Waiting For ‘A Good Neshama’

A Manhattan philanthropist awaits a kidney donation. For his renowned doctor (he performed Alonzo Mourning transplant), it’s become a personal crusade.

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What do you do when your body declares war on you?

You’re young, with a family and a successful career, and your kidneys fail and you wait seven years for a transplant, and it fails too. You’re in pain most of the time. You’re on a waiting list again, you pay for the best medical care available, but money can’t buy a kidney and you’re depending on the kindness of strangers.

“This is my life,” Stuart Zimmer says. He’s a hedge fund manager in Manhattan, a philanthropist. He spends several hours each week hooked up to a dialysis machine because some friends have offered to donate a kidney, but theirs aren’t compatible with his body.

All Zimmer, 35, can do is continue the dialysis. And keep waiting for a new kidney.

So Zimmer’s physician, Dr. Gerald Appel, director of clinical nephrology at Columbia Presbyterian Medical Center, has taken Zimmer’s fate into his own hands. Coordinator of the hospital’s kidney transplant unit, he started making informal appeals the other day, through e-mail messages and letters and conversations in his circle of friends, for a donor. He’s done the same for other patients.

“Stuart” — who coincidentally grew up in the same Mamaroneck apartment building as the doctor a few decades ago — “is a very dear patient,” Appel says. “All of my patients are dear.”

Appel’s efforts, including a notice he sent to this newspaper, point out the difficulty that people with kidney disease, and their caregivers, face. The odds of a kidney transplant from a living donor succeeding are better than those when the organ comes from a recently deceased body, but the odds of getting one in time are worse. Few people are willing to part with a kidney, although a body needs only one.

While the number of transplants for a kidney, which filters the body’s blood, ranks second to corneal transplants in this country,
more are needed. Dialysis, the treatment of choice for most people with kidney disease since the 1960s, can keep a patient alive — and healthy — only so long. About half of the people waiting for a kidney transplant die.

Appel, at Columbia Presbyterian for 30 years, has directed part of his appeal for a donor for Zimmer to the Jewish community. It’s more likely that a compatible donor can be found in Zimmer’s ethnic group, Ashkenazi Jews, but fewer matching factors, such as antigen proteins, are required for a successful transplant. In other words, a stranger can donate a kidney. (For information, call Columbia Presbyterian at [212] 305-6393.)

“We have [unrelated] friends who donate all the time, and it works,” Appel says.

The reactions he has encountered in the Jewish community reflect a continuing reluctance to consider donating an organ. Many Jews continue to believe that Jewish law forbids — or strongly discourages — a person from donating part of their body.

“There’s still a lot of knee-jerk reactions,” says Robby Berman, director of the Halachic Organ Donor Society (www.hods.org). The 2-year-old organization, on which several prominent authorities on Jewish law serve as advisors, spreads information about the issue and encourages members to become card-carrying members who can “donate organs in accordance with their particular halachic belief.”

“There is such a need” for organ donors, Berman says, citing other people, like Appel, who have publicized the need for donors in individual cases.

“Even dialysis is not a panacea,” Berman says. “At least it’s a Band-Aid,” keeping a patient alive until a donor kidney can be found.

“Organ donation,” the aish.com Web site states, “is permitted in the case when an organ is needed for a specific, immediate transplant. In such a case, it is a great mitzvah for a Jew to donate organs to save another person’s life.”

Appel, an expert in his field who made the news last month for heading the team that cared for basketball star Alonzo Mourning, says “many thousands [of his patients] who didn’t get kidneys” have died over the years.

A month after his surgery, Mourning appears on the road to recovery.

And Appel is using the response to the athlete’s plight — some 500 people across the United States expressed an interest in donating a kidney — to help Zimmer and other current patients.

“It’s easier to get a donor for a celebrity, the doctor says. “Absolutely.”

Kidney transplant surgery carries no more risks for the donor than for any other surgery, he says, adding that government medical insurance covers all costs. “The pain is minimal.”

“The operation is easier than all other major organ transplants,” according to the National Institutes of Health’s health information Web site.

Zimmer, whose kidneys were “destroyed” seven years ago by a drug he took for another medical condition, underwent a kidney transplant last June; he had controlled his symptoms, he says, through a regimen of medication, dialysis and “sheer willpower.”

“One of the amazing things about Stuart is his adaptability, willpower and optimism,” says his wife, Jennifer. “The doctors told him in 1996 when first presented with renal failure that he would need dialysis or transplant within a year. With a very rigid low-protein, low-sodium, low-potassium diet, he was able to avoid that fate for seven years.”

Last summer, his disease became end stage.

The transplant started to fail within three weeks.

Back to dialysis, three days a week, four hours a day.

“It’s brutal,” he says. “I get intense migraine headaches. I get dangerous hypertension. I’m at tremendous risk for stroke.” A former high school and college athlete, he tires easily and his muscles ache. He’s lost bone mass and 40 pounds, and has low resistance to infections. “I’m really suffering with it.”

This month he is switching from hospital-based hemodialysis to peritoneal dialysis, which is less taxing on the body but more time intensive — ten hours every day.

Zimmer’s prognosis without a transplant?

“I don’t know,” he says. His eyes tear. “I’m a young guy with little kids,” a son and a daughter. “I want to be there for my family.”

Zimmer, a protégé of investor-philanthropist Michael Steinhardt, works in a suite in Lower Manhattan overlooking New York Harbor. On his desk, across from a bank of monitors flashing the latest stock market figures, is a baseball cap bearing the words “Life is great.” It’s a gift from a client.

“This is very humbling,” he says.

He can’t ask people to give him a kidney. “It’s an awkward thing.

“I need altruism. I need a good neshama to come forward and say ‘I’d like to help you.’ ”

And he can’t buy a kidney. He waits, like anyone else on the national list.

A multimillionaire, Zimmer has supported many worthy causes, including a Jewish day school he is building in his father’s memory in Basking Ridge, N.J.

Now, he says, he would gladly trade his riches. “I’d rather be healthy than wealthy.”