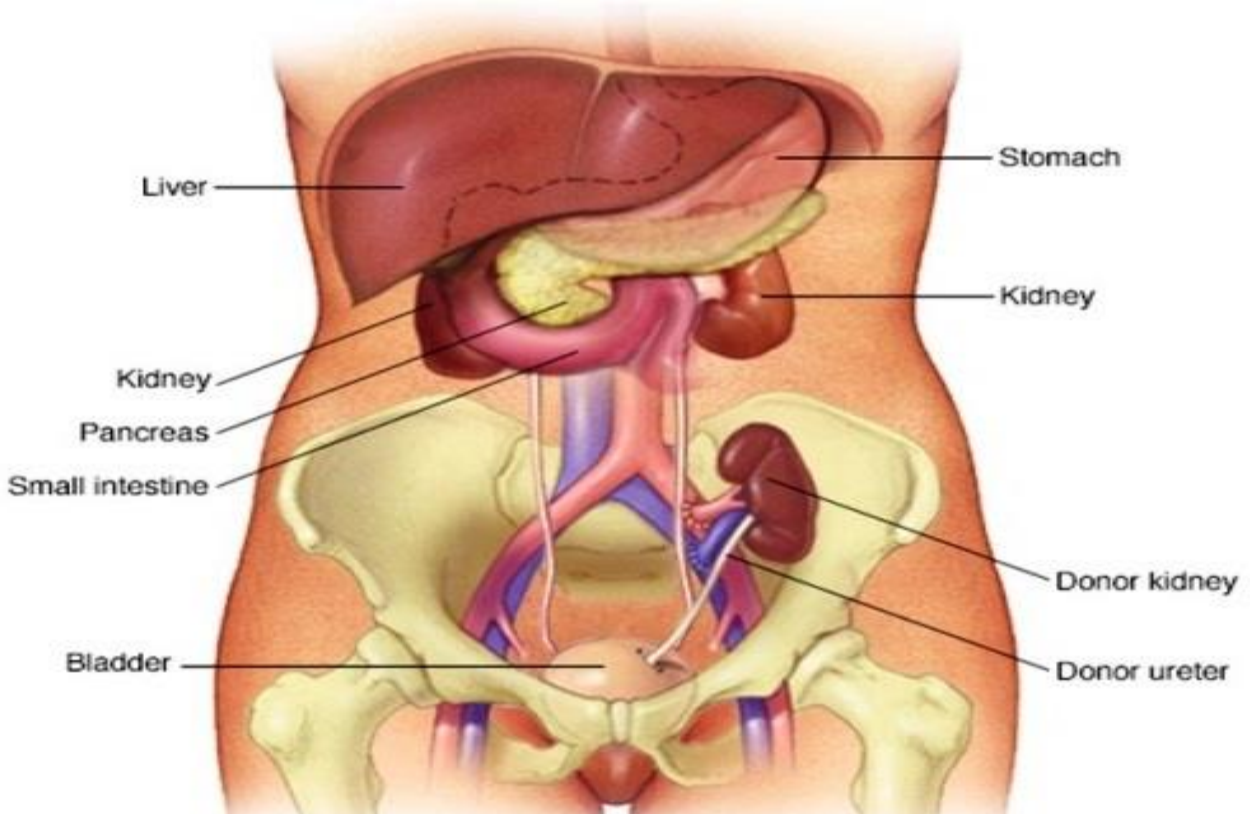


Health









The Holy Seed Church





The rate at which young people are suffering from Kidney diseases is alarming. I am sharing this message which can help us. Please read is very **IMPORTANT KIDNEY DESERVES THE BEST** Barely two (2) days ago, we all received the news of the demise of the Nigerian actor as a result of kidney disease. **ALSO OUR MINISTER OF PUBLIC WORKS**, the Honorable Teko Lake is currently in the Hospital on life support with kidney problems. I want to show you how to avert this menace of kidney disease.

