

August is Gastroparesis Awareness Month. What is gastroparesis? Gastroparesis causes the muscles in your stomach to slow or not work, resulting in your stomach being unable to empty itself correctly and abnormal digestion. Gastroparesis is not very common—out of 100,000 people, about 10 men and 40 women will have gastroparesis. The cause of gastroparesis for any one patient is often not known. There are some conditions that can lead to a diagnosis. As always, reach out to your primary care provider if you are experiencing symptoms of gastroparesis or if your current diagnosis is causing issues.

## Risk factors and symptoms

The cause of gastroparesis for any one patient is often not known, but in general, it is caused by damage to the nerves that control the muscles in the stomach to move food alone. It can be caused by damage to the vagus nerve, but for most of our patients, it is caused by diabetic autonomic neuropathy. Some common risk factors include diabetes, surgery (abdominal or esophageal), underactive thyroid, medications that slow the stomach emptying rate (narcotics), viral infections, nervous system diseases, and scleroderma. In fact, poorly controlled diabetes will cause gastroparesis symptoms to worsen.

Some of the common symptoms of gastroparesis are listed below. Be sure to see your primary care provider if you are experiencing any symptoms that are worrisome for you.

Vomiting	Nausea	Acid reflux	Abdominal pain	Abdominal bloating
Lack of appetite	Feeling full after a few bites	Blood sugar level changes	Poor nutrition	Weight loss

## Complications

**Severe dehydration** can result from ongoing vomiting. **Malnutrition** results from a poor appetite or because your body is unable to absorb the necessary nutrients from food because of the frequent vomiting.

**Undigested food** can harden in the stomach and become trapped in your digestive system. This can cause nausea, vomiting, and even become life-threatening if the mass prevents food from moving into the small intestine. There can be significant **blood sugar level changes** because there is not a steady rate or amount of food moving through the digestive system. Gastroparesis does not cause diabetes, but it can make diabetes worse.

Gastroparesis also has a **negative impact on quality of life**. The symptoms and complications can make daily living a struggle and often limit people’s ability to work or manage daily living needs.

## What can I do?

Treatment begins with a diagnosis and treating the underlying condition.

Proper nutrition is necessary and the most important goal. Your doctor may want you to work with a dietitian to make changes to identify the best foods for you to eat and the best changes to make to your eating habits so that you are getting enough calories and nutrients.

Medications can be prescribed that help stimulate the stomach muscles or control nausea/vomiting. Surgery can be used to place feeding tubes, which are usually temporary. These tend to be used when gastroparesis is severe, or blood sugar levels are not able to be controlled. Surgeons can also place a gastric venting tube to help relieve pressure from what is in your stomach.



# ADDITIONAL INFORMATION

This section of our monthly newsletter will focus on support and resources offered both by the Organ Transplant Center and throughout the nation. Please utilize these as you need them and reach out with any questions.

**Kidney line: 319-356-1136**

**Heart line: 319-356-1028**

**Liver line: 319-356-1137**

**Lung line: 319-356-2016**

## Medicare and Transplant

Medicare eligibility is based on age, disability, having end-stage kidney failure, or receiving a kidney transplant. No other organ transplant or need for organ transplant qualifies one for Medicare. There is a 1-year enrollment window for Medicare from date of kidney transplant. Delaying enrollment can increase chances of higher out-of-pocket expenses for anti-rejection medication. Medicare Advantage plans cover anti-rejection medications, and out-of-pocket expenses are subject to plan.

\* For further questions or coverage changes, please contact the Organ Transplant Center financial counselors.

## Video Resources

The Organ Transplant Center has put together videos to better explain the transplant evaluation process and provide additional patient education. Please click the links below to access these videos.

- [Kidney Transplant – Patient Education Videos](#)
- [Liver Transplant – Patient Education Videos](#)
- [Pancreas Transplant – Patient Education Videos](#)

## Organ Transplant Support Group

Starting in February 2024, the Organ Transplant Center will begin having our support group every other month. The support group will also be a hybrid version—both in-person and by Zoom. Each group will be focused on a specific topic, with speakers followed by time for discussion. If you have any questions, please contact 319-467-8385.

**Location:**

Iowa Donor Network  
550 Madison Avenue  
North Liberty, IA 52317

**Date:**

August 8, 2024  
Speaker: Panel of  
transplant recipients

**Zoom Information:**

Meeting ID: 980 4393 7778  
Passcode: 247128

**Save The Date:** Our next support group will be on October 10. Meeting ID and passcode to come!

## Additional Resources

Social Security Disability

- [Adult Disability Starter Kit](#)
- [SSI Child Disability Starter Kit](#)

National Living Donor Assistance Center (NLDAC):  
[How to Apply](#)

Iowa Anatomical Gift Fund: [Application](#)

Iowa Donor Network / Writing Your Donor Family:  
<https://www.iowadonornetwork.org/transplant-recipients/writing-your-donor-family>