# The Life of an ARPKD Boy

William Garrott, age 15 Carolyn Garrott, PharmD

### The Garrott Family

Matt Carrie William Matthew

Picture May 2021



#### My Background

- Graduated with PharmD in 2005 from Ohio Northern University
- Started career at Walgreens

- Had no special training in nephrology or pediatrics
- Did help with jargon, logistics
- Struck a balance health care professional vs parent

#### The Prenatal Era

- Due May 7th, 2010
- OB appointment April 21st, at 38 weeks
- No amniotic fluid on bedside ultrasound
- 2 hour ultrasound with MFM
  - Bright, echogenic kidneys
  - Was asked if I had taken ACE-inhibitors
- Admission to hospital and induced on Wednesday afternoon
- Assumption was fetal kidney disease
- NICU and pediatric nephrology brought in



### Friday, April 23rd, early afternoon

- Fetal bradycardia led to emergency C-Section
- William immediately taken to NICU
- Placed on ventilator and oscillator
  - Pulmonary hypoplasia (underdeveloped lungs)
  - pneumothorax
- Imaging studies done
  - Echogenic kidney
- Advice from the NICU attending: "Cherish the time you have with him."
- Preliminary diagnosis of ARPKD



### Autosomal Recessive Polycystic Kidney Disease (ARPKD)

https://pkdcure.org/about-the-disease/arpkd/

- Combination kidney disease and Congenital Hepatic Fibrosis
  - o All have varying degree of kidney and hepatic disease
- Nearly 80% of children with ARPKD survive the newborn stage.
- About one-third of these children may need a transplant or dialysis within the first
  10 years
- Just 20 years ago, only half the children with this disease lived to see their 10th birthday.
- Today, more than 90% of children who survive the newborn period reach their 20th birthday, and half of them still haven't needed dialysis or a transplant.

### Autosomal Recessive Polycystic Kidney Disease (ARPKD)

#### Prenatal ARPKD

#### Symptoms

- Diminished amniotic fluid levels
- Enlarged kidneys
- Lung underdevelopment
- Lung functioning issues

#### Post-Birth ARPKD

#### **Symptoms**

- Enlarged kidneys
- Breathing problems
- Excessive urine production
- Hypertension
- Growth problems
- Congenital hepatic fibrosis
- Enlarged spleen
- Low red and white blood cell count
- Low platelet counts

#### Genetics

- Autosomal recessive disease
  - Need 2 copies of affected gene
- Genetic testing done
  - Dad has PKHD1 variation
  - I have a "VOUS" at same location on gene

#### **NICU Era**

- Stabilized
- Started urinating
  - Almost had PD catheter placed
  - Saved by observant NICU nurse
- Spent 10 days in NICU proper
  - Removed his own chest tube
  - Started taking bottle
- 20 Days in Step Down Unit
  - Main focus learning how to eat
    - Similac PM 60/40
- Discharged home 5/20/2010

#### Infant Era

#### Now What?

- Same issues as everyone else PLUS
- Feeding issues
  - Volume issues due to large kidneys
  - Calories vs volume
  - Keeping potassium and phosphorus low
    - SPS
    - Renvela
- Hypertension
  - o Blood pressure monitoring at home on an infant
- Navigating child care and back to work

### Working Mother Era

Why keep working?

- Income
- Insurance
- Professional fulfillment
- Break from home routine / get out of the house
- Working 30 hour week
  - FMLA leave when necessary
- Overnight shifts
- Mom guilt

#### Surgery Era

- June 2010
  - G-Tube Placement
  - Overnight tube feeding plus boluses during day
    - Loved to pull those out
    - Learned how to replace ourselves
- August 2010
  - Single nephrectomy
  - Broviac catheter insertion
  - Hydrocele repair
  - Peritoneal Dialysis Catheter insertion
    - 14-day hospital stay to manage leaking
- November 2010
  - Hydrocele / hernia re-repair