SO HERE ARE THE TOP 6 CAUSE OF THE DISEASE:

-  Delaying going to toilet keeping your urine in your bladder for too long is a bad idea. A full bladder can cause damage. The urine that stays in the bladder multiplies bacteria quickly. Once the urine refluxes back to the ureter and kidneys, the toxic substances can result in kidney infections, then urinary tract infections, and then nephritis, and even uremia. When nature calls –do it as soon as possible.
-  Eating too much salt, you should eat no more than 5.8 grams of salt daily.
-  Eating too much meat. Too much protein in your diet is harmful for your kidneys. Protein digestion produces ammonia-a toxin that is very destructive to your kidneys. More meat equals more kidney damage.
-  Drinking too much caffeine caffeine is a component of many sodas and soft drinks. It raises your blood pressure and your kidneys start suffering coke you drink daily.
-  Not drinking water. Our kidneys should be hydrated properly to perform their functions well. If we don't drink enough, the toxins can accumulating in the blood, as there isn't enough fluid to drain them through the kidneys. Drink more than 10 glasses of water daily. There is an easy way to check if you are drinking enough water: Look at the colour of your urine; the lighter the colour, the better.
-  Late treatment. Treat all your health problems properly and have your health checked regularly. Let's help ourselves...God will protect you and your family from every disease this year. (3) Avoid these Tablets, they are very dangerous: -D-cold – Vicks Action-500 –Actified –Coldarin –Cosome –nice –Nimulid –Cettrizet-D They contain phenyl Propanol-Amide PPA. Which causes Strokes & Are banned in USA please, before deleting, HELP your friends by passing it ..! It might help sum 1. Fwd to as many as u can. Please read it Doctors in the United States have found new cancer in human beings, caused by Silver Nitro Oxide. Whenever you buy recharge caeds, don't scratch with your with your nails, as it contains Silver Nitro Oxide coating and can cause skin cancer. Share this message with your loved ones. Important Health Tips: Answer phone calls with the left ear. Don't take your medicine with cold water... Don't eat heavy meals after 5pm. Drink more water in the morning, less at night. Best sleeping time is from 10pm to 4 am. Don't lie down immediately taking medicine or after meals. When phone's battery is low to last bar, Don't answer the phone, because the radiation is 1000 times stronger. Knowledge is power.

1. Kidney Transplant

When your kidneys fail, treatment is needed to replace the work your own kidneys can no longer do. There are two types of treatment for kidney failure — dialysis or transplant. Many people feel that a kidney transplant offers more freedom and a better quality of life than dialysis. In making a decision about whether this is the best treatment for you, you may find it helpful to talk to people who already have a

kidney transplant. You also need to speak to your doctor, nurse and family members.

2. What is a kidney transplant?

When you get a kidney transplant, a healthy kidney is placed inside your body to do the work your own kidneys can no longer do.

On the plus side, there are fewer limits on what you can eat and drink, but you should follow a heart-healthy diet. Your health and energy should improve. In fact, a successful kidney transplant may allow you to live the kind of life you were living before you got kidney disease. Studies show that people with kidney transplants live longer than those who remain on dialysis.

On the minus side, there are the risks of surgery. You will also need to take anti-rejection medicines for as long as your new kidney is working, which can have side effects. You will have a higher risk for infections and certain types of cancer.

Although most transplants are successful and last for many years, how long they last can vary from one person to the next. Many people will need more than one kidney transplant during a lifetime.

3. What is a “preemptive” or “early” transplant?

Getting a transplant before you need to start dialysis is called a preemptive transplant. It allows you to avoid dialysis altogether. Getting a transplant not long after kidneys fail (but with some time on dialysis) is referred to as an early transplant. Both have benefits. Some research shows that a pre-emptive or early transplant, with little or no time spent on dialysis, can lead to better long-term health. It may also allow you to keep working, save time and money, and have a better quality of life.

4. Who can get a kidney transplant?

Kidney patients of all ages—from children to seniors—can get a transplant.

You must be healthy enough to have the operation. You must also be free from cancer and infection. Every person being considered for transplant will get a full medical and psychosocial evaluation to make sure they are a good candidate for transplant. The evaluation helps find any problems, so they can be corrected before transplant. For most people, getting a transplant can be a good treatment choice.

5. What if I’m older or have other health problems?

In many cases, people who are older or have other health conditions like diabetes can still have successful kidney transplants. Careful evaluation is needed to understand and deal with any special risks. You may be asked to do some things that can lessen certain risks and improve the chances of a successful transplant. For example, you may be asked to lose weight or quit smoking.

