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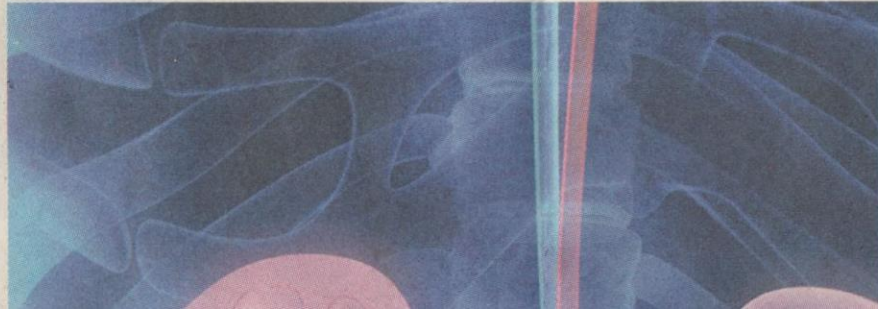
Facts *on* chronic kidney disease

> Nephrology specialist Dr Wong Mun Hoe answers pertinent questions on this condition and what we can do to keep the organs healthy

BY S. INDRA SATHIABALAN

EARLIER this year, I lost an uncle to chronic kidney disease (CKD), a condition in which a person suffers a gradual loss of kidney function over time.

My uncle was a vibrant self-made man who made the most of his life, before kidney failure (related to his diabetes) resulted



cannot deny that there are risks (surgical, anaesthetic, rejection of donor kidney, infection, etc).

“However, the long-term benefits outweigh these risks as the patients have the opportunity to live a normal life.

“Safety is of paramount importance. Recipients of kidney transplant and donors are carefully evaluated to reduce the risks.

“Kidney transplants are offered in government hospitals as well as some private hospitals.”

in agonising regular dialysis sessions that he hated. However, it was not enough to save him.

Like me, there are many people out there who have lost a loved one to CKD, or perhaps know of someone who is suffering from this disease.

The public should be aware that the number of cases of CKD has been on a rise in Malaysia. According to the 22nd Report of the Malaysian Dialysis and Transplant Register (2014), there has been over 100% increase in the number of new dialysis patients in Malaysia over the past 10 years.

At the end of 2015, nearly 40,000 Malaysians required regular dialysis, with 90% of them requiring haemodialysis treatment three times a week.

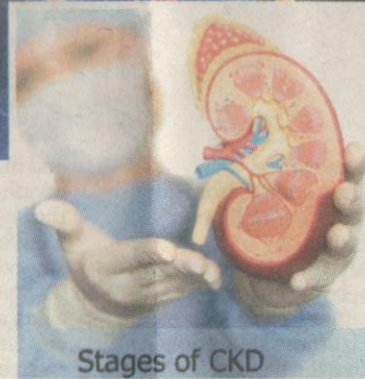
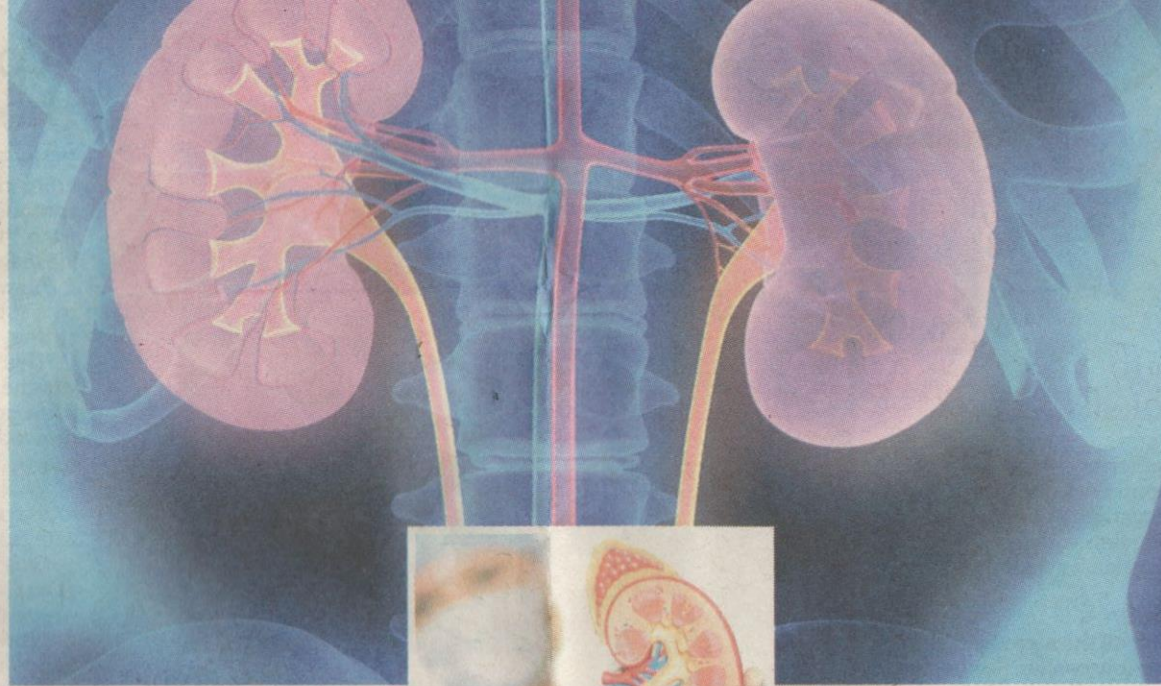
Nephrology specialist Dr Wong Mun Hoe (top right, inset) from Pantai Hospital Klang, who is also a certified member of the Renal Board (Malaysia), sheds some light on this serious medical condition during an email interview.