#### Pre-Dialysis Era

#### December 2010

- Admitted with fever on December 4th
  - Fever + PD catheter = automatic admission
- High fever, feeding problems, oxygen requirement
- Could not pinpoint source of infection
- Decision to remove remaining kidney
  - Will have to start dialysis
  - Required 2 surgeries to revise PD catheter
  - PD education
- Discharge home 1/5/2011



#### Peritoneal Dialysis Era

- 14 hours of treatment daily, plus daily dwell time
- Flowsheets with daily calls to PD nurse
  - Prescription changed nightly
- Weekly visits to PD clinic
- Twice weekly blood draws
  - IV access
- Daily care, weekly dressing changes
- Medicaid WAIVER program
  - Full time nursing care
- Hospital stay June 2011
  - High fever with sepsis
  - Klebsiella Oxytoca
- Pulled out his Broviac catheter at an appointment
  - Mediport placement

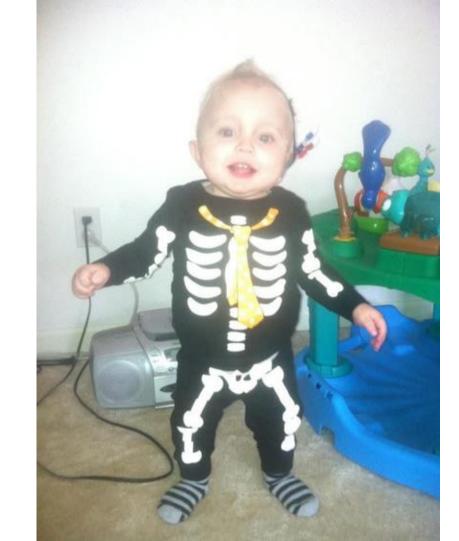
#### Peritoneal Dialysis Era, continued

- Developmental delays became more noticeable
- Traditional Day Care no longer an option
- Walked at 19 months, crawled later
- Help Me Grow services
- Occupational, speech, and physical therapy services
  - o In home
- Feeding Disorders Clinic
  - Intensive feeding therapy

#### Hemodialysis Era

- PD site infections
- Remove PD cath, insert 2 neck catheters
- Four days per week, four hours per session
  - No dedicated pediatric HD; HD staff was NOT accustomed to infants
- IV antibiotics
- Ripped out one night
  - Emergency surgery to replace
  - Also put in new PD cath
- During this time, also reached the minimum weight required for listing on transplant list (12kg)
  - Immediately placed on, then off the active wait list



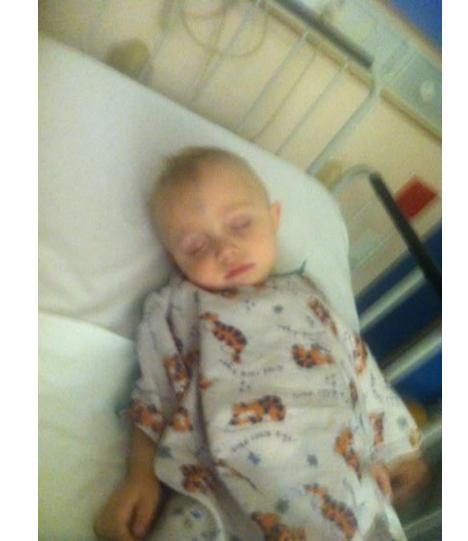


#### Pre-Transplant Era

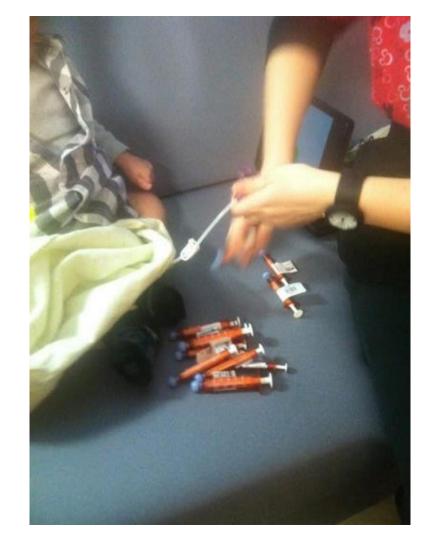
- On deceased donor list
- Also worked up living donor
  - Living donor process
- Received several "almosts," "back up to the back up" calls
- Primary nephrologist, Dr David Kenagy, to leave UH
  - Last day was Monday, April 30th at 5pm