If you have diabetes, you may also be able to have a **pancreas transplant**. Ask your healthcare professional about getting a pancreas transplant along with a kidney transplant.

6. How will I pay for a transplant?

Medicare covers about 80% of the costs associated with an evaluation, transplant operation, follow-up care, and anti-rejection medicines. Private insurers and state programs may cover some costs as well. However, your post-transplant expenses may only be covered for a limited number of years. It's important to discuss coverage with your social worker, who can answer your questions or direct you to others who can help. **[Click here to learn more about insurance and transplant.](#)**

7. Getting a Transplant

How do I start the process of getting a kidney transplant?

Ask your healthcare provider to refer you to a **transplant center** for an evaluation, or contact a **transplant center** in your area. Any kidney patient can ask for an evaluation.

8. How does the evaluation process work?

Medical professionals will give you a complete physical exam, review your health records, and order a series of tests and X-rays to learn about your overall health. Everything that can affect how well you can handle treatment will be checked. The evaluation process for a transplant is very thorough. Your healthcare team will need to know a lot about you to help them—and you—decide if a transplant is right for you. One thing you can do to speed the process is to get all the testing done as quickly as possible and stay in close contact with the transplant team. If you're told you might not be right for a transplant, don't be afraid to ask why—or if you might be eligible at some future time or at another center. Remember, being active in your own care is one of the best ways to stay healthy.

If someone you know would like to donate a kidney to you, that person will also need to go through a screening to find out if he or she is a match and healthy enough to donate. If it's your child who has kidney disease, you'll want to give serious thought to getting a transplant evaluation for him or her. Because transplantation allows children and young adults to develop in as normal a way as possible in their formative years, it can be the best treatment for them. If the evaluation process shows that a transplant is right for you or your child, the next step is getting a suitable kidney. (See "Finding a Kidney" below.)

9. What does the operation involve?

You may be surprised to learn that your own kidneys generally aren't taken out when you get a transplant. The surgeon leaves them where they are unless there is a medical reason to remove them. The donated kidney is placed into your lower abdomen (belly), where it's easiest to connect it to your important blood vessels and bladder. Putting the new kidney in your abdomen also makes it easier to take care of any problems that might come up.

The operation takes about four hours. You'll be sore at first, but you should be out of bed in a day or so, and home within a week. If the kidney came from a living donor, it should start to work very quickly. A kidney from a deceased donor can take longer to start working—two to four weeks or more. If that happens, you may need dialysis until the kidney begins to work.

After surgery, you'll be taught about the medicines you'll have to take and their side effects. You'll also learn about diet. If you've been on dialysis, you'll find that there are fewer restrictions on what you can eat and drink, which is one of the benefits of a transplant.

10. What are anti-rejection medicines?

Normally, your body fights off anything that isn't part of itself, like germs and viruses. That system of protection is called your immune system. To stop your body from attacking or rejecting the donated kidney, you will have to take medicines to keep your immune system less active (called anti-rejection medicines or immunosuppressant medicines). You'll need to take them as long as your new kidney is working. Without them, your immune system would see the donated kidney as "foreign," and would attack and destroy it.

Anti-rejection medicines can have some side effects. It is important to talk to your healthcare provider about them, so that you know what to expect. Fortunately, for most people, side effects are usually manageable. Changing the dose or type of medicine can often ease some of the side effects.

Besides the immunosuppressive medicines, you will take other medicines as well. You will take medicines to protect you from infection, too. Most people find taking medicines a small trade for the freedom and quality of life that a successful transplant can provide.

11. After Your Transplant

What happens after I go home?

Once you are home from the hospital, the most important work begins—the follow-up. For your transplant to be successful, you will have regular checkups, especially during the first year. At first, you may need blood tests several times a week. After that, you'll need fewer checkups, but enough to make sure that your kidney is working well and that you have the right amount of anti-rejection medication in your body.

12. What if my body tries to reject the new kidney?

One thing that you and your healthcare team will watch for is acute rejection, which means that your body is suddenly trying to reject the transplanted kidney. A rejection episode may not have any clear signs or symptoms. That is why it is so important to have regular blood tests to check how well your kidney is working. Things you might notice that can let you know you are having rejection are fevers, decreased urine output, swelling, weight gain, and pain over your kidney. The chances of having a rejection episode are highest right after your surgery.

