making those readily available to you. I also wanted to just remind you that there's all kinds of information coming up with that AAKP meeting next week, and we're going to be there, we're going to set up a display and I look forward to

meeting you all. We're going to have a giveaway of 12 books, so if you're there, you can sign up for the giveaway. And I look forward to seeing you there.

So this week I want to talk about how do I improve my diet? And what you want do to improve your diet for anemia is to eat more iron rich foods. Now that's easy to say. Iron is in foods that are both plant and animal foods. The iron that is in animal food is referred to as heme iron, mainly because it's in the hemoglobin that is contained in the iron, just like we have our hemoglobin that has iron attached to it. The iron from plant sources is referred to as non-heme iron and the body just generally able to absorb the iron that comes from animal sources better than it does from the plant sources. But you can improve your absorption of those plant foods with vitamin C and following the things we talked about in the last podcast, like possible eating between meals some snacks of foods that are higher in iron. Trying not to drink milk or tea or coffee with those foods. You need to get those foods that are right for your dietary plan while still getting your nutrients you need. And I know a lot of times you make a choice about protein and if I tell you to make a choice about protein, if you're going to go over it's better for you to go over with the plant base items, so that would be kind of a Catch-22 there.

A healthy renal diet is meant to have the body maintain the proper balance of fluids, mineral and nutrients. The diet is different for those who are on dialysis and those who aren't. When you are on pre-dialysis you're usually encouraged to limit your protein, while people who are on dialysis usually eat more protein. And depending on the type of dialysis that you're on, you may need a lot more protein or you may need just a little.

Many protein rich foods are also high in iron and low protein diet are encouraged for those not dialysis so you may not eat very much of them. You can eat food higher in protein once you're on the dialysis, which is also when you're probably at a higher

risk of developing anemia. And you can eat things like pork and eggs, beef to help replace your iron stores that maybe depleted.

Food that are good sources of heme iron and remember you need to adjust this based on your...What food are allowed, based on your laboratory results and what you've talked to doctor about. Chicken liver, oysters, clams, beef liver, lean ground beef, turkey legs, tuna, egg, shrimp. Things are good sources of non-heme iron more like the plant base sources are going to be things like oatmeal, garlic, kidney beans which I know kidney beans can be a lot of potassium and phosphorous, tofu, lentils, cranberries, molasses have a lot of iron in them. Whole wheat bread is going to have more than white bread but you can buy iron-fortified white bread. You may think about that. Peanut butter, brown rice, apricots, pineapple and broccoli.

Combining both of those sources like the non-heme and the heme iron sources can increase your absorption. The vitamin C should be limited to 60 mg per day when you're on dialysis so just be careful with that. A vitamin C friendly vitamin C source is going to be like enriched cranberry juice maybe some strawberries and some tangerines. So if you're eating a tangerine with some of those foods that are good sources of heme iron. If you're eating a tangerine with your meal and you can eat some of those things that are better sources of the heme and the non-heme iron you're going to improve your absorption. I also talked about...You want to increase your iron levels you want to eat foods that are high in iron, vitamin B12 and folic acid. You want foods to kind of have all three because while you need... you know you many iron but you may need to be a little lower in B12 you kind of want to make sure that you're getting all your vitamins and minerals. So some of these are good sources of iron folic acid and vitamin B12, but they can also contain potassium. So if you're limiting in potassium be cautious. Make sure you talk to your doctor before you do that.

Okay so I want to let you know about some foods that are high in iron and B12 and folic acid and these foods are going to be good for you to eat, but you need to pay attention to the potassium amount. Some of these foods are good sources of iron folic acid and vitamin B12 but if you're sensitive or you need to watch your potassium then those are going to be the things that you are going to need to avoid.

Like spinach a half a cup cooked has 420 mg of potassium in it. Sweet potatoes have 450 mg to potassium. Broccoli has a good amount of potassium in it, 230 mg in a half cup. Strawberries are low and those are things you can eat with your other iron-enriched foods. Strawberries have about 18 mg in a cup or in one medium about a cup's worth. Beans can have up to 595 mg of potassium in a half a cup. So that's pretty high, tomato products 275 in half a cup. Just be cautious... Meats for example, some salmon has about 300 mg of potassium and tuna is going to have about 200 mg potassium and those are both in 3 oz. portions.

A container of Greek nonfat yogurt like 8 oz. is 240 mg. Lobster can have 334 mg. Egg yolks have about 19 mg per egg yolk. Dried beans half cup is going to have like I said about 300 to 500 mg of potassium. And oranges are like 240 mg. It's really important just to watch, if you need to, the potassium amount because those are important to your levels.