What are the common causes of CKD? Who are the people at risk?

“According to the Malaysian Dialysis and Transplant Registry (MDTR), the most common cause of kidney failure among patients who are on dialysis is diabetes mellitus. This is followed by hypertension.

“Other causes include kidney stones, glomerulonephritis (acute inflammation of the kidney, typically caused by an immune response), polycystic kidney disease (numerous cysts growing in the kidneys), and drugs.

“People who are at risk of CKD include the elderly (above 65 years), and those with diabetes



mellitus and hypertension.”

What are the symptoms we should be looking for?

“Unfortunately, only kidney failure at its most severe form will present with symptoms.

“These include poor appetite, nausea, vomiting, difficulty breathing, leg swelling (usually both legs), and [fatigue].

“Most patients do not usually have these symptoms in early stages of CKD.”

Is CKD reversible?

“The term, chronic kidney disease, denotes that this is a long-term problem and not reversible.

“CKD is classified into five stages - one being mild, and five being severe - and will require renal replacement therapy.”

Do genetics play a part?

“Polycystic kidney disease (PKD), as a cause of CKD, has a genetic predisposition. Diagnosis is made using a specific criteria.

“The nephrologist will usually screen family members if one of them is found to have this condition.”

It is said that those undergoing haemodialysis generally are living on borrowed time. Is this true, and if so, why?

“I would say the patients who

undergo haemodialysis are given a second chance at life.

“Not everyone is suitable for haemodialysis, and the nephrologist has to evaluate each patient individually to determine the most suitable modality for renal replacement therapy (haemodialysis, peritoneal dialysis, kidney transplant or conservative therapy).

“Besides extending the life of an individual, we also take into account the quality of life of the patient after the initiation of dialysis.”

How safe is a kidney transplant?

“Kidney transplant is the best option for renal replacement therapy, and provides best long-term survival.

“Malaysia has been performing kidney transplants since 1975. One

Do products sold in the market* to detox the body add strain to our kidneys?

“If you ask any nephrologist, there is no such thing as a drug/product/supplement that can cure or reverse kidney failure.

“It is sad that people take advantage of those with CKD by offering them an alternative hope which is deceiving and futile.

“Kidneys age with time, and chronic diseases such as diabetes and hypertension or non-prescription/prescription drugs can accelerate this process.

“Some of these unregulated compounds contain heavy metals, colouring, and preservatives which are harmful to the kidney and are not commonly tested until an adverse event has been reported.

“Common prescriptive drugs such as non-steroidal inflammatory drugs (NSAIDs) can also contribute to kidney damage.”

What can we do to keep our kidneys functioning in a healthy manner?

“It is important to identify people who are at risk of kidney failure.

“Those aged above 65 years, have underlying diabetes mellitus, hypertension, or family history of kidney disease should be screened on a regular basis.

“Early treatment of CKD ensures longer survival of the kidneys.

“Avoid taking unnecessary supplements and abuse of NSAIDs.

“For those who are well, the general principles of healthy living including drinking plenty of water, a balanced diet and regular exercise will ensure that your kidneys continue to function in a healthy manner.”