The longer you have the kidney, the lower the chance that this will happen. Unfortunately, sometimes a rejection episode happens even if you're doing everything you're supposed to do. Sometimes the body just doesn't accept the transplanted kidney. But even if a rejection episode happens, there are many ways to treat it so you do not lose your transplant. Letting your transplant team know right away that you think you have symptoms of rejection is very important.

13. How often do rejection episodes happen?

Rejections happen much less often nowadays. That's because there have been many improvements in immunosuppressive medicines. However, the risk of rejection is different for every person. For most people, rejection can be stopped with special anti-rejection medicines. It's very important to have regular checkups to see how well your kidney is working, and make sure you are not having rejection.

14. When can I return to work?

How soon you can return to work depends on your recovery, the kind of work you do, and your other medical conditions. Many people can return to work eight weeks or more after their transplant. Your transplant team will help you decide when you can go back to work.

15. Will my sex life be affected?

People who have not had satisfactory sexual relations due to kidney disease may notice an improvement as they begin to feel better. In addition, fertility (the ability to conceive children) tends to increase. Men who have had a kidney transplant have fathered healthy children, and women with kidney transplants have had successful pregnancies. It's best to talk to your healthcare practitioner when considering having a child.

Women should avoid becoming pregnant too soon after a transplant. Most centers want women to wait a year or more. All pregnancies must be planned. Certain medications that can harm a developing baby must be stopped six weeks before trying to get pregnant. Birth control counseling may be helpful. It's important to protect yourself against sexually transmitted diseases (STDs). Be sure to use protection during sexual activity.

16. Will I need to follow a special diet?

In general, transplant recipients should eat a heart-healthy diet (low fat, low salt) and drink plenty of fluids. If you have diabetes or other health problems, you may still have some dietary restrictions. A dietitian can help you plan meals that are right for you.

17. Finding a Kidney

Where do donated kidneys come from?

A donated kidney may come from someone who died and donated a healthy kidney. A person who has died and donated a kidney is called a deceased donor.

Donated kidneys also can come from a living donor. This person may be a blood relative (like a brother or sister) or non-blood relative (like a husband or wife). They can also come from a friend or even a stranger.

When a kidney is donated by a living person, the operations are done on the same day and can be scheduled at a convenient time for both the patient and the donor. A healthy person who donates a kidney can live a normal life with the one kidney that is left. But the operation is major surgery for the donor, as well as the recipient. As in any operation, there are some risks that you will need to consider.

18. Is it better to get a kidney from a living donor?

Kidneys from living or deceased donors both work well, but getting a kidney from a living donor can work faster and be better. A kidney from a living donor may last longer than one from a deceased donor.

To get a deceased donor kidney, you will be placed on a waiting list once you have been cleared for a transplant. It can take many years for a good donor kidney to be offered to you. From the time you go on the list until a kidney is found, you may have to be on some form of dialysis. While you're waiting, you'll need regular blood tests to make sure you are ready when a kidney is found. If you're on dialysis, your center will make the arrangements for these tests. Your transplant center should know how to reach you at all times. Once a kidney becomes available, the surgery must be done as soon as possible.

19. Are there disadvantages to living donation?

A disadvantage of living donation is that a healthy person must undergo surgery to remove a healthy kidney. The donor will need some recovery time before returning to work and other activities. However, recent advances in surgery (often called minimally invasive or laparoscopic surgery) allow for very small incisions. This means shorter hospital stays and recovery time, less pain, and a quicker return to usual activities. Living donors often experience positive feelings about their courageous gift.

20. What are the financial costs to the living donor?

The surgery and evaluation is covered by Medicare or the recipient's insurance. The living donor will not pay for anything related to the surgery. However, neither Medicare nor insurance covers time off from work, travel expenses, lodging, or other incidentals. The National Living Donor Assistance Program or other programs may help cover travel and lodging costs.

Donors may be eligible for sick leave, state disability, and benefits under the federal Family Medical Leave Act. In addition, federal employees, some state employees, and certain other workers may be eligible for 30 days paid leave.