Now those foods that are high in iron are going to be good for you like meats, beef, chicken, and turkey those are going to have iron. You're possibly going to be taking iron medication and you're going to need to eat some iron rich foods like broccoli and spinach and just any amount that you're able to eat them. But the one thing you want to pay attention to is how you feel and you want to ask questions to your doctor so that you understand what's going on.

And some of those questions that you're going to want to ask are things like, what is my target level for each test. So if we've got hemoglobin and right now I'm at an 8

and what is the target level? What are you going to try to see if I'm going get to and what's going to happen then?

How long do you think I'm going to need to take this medication? Am I going to take iron for the rest of my life? Are we going to have side effects? That type of thing. How often are you going to test? Are you going to my blood every month? Are you going to take my blood every week? Are we going to do it every 3 months? How frequently do I need to have injections or treatment? So if it's an IV thing like an IV iron or Epogen or Eprocreate that's an IV, how often do I need to come get that?

And then are there any known risks or side effects of the anemia treatment? So yes, you know the side effects of anemia are things like being fatigue, tired that sort of thing. But are there side effects to the medication, which most the time there are. And what does that mean? And then is there anything else I can be doing to manage my anemia, do I need to be walking? Do I need to be eating other things? Do I need to be doing strength training? You know, how can I bring my levels back to whatever the target ranges, how can I help with my own healthcare?

And then if you're not being treated with an ESA or an iron in your hemoglobin is low, ask why. Why is it that you feel the appropriate treatment is not to use these? You're not challenging them, you are asking for your own health care and if they feel like it's not appropriate than they can tell you specifically why they feel like that not appropriate.

That way your doctor knows and communicates to you what they're trying to achieve and then your doctor is going understand that you're interested and you care about this and they are going to be more willing to maybe give a little more effort, explain a little better and maybe through the process of that they'll say okay we're going to try this or we are going to try that. And that will matter in the long run.

You'll learn the answers and you'll be able to act accordingly if he said... he or she says, you need to do this to help your treatment, and then you need to do that. And if you don't have then he is going to think well he or she was just asking the question for no good reason.

When you're living with the chronic kidney disease, you are going to have lots of symptoms, but another thing you are going to have is symptoms from the anemia and you need to be able to identify it. Okay here is some of the ways I felt today, I was more tired today after I took the ESA, I was less tired, I felt good, and I was able to walk to my car. That type of thing.

Keeping a journal of your symptoms can be a very helpful way to help with your own treatment. You can show that your doctor and relate it to when you start taking medications, document in there and that way it helps a kind of piece things together. Because they don't they're not in on mission, they don't just know everything automatically when you come and you say oh I feel really tired. They're not necessarily always going to associate that with anemia, they may think that you're just... You know, the process the disease process is getting to you so you may have to ask are we... can you check my hemoglobin or and then how often are we get a check it to keep up with it.

You also need to pay attention to the other medications you're on and that might be a conversation to have with the pharmacist. You want to make sure you're getting all your medications from the same pharmacy, if you can. And talking to the pharmacist about your medication and taking them. Because that way they will know what you're doing and they can tell you, okay this one having side effect, let me your doctor. These two interact; let me talk to your doctor about what we could be differently.

Keep it in a spiral notebook with the journal and that way you can help with some of your side effects quicker, because you'll know. Me I do it myself, I say I started taking that medicine just long ago. I started having problems with my computer and I started thinking, what program I added to my computer. Now there is probably journal in my computer that will tell me when things are changed. But it's one of those things like where I was this started happening about the same time that I change some computer programs setting, I wonder if those two are related. So that's something that you can do and you can help be a detective in your own life.

It is always important to ask questions and raised any concerns; I want to encourage you to do that. You are very important and you are not doing anything wrong by asking your doctor why they're doing things.

So that's what I wanted to talk about this week and I appreciate you listening to me. And I talked about how to improve your diet; how to increase your iron levels, I talked a little bit about potassium and kind of how it can affect you. The renal dialysis cookbook is out and then next week I want to talk to you about the seven things you must know about kidney disease because I got my article and stuff ready for the conference. And I'm going to read that and talk about that next week with you. The seven things you must know about kidney disease. And it doesn't matter if you're dialysis or pre dialysis or transplant. It's all important, so I'm going to talk about that and that's what's coming up for next week. So I look forward to talking to you.

Thank you.