#### Transplant Day

- Phone call Tuesday, May 1st, shortly after midnight
- Hospital at about 3am, last minute blood tests
  - Dialysis cut off early
- Transplant surgery at noon
- Surgery was several hours
- Admission to PICU
- 6-day hospital stay









#### Post-Transplant Era

- Eventual PD cath removal
- Gradual move to quarterly clinic visits
- Monthly lab draws
- Developmental Delays
- Help Me Grow
- LEAPS
- IEP

#### Post-Transplant Era

- Autism diagnosis
  - Related to kidney disease?
- Time to grow family
  - William finally stable
  - Chance to live "normally"
  - IVF with PGD
  - CVS testing

### Specialists

- Nephrology
- Gastroenterology (Hepatology)
  - Congenital Hepatic Fibrosis
  - o Semi-annual ultrasounds, fibroscan
  - Annual endoscopy
- Developmental
  - Autism, ADHD, anxiety
  - Neuropsych testing
- Surgery
  - 0 17
- ENT
  - o Tubes, adenoids, tonsils
- Psychology
- Cardiology
  - Dilated aortic root
  - Annual echo

## Part 2

William Garrott, Kidney Transplant Recipient Age 15, Transplant 5.1.12 From Avon Lake, Ohio

### I Do Not Remember Anything Pre-Transplant

- But I do remember a few things:
- Watching movies while on Dialysis
- Nene watching me every day.
- Only ONE Hospital stay, I remember that it was in 2011.

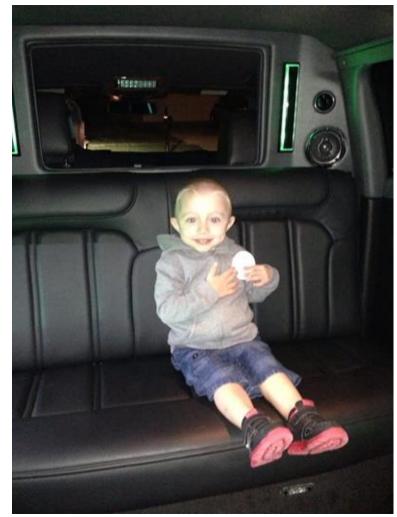
#### Ages 2-5 Era

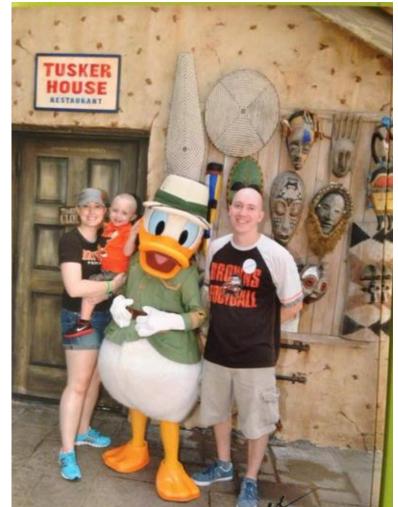
Transplant: I remember opening my eyes when I was being wheeled back for the big surgery, and then I went back to sleep, and didn't wake up until it was all over.

- Make-A-Wish trip in 2013
  - Disney World
  - Universal Studios
  - Give Kids the World Village