21. What else can I do?

You should learn as much as you can by reading and talking to your healthcare team, as well
Causes of end stage kidney disease

- a) **Diabetes** – These patients have a continuously high blood sugar. This high blood sugar can damage the filters in the kidneys, leading to long-term kidney damage and finally kidney failure. This is called diabetic nephropathy.
- b) **High blood pressure or hypertension** – This is another common cause of kidney disease and failure. High blood pressure in the tiny blood vessels to the kidney leads to damage and prevents the filtering process from working properly.
- c) **Blockages in the arteries** that bring blood to the kidneys over time called renal artery stenosis is another cause of end stage renal disease
- d) **Another condition** is called polycystic kidney disease which is an inherited condition. There are several large cysts or hollow spaces formed within the kidney that make its normal functioning difficult.
- e) There may be congenital problems in development of kidneys. This occurs since before birth and manifests when over 90% of the kidney function is compromised.
- f) Disease of the immunity such as systemic lupus erythematosus (SLE) in which the immune system of the body fails to recognise the kidney as its own and attacks it thinking it to be a foreign object.

End stage kidney disease needs treatment to prevent life threatening consequences of the waste product build up leading to coma and death. In these situations dialysis is an option. A device is used to filter the blood as it flows through it and the filtered blood is then injected back into the body. This is a time consuming, expensive procedure and is associated with a myriad of side effects and risks of infection etc. Kidney transplant, if possible, is usually the preferred option because it is much less inconvenient than having dialysis.

When can a kidney transplant take place?

A kidney transplant may be performed regardless of age of the recipient (patient who requires the kidney) provided they have a general health status that can withstand the major operation, there is a good chance of transplant success and the person is aware and willing to comply with taking immunosuppressant medications after the transplant to prevent rejection of the new organ by the body's immune system.

Who cannot use a kidney transplant?

Patients in whom kidney transplant cannot be performed include:

- 1) those with a widespread cancer
- 2) those with an active infection
- 3) those with liver or heart disease
- 4) those with AIDS.



Side Effects of Family Planning

Various family planning methods cause different side effects. For example, birth control pills, implants and injections are not recommended for women who smoke or have health complications such as a history of heart disease or breast cancer. Hormonal forms of birth control also have a number of side effects and potential health risks such as vaginal bleeding, headaches, clinical depression, long periods, dizziness and clinical depression. Some men and women are also allergic to latex and spermicide in condoms. In addition, the use of diaphragms and cervical caps can expose women to urinary tract infections.

Disadvantages of Drugs Abuse

Disadvantages: they're illegal. if you get caught you will go to prison as an adult, juvie as a child.
or: you could just die from an accidental overdose.

-Have you seen people who use meth for a couple of years ?

You will age faster(more noticeable)

-Kills brain cells(especially when young)

-If you have family it will worry them (if they care)

-Waste of money

-Psychological side-effects(panic attacks over nothing, fears, emotions etc.)

-Addictions

-Temptation

Genesis 2

2:1 Thus the heavens and the earth were finished, and all the host of them.

2:2 And on the seventh day God ended his work which he had made; and he rested on the seventh day from all his work which he had made.

2:3 And God blessed the seventh day, and sanctified it: because that in it he had rested from all his work which God created and made.

2:4 These are the generations of the heavens and of the earth when they were created, in the day that the LORD God made the earth and the heavens,

2:5 And every plant of the field before it was in the earth, and every herb of the field before it grew: for the LORD God had not caused it to rain upon the earth, and there was not a man to till the ground.

2:6 But there went up a mist from the earth, and watered the whole face of

the ground.

2:7 And the LORD God formed man of the dust of the ground, and breathed into his nostrils the breath of life; and man became a living soul.

2:8 And the LORD God planted a garden eastward in Eden; and there he put the man whom he had formed.

2:9 And out of the ground made the LORD God to grow every tree that is pleasant to the sight, and good for food; the tree of life also in the midst of the garden, and the tree of knowledge of good and evil.

2:10 And a river went out of Eden to water the garden; and from thence it was parted, and became into four heads.

