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Editorial Comment



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This issue completes the Caregiver's installments, but I can assure you it is not the end of articles on or about care giving. I have asked individuals who have been or are currently working as a caregiver for a family member or a friend to write about their experiences. I have also asked about other stories about care giving be written and submitted to me for review and publishing in this newsletter; now this invitation is open to anyone who reads this newsletter and feels that their experience would be a benefit to another person.

Experience that is shared through stories I hope will be a valuable benefit for anyone currently tasked with providing such service for another person. I will also be telling such stories about my personal life receiving help from a caregiver and myself providing such service for another person. You can mail your story to me using my mailing address that I posted in this issue, or email me using my address that I have also posted in this issue, or if it easier just hand to me the written article when you see me.

Thinking of my Wife over the Holidays.



Caregiver (Part III)

This is the final installment for this Caregiver's article, but not the end of my discussion about Care Giving and the good that they do for people, so lets begin –

As you might have grasp from the previous two issues on the articles dealing here with Care giving that there are no specific qualifications needed to become a caregiver. Many caregivers receive on-the-job training. There are some caregivers who do receive nursing training or rehabilitation training. This usually applies to those who seek work in a medical or long-term care facility. Those caregivers that dispense medications may be required to take basic training courses, depending

on which state they are working in. Some states do require certification for certain types of caregivers, while others do not. Some caregivers seek advancement into the nursing profession. If a caregiver has the ultimate goal to become a registered or licensed nurse they will need an associate degree of two years or a bachelor's degree of approximately three to four years.

While there is no outright certification requirement for all caregivers, some caregivers may receive nurses' aid training through vocational or community colleges. Some caregivers may elect to take CPR or a general health course for which they will get a certification. While this is not required,

Caregiver (Part III) (continued on pg-2)



Caregiver (Part III) (continued from pg-1)

it could be beneficial as part of the job. Nursing training is usually for a period of six months and generally includes skill training such as record keeping, patient care skills and taking vital signs. The National Association for Home Care and Hospice does offer voluntary certification. This usually includes courses requiring approximately 75 hours of course work. The courses are similar to those required for a certified nursing assistant courses offered by several states.

Having given as much info that I could gather about Caregivers in this article for you the reader you'll note that mainly what I've reported here has to do with professional caregivers. However, there are so many unsung heroes that provide this service for love, yes, you see these devotees daily, they are the mothers, fathers, daughters and sons taking care of their ailing relatives.

Well in closing this report, there is a significant amount of work involved in the caregiver career field; unfortunately the salary is not generally that high in relation to all of the duties expected for them to perform. According to the Bureau of Labor Statistics, the average salary a caregiver can expect is a little less than \$18,000 per year. Infant caregivers will sometimes receive health care benefits. Live-in caregivers may receive room and board free of charge as part of their terms of employment. **According to the BLS, <http://www.bls.gov/oco/> Due to an increase in the average life expectancy, there will always be a need for caregivers. Research indicates that a large number of people prefer to have a licensed or certified caregiver. According to the Bureau of Labor Statistics, the need for caregivers is expected to increase by approximately 18% from now through to the end of 2016. While there is not a lot of initial room for advancement, those caregivers who seek certification or nursing training may advance from the caregiver profession into the nursing profession. **According to the BLS, <http://www.bls.gov/oco/>.

A Comparative View of Chemo and Dialysis

Over the past eight weeks that I have been undergoing treatment at both the Rocky Mountain Cancer Center and ARA Lafayette Kidney Center, it has dawned on me that there are a few similarities between both of these medical treatment approaches. What you don't believe me, well shut my mouth they do exist, so lets pay a little verbal visit to each of these supposed distinct but different clinics.

Yes it is true they each focus on something different in the body, Dialysis primary is concerned with the kidneys along with cleaning the liquid build up in the body, which as we all know the kidney, connects to the bladder which is the draining point of the body that is used

to clean the blood and remove excess liquid. Now for the Chemo Infusion approach, it is primarily focused with almost any part of the body where cancer cells can be found and has taken a foothold and has begun to rapidly reproduce. Cancer can be found almost anywhere in the body, in any organ and yes that is to include the kidneys.

So lets begin to look at the comparative similarities of the chemo infusion and dialysis process –

We the patients have medically implanted within us a means for our techs and/or nurse a way to connect us, the patient, up to an IV drip bag filled with the chemical required for the cancer patient's treatment. Now the dialysis

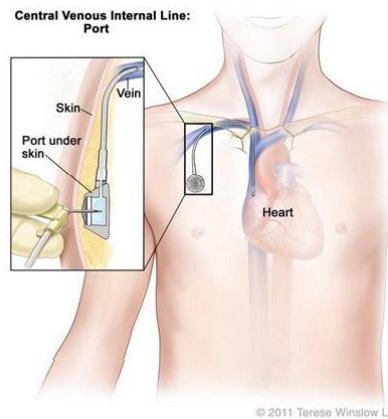
A Comparative View (continued on pg-3)



A Comparative View of Chemo and Dialysis (continued from pg-2)

patient also has a similar implants that come in many forms that allows the techs and/or nurses to attach the patient to the dialyzing machine.