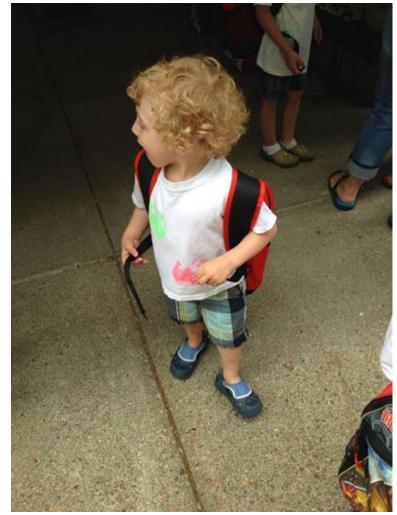




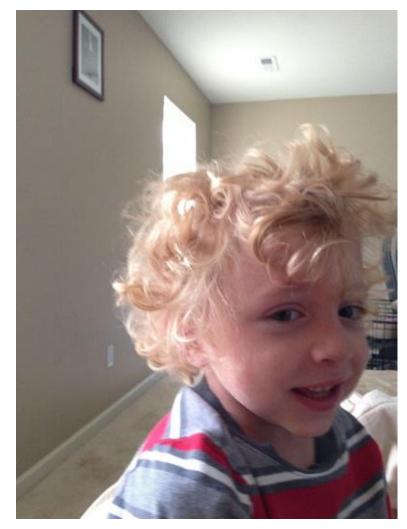


### Age 2-5 Era, continued

- Ear tube surgeries
  - Lifelong fear of the anaesthesia mask
- Started LEAPS preschool
  - Local school district preschool program
  - Start of IEP
- My at-home nurse Nene
- Started getting in-lab blood draws done
  - o EMLA cream
- Had 2 cats and one dog
  - o Ben, Jerry, and Reese





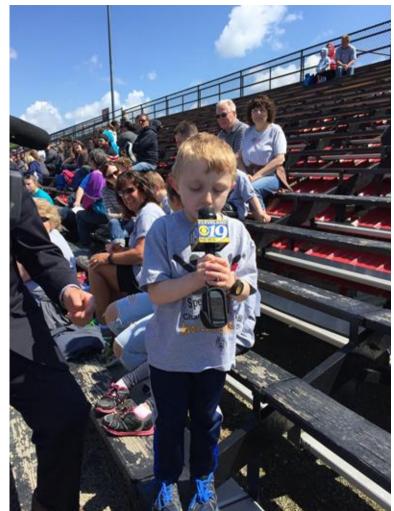




## Elementary School Era

- Started Westview Elementary in 2015
  - On IEP, not attending "neighborhood school"
  - No major restrictions
    - Unlimited access to water and restrooms
    - Regular phys ed, recess, just no contact sports
  - Spent 80-90% of school day in normal classroom
  - Rest of time spent with intervention specialists
    - Mrs Harlan and Mrs Slivinski
    - Mrs Patrella
    - Speech and occupational therapies as well
  - Special Olympics
    - Track and field day
  - Transition off of IEP and into "gen pop"





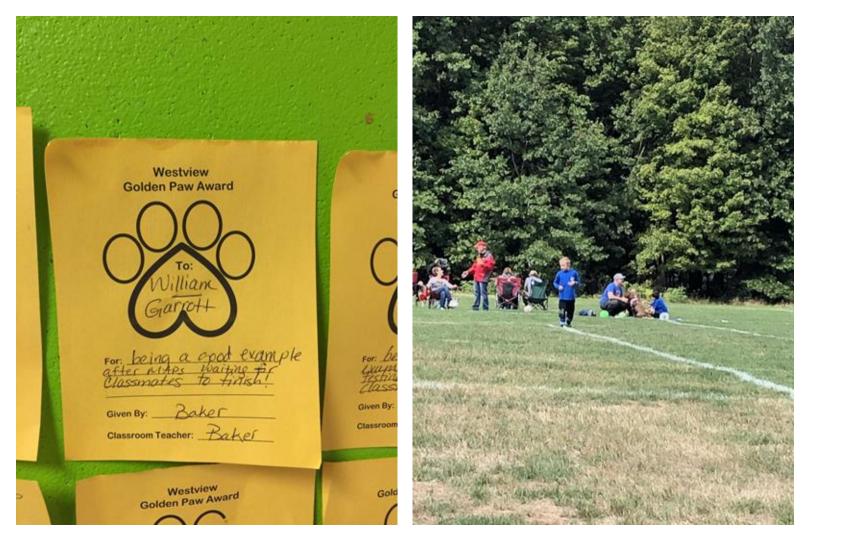




# Elementary School Era, continued

- Dances
- Activity Nights
- Awards
- Soccer
- Kids on the Move
- Young Rembrandts