2:11 The name of the first is Pison: that is it which compasseth the whole land of Havilah, where there is gold;

2:12 And the gold of that land is good: there is bdellium and the onyx stone.

2:13 And the name of the second river is Gihon: the same is it that compasseth the whole land of Ethiopia.

2:14 And the name of the third river is Hiddekel: that is it which goeth toward the east of Assyria. And the fourth river is Euphrates.

2:15 And the LORD God took the man, and put him into the garden of Eden to dress it and to keep it.

2:16 And the LORD God commanded the man, saying, Of every tree of the garden thou mayest freely eat:

2:17 But of the tree of the knowledge of good and evil, thou shalt not eat of it: for in the day that thou eatest thereof thou shalt surely die.

2:18 And the LORD God said, It is not good that the man should be alone; I will make him a help mate.

2:19 And out of the ground the LORD God formed every beast of the field, and every fowl of the air; and brought them unto Adam to see what he would call them: and whatsoever Adam called every living creature, that was the name thereof.

2:20 And Adam gave names to all cattle, and to the fowl of the air, and to every beast of the field; but for Adam there was not found an help meet for him.

2:21 And the LORD God caused a deep sleep to fall upon Adam, and he slept: and he took one of his ribs, and closed up the flesh instead thereof;

2:22 And the rib, which the LORD God had taken from man, made he a woman, and brought her unto the man.

2:23 And Adam said, This is now bone of my bones, and flesh of my flesh: she shall be called Woman, because she was taken out of Man.

2:24 Therefore shall a man leave his father and his mother, and shall cleave unto his wife:
and they shall be one flesh.

2:25 And they were both naked, the man and his wife, and were not ashamed.

**In conclusion, Brethren, Let us stop following our own ways but follow God stated from
the Beginning.**

"So Moses brought Israel from the Red sea, and they went out into the wilderness of Shur; and they went three days in the wilderness, and found no water. And when they came to Marah, they could not drink of the waters of Marah, for they were bitter: therefore the name of it was called Marah. And the people murmured against Moses, saying, What shall we drink? And he cried unto the LORD; and the LORD shewed him a tree, which when he had cast into the waters, the waters were made sweet: there he made for them a statute and an ordinance, and there he proved them, And said, If thou wilt diligently hearken to the voice of the LORD thy God, and wilt do that which is right in his sight, and wilt give ear to his commandments, and keep all his statutes, I will put none of these diseases upon thee, which I have brought upon the Egyptians: for I am the LORD that healeth thee."

- Exodus 15:22-26

HEALTHY FOODS AND MEDICINES

Meat – Flesh food acceptable and unacceptable.

Leviticus 11: 2-47, Deuteronomy 14: 3-21, locusts,
Mathew 3:4, Fish Luke 24:42,

Quail - Numbers 11:20, 31-33

Medicinal plants – Vegetation with healing qualities.

Balm – Genesis 43:11

Fig – 2 Kings 20:7

Hyssop – 1 Kings 4:33

Mandrake – Genesis 30:14

Terebinth: - Isaiah 6:13

Medicine – Something prescribed to cure an illness

Balm – Jeremiah 8:22

Bandage – Ezekiel 30:21

Eye Salve – Revelation 3:18
Fig poultice – Isaiah 38:21

Many medicines Jeremiah 46:11
Merry heart proverbs 17:22

Oil – Luke 10:34

Ointment – Isaiah 1:6
Quarantine – Leviticus 13: 4-46
Wine – 1 Timothy 5:23

And he showed me a pure river of water of life, clear as crystal, proceeding out of the throne of God and of the Lamb. In the midst of the street of it, and on either side of the river, was there the tree of life, which bare twelve manner of fruits, and yielded her fruit every month: and the leaves of the tree were for the healing of the nations. And there shall be no more curse: but the throne of God and of the Lamb shall be in it; and his servants shall serve him: And they shall see his face; and his name shall be in their foreheads. And there shall be no night there; and they need no candle, neither light of the sun; for the Lord God giveth them light: and they shall reign for ever and ever.

Revelation 22:1-5



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- # Nairobi HQ.
717777/240000
- # Pangani Flying Squad
3761111
- # J.K.I.A. (KAPU)
823888
- # Mombasa
222121
- # KPA, Mombasa
222811