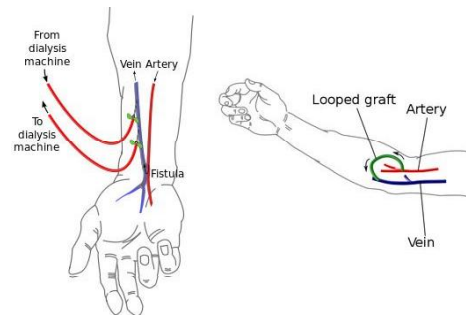
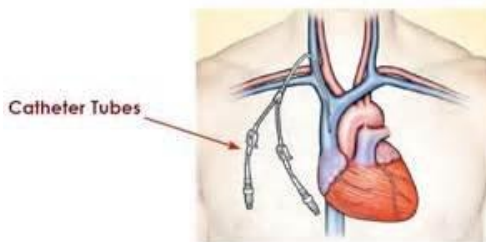
The cancer patient has implanted either a Power Port in the chest area or a PICC Line in the upper underside arm area to accommodate the necessary connection to receive their treatment. I have seen that some people don't have either implant made that would be used for their treatment and they are only connected through a vein in their arm. See below.



PICC Line

Power Port

Now for the dialysis patient who also has implanted in their chest area a catheter, which is only a temporary situation, because it is subject to possible infections, so a physical modification is made to an arm of the patients where a graft or a fistula is configured so there would be an access point to allow tubes to be connected to the patient that would allow them to receive the required treatment, see below.



Now all of this comparison or difference finds our patients sitting in similar types of chairs, with a slight difference mind you but not that great, it is where they sit to receive their treatment for whatever the ills they might be suffering from that they need to receive treatment for –

A Comparative View of Chemo and Dialysis (continued from pg-3)



Infusions Chair



Dialysis Chair with its Machine

Before any patient actually reaches their chair they go through a process of checks and balances, so to speak, they are weighed, physically assessed checking their hearts and lungs, plus how they are physically and/or emotionally found to be stable enough for their prescribed treatments.

Now here is where some differences might be seen, the Cancer Infusion treatment could last from 2.5 to 4 hours depending on the prescribed treatment, and could require treatment once every two weeks or more often, again depending on the prescribed treatment, plus or minus, along with leaving the center with a portable pump attached to either a Port Access or PICC Line, now the pump will be pumping a chemo formula into the patient for the next 46 hours.



Portable Pump

The difference with the dialysis treatment calls for the patient to submit to a treatment cycle three times a week such as, Mon-Wed-Fri or Tue-Thru-Sat, and these treatment are and/or can be 3.45 to 4.30 hours each day of the scheduled treatment cycle. Plus they could be called on to come on a day they are not scheduled for a maintenance treatment called a 'puff.'

A Comparative View of Chemo and Dialysis (continued from pg-4)

The dialysis patients must reweigh themselves before they can leave to determine how much liquid was removed by their treatment; the cancer infusion patient is not required providing a leaving weight before they can leave the center.

The cancer patient sees his or her doctor, or one of the doctor's staff to discuss their condition and treatment, before they are allowed to submit themselves for the scheduled cancer treatment. Dialysis patients see their doctor or one of the doctor's staff at least once or twice a month to discuss their condition and treatment. Both cancer and dialysis patients have blood drawn for lab workups, the difference is that the cancer patient has labs drawn before every treatment, while a dialysis patient has lbs drawn once a month.

So the similarities are if nothing, somewhat similar, but each treatment any patient is given for his or her particular health failing does vary from one person to the next.

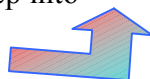
Christmas Feelings

I have been debating with myself, something I seem to do a lot since my wife died; anyway my debate had to do with whether I wanted to share my feelings about Christmas with the rest of the world. However, as you can see I am writing, so it is pretty obvious fact that I lost my negative thoughts against the positive aspect of what Christmas means to me since my life was so unexpectedly disrupted, which found me alone, not a position I want to be in but I am.

Christmas is quickly approaching, it will be here before I know it, and it is coming no matter how I want to hold it back so I won't have to feel my loss. When I think of Christmas I get a tingling behind my eyes and I know what is coming next and I know that a condition will arrive whether I want it to or not because tears tend to have a mind of their own, they'll come and go without a person's permission. For me Christmas represents a great sadness, something that I knew would dig deep into

the empty area that was my heart. I know its arrival will open a vacuum where my heart once lived happily, filled with love, but now it is broken, but still it was a place of love happily shared by my wife and I. My heart was filled with her love and I know that my wife's love moved me into directions that without her presences in my life I would never have ventured out into. It was my love for her that moved me outward with an open heart.

In my last issue when I spoke of Thanksgiving, I talk about reaching out to others, hoping to make my life complete, and I will admit I have attempted to do just that but all my efforts have come to nil or zero for the most part. However, I will continue to reach out in an effort to make a contact but no matter my successes or my efforts might be, it does not solve my loneliness and the ever-present depression I carry around with me as I go about my daily schedule.