### PKD Walk Era

- Annual walks to raise money for PKD Foundation
- Have raised thousands of dollars for the foundation









#### The COVID Era

- End of fourth grade into Middle School
- Sent to ER at the end of March 2020 with high fever
  - Negative COVID test and discharge home
- Remote learning
- Transition to middle school was less than ideal

#### Middle School Era Era

- Started playing drums / percussion
- Taking Spanish
- Jazz band
- Washington DC Trip
- Marching Band Helper

#### Travel

- Disney World
- Maryland
- Florida
- Deep Creek, Md
- Kansas

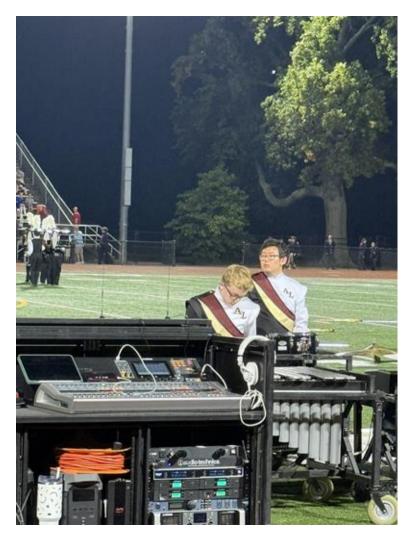
## High School Era

- 504 plan for medical needs
  - Access to water
  - Restroom breaks
  - Other accommodations specifically tailored to autism / ADHD
- Kidney disease not detrimental to learning
- Can't participate in contact sports
- Otherwise a normal HS experience

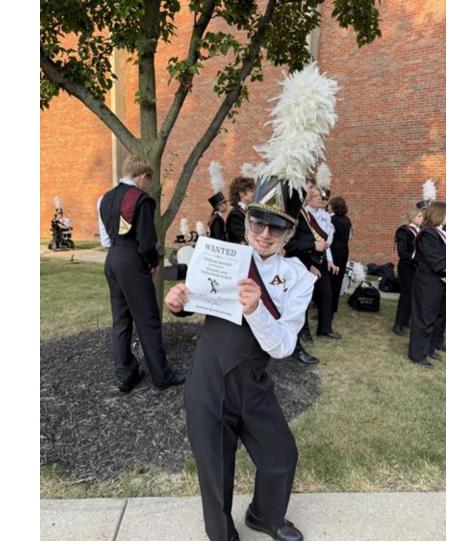
# Marching Band Era











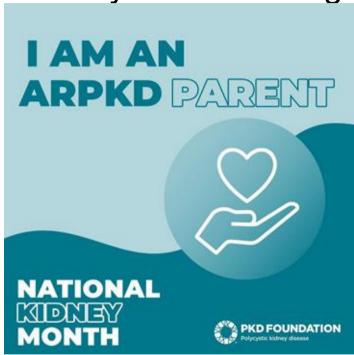
## Daily, monthly, quarterly routines

- Daily water intake
- Meds three times daily
- Daily exercise
- Monthly lab draws
- Nephrology every 3-4 months
- GI every 6 months
  - Ultrasounds and endoscopy yearly
- Cardiology with echo annually
- Yearly vaccinations
- Importance of developing good relationships with care team

### Current Med List, November 2025

- Prograf 4mg BID
- Azathioprine 75mg QD
- Propranolol 10mg BID
- Amlodipine 7.5mg QD
- Ursodiol 125mg TID
- Escitalopram 10mg QD
- Ferrex 150mg QD
- Vitamin C 500mg QD
- Metadate 20mg QD
- Probiotic QD
- Magnesium 500mg QD
- Multivitamin with Vitamin D QD

Thank you for listening!



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# Time for Q&A



#### Links and contact info

https://my.clevelandclinic.org/patient-stories/627-pediatric-kidney-transplant-patient-is-thriving-10-years-later

https://www.nxtbook.com/nxtbooks/pkdlife/pkdlife\_2022summer/index.php

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