I have always been disappointed in the
Christmas Feelings (continued on pg-6)

Christmas Feelings (continued from pg-5)

Christmas holiday, and for me it doesn't represent the holiday, as it should be. My displeasure with the idea of Christmas prompted me to write a poem that I think expresses how I see and feel about it.

Christmas

Christmas, I have heard them say, is a time of rejoicing,
Spread by people, in the good will of their singing and voicing.
Yet how is it different, from yesterday or even tomorrow,
When self-interest is the cause of so much world sorrow?
If Christmas is important, the time for caring and giving,
Why isn't it part of the daily life we are all living?
Oddly, it seems we store the good will we feel for each other,
Waiting for Christmas to bring it out, to express it one to another.
The birth of Christ we celebrate one day of the year,
Yet his message was "love one another," wasn't that made clear?
All year long, we close our eyes to suffering and despair,
But open them on Christmas, to show each other how much we care.
We teach our children the rules of life, the right way to live,
Showing them by example, it is better to receive than it is to give.
"Do unto others," those simple acts of caring and loving,
This I am sure would do away with the pushing and shoving.
It is funny how we abuse the one's we love, and use the others,
Forgetting the love we learned, at the knee of our mothers.
So what is Christmas, a penalty payment for a year of doing wrong,
Marked "Paid-in-Full," as we wait for the New Year to come along?

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Well let me close my thoughts on Christmas, I do hope that your Christmas is filled with love and good fellowship. I have a pretty good idea how mine will be, but I will celebrate it with my son and his family.

Chemo the Good News

The title of this article may seem a little out-of-place when you compare the idea of a chemo treatment with so many horror stories attached to it. Yet when you invest into a treatment regimentation as a means to combat cancer to extent one's life, it is only logical to have some high hopes regarding the scheduled treatments and any possible positive results that bring a cure to the suffer of the cancer.

Since the idea of chemo tends to be seen as an ugly hit or miss treatment, and I admit it can be, but today we'll speak of the good. As it stands I've been undergoing such a treatment for ten weeks. Weeks, that sometimes seem overly long, well that probably because my weekly schedule is pretty full, what with dialysis three times each week, with chemo stacked on top of it all.

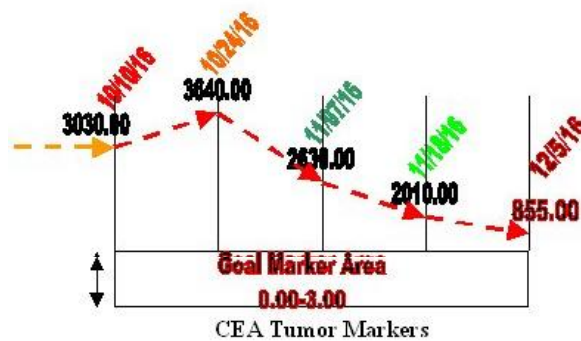
Now if you remember, well I hope you in

Chemo the Good News (continued on pg-7)



Chemo the Good News (continued from pg-6)

do, well anyway I created a bar graft to illustrate how my Tumor Markers was going each week my labs were drawn; this you can see in Issue #3, but it is not necessary to go back and check it out, I've updated the graft and is posted here this article with its most recent lab results. See Below –



Information shown above as taken
From my four-scheduled lab test on the
dates shown.

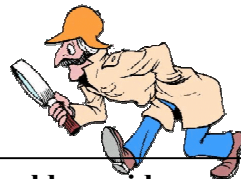
When it was first discovered that I had cancer it was because I had a tumor in the colon area that they found using the CAT Scan, and then of course the next step was determine if it was actually cancerous or benign. So surgery was arranged for and then they cut out a good two-thirds of the colon tumor, while also doing a biopsy of the liver, which had shown possible tumors.

Surgery resulted in discovering that both the colon and liver were cancerous and chemo treatment was scheduled in the combating the potential spread of this cancer. My tumor markers as shown above in the bar graft demonstrates where I stood as a patient and where I had progressed to after ten weeks of treatments.

I have to remember that the original forecast of my life expectation was very gloomy and dire, sighting that if I did nothing it would be a matter of months, but if I had the cancer treated I could look for maybe three and a half years of life. Now that original forecast was based on the original Tumor Markers seen above on the bar graft, but that has changed with the continuing lowering of the markers as my treatments went forward. Now in all of this, me being a person with an open mind, who always 'plan for the worst but hope for the best,' I could only deduce that my markers were telling me something as showed the numbers going down, which indicated for me that my life expectation could be extended outward, furthering my future down a road where I was not able to see its end and that is where I must leave my thinking.

Will continue this as my labs are drawn and results become available for review.

Notices & Tips



Information sites online that would provide you some good information.

[http://www.billpeckham.com/from_the_sharp_end_of_the/DiaDialysis from the sharp end of the needleend of the needle](http://www.billpeckham.com/from_the_sharp_end_of_the/DiaDialysis_from_the_sharp_end_of_the_needleend_of_the_needle)



<http://www.kidneypatientguide.org.uk/treatment.php>

<http://www.fixdialysis.com/>

**Why U.S. Dialysis Care Has Been Stagnant
– and – Why Patients Have Not Been Heard**



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