

# Living with dialysis

Every year, more than 3,000 Malaysians are diagnosed with end-stage kidney failure and have to go for dialysis. Today, over 15,000 Malaysians are on dialysis. This is expected to reach 20,000 by 2010.

**L**IFE is not easy for wheel-chair bound Sellamah Sinakanu, 68, who has to depend on people like her grandson to take time off work to take her to the dialysis centre. She has end-stage kidney failure.

"I nearly could not get dialysis because my 85-year-old husband is not working and we've no money. I'm able to live longer now thanks to the support from National Kidney Foundation of Malaysia (NKF)," Sellamah said.

Dialysis has now given her a second chance to live, as she would have died without it.

Lim Ah Chai, 58, was forced to give up his 13-year-old son to his brother when his wife passed away. Six months later, Lim, diagnosed with end-stage kidney disease, had to go for dialysis in order to survive. With no job, he has to depend on NKF for dialysis.

"Dialysis keeps me alive and well so I can continue to lead a normal life. There are days when I feel very sad but my friends will tell me to look on the bright side as my new home is NKF and everyone here is kind to me," says Lim with a smile.

Today with new friends, he has much to look forward to. He hopes to meet his son one day.

It is estimated that the number of dialysis patients worldwide will increase by 7% per annum.

This may seem alarming but it is living with dialysis that is really devastating. When the shock of the diagnosis subsides, the patient has to adapt to a different way of life.

With impending death constantly on the mind, he or she has to depend on a machine to stay alive, thinking that any day, this too will not be of any use. Although among



Dialysis patient Sellamah Sinakanu, 68, seen here with her grandson.

friends and family, the patient will still feel isolated and a burden to the family. Depression will be a constant companion.

Apart from emotional upheaval, the patient has to go through physical agony. The person will have less energy and needs to make changes in work and home life.

There will be a number of activities and responsibilities which he or she will not be able to perform as much as before. Certain parts of the body may bloat a bit due to oedema (fluid retention), which may be relieved only after dialysis.

## What is dialysis?

When we consume food, our body takes what is needed for energy and self-repair, sending waste products to the blood. These waste products, together with the normal breakdown by-products of active tissues, are filtered in our kidneys by tiny units called nephrons.

Here, a complicated chemical exchange will take place, resulting in waste materials and water leaving our body via the urinary system.

»We need corporations and individuals to step up and show that they care«

DR SS GILL

So, when our nephrons are damaged, they lose their filtering capacity.

Dialysis treatment does some of the work of damaged kidneys, which includes the normal functions of removing excess water and waste products from the blood and restoring electrolyte levels.

Dialysis is the only treatment option available other than kidney transplantation for failed kidneys.

## Types of dialysis

There are two types of dialysis treatment, namely haemodialysis and peritoneal dialysis.

In haemodialysis, you will need to have a procedure to enable tubes to be inserted into your arm to send blood to a filter that removes waste products, which will return clean blood to your body.

Haemodialysis is done three times per week in a dialysis centre.

For peritoneal dialysis, a catheter tube is placed in your abdomen and fluid is put into your abdomen. This fluid will collect waste products from your blood.

After a few hours, the fluid which now contains your body's wastes is drained away and replaced with fresh new fluids in the abdomen. This dialysis can be done by the patients themselves at the comfort of their own homes about four to

six times a day.

## Effects of damaged kidneys

"When the kidneys are damaged, it is no longer effective in performing important functions such as regulating blood pressure and red blood cell production. Therefore, patients with end-stage kidney failure must still watch their diet and fluid intake," says NKF Vice-Chairman Prof Datuk Dr Zaki Morad Mohamad Zaher.

He adds: "Nevertheless, there are still risks and side effects to dialysis and it is important for patients to report these."

Side effects include sleep disorder, dry skin, cramps, nausea, vomiting, headaches, infections, bleeding from the access point of the tube for dialysis and sudden drop in blood pressure (hypotension) due to stress to the cardiovascular system.

After five years of dialysis, patients may contract dialysis-related amyloidosis (DRA), when protein from the blood is deposited onto the joints and tendons.

A dialysis patient may also contract hepatitis B due to their blood being exposed during the dialysis.

A condition known as anaemia, due to a reduced level of the hormone erythropoietin (EPO), which stimulates the bone marrow to produce red blood cells, may also occur.

To assist patients with these two conditions, NKF provides hepatitis B vaccination at cost and EPO medication for those who qualify free of charge to initiate the treatment and at cost subsequently.

## Costly treatment

A patient has to go for dialysis three times per week, which means about 13 times per month. Each dialysis costs around RM250 at private hospitals. This will amount to about RM3,250 per month.

NKF patients who qualify for subsidy need only pay RM50 per treat-

ment, amounting to RM650 per month. The remaining cost is borne by the Ministry of Health Malaysia and NKF.

NKF currently has 20 dialysis centres and more than 1,000 dialysis patients to support nationwide. NKF spends an estimated total of RM3.5 million annually in dialysis treatment alone, not including other costs involved in providing medication and social welfare support for the needy kidney patients.

"NKF spends a lot on subsidies for dialysis and our commitment grows with the increasing number of new patients who come to us every year. Clearly, we depend heavily on sponsorships and donations to fund our work. We need corporations and individuals to step up and show that they care," says Dr SS Gill, Chairman of the Board of Managers of NKF.

"In order for us to avoid end-stage kidney failure and dialysis as well as the side effects relating to the disease, we should ensure a healthy lifestyle - healthy eating, exercising and maintaining a healthy body weight.

"We should not think that just because there is dialysis if our kidneys failed, we could wait until that stage. By then, it will be too late.

"NKF under its Kidney Care programme aims to educate the people on the importance of their kidneys," says Dr Goh Bak Leong, consultant nephrologist and Member of the NKF Board of Managers.

■ This article is courtesy of NKF KIDNEY CARE, a community education programme by National Kidney Foundation of Malaysia. NKF provides subsidised dialysis treatments and free medications, laboratory tests, follow-ups and welfare assistance to NKF patients besides ongoing public education initiatives. NKF welcomes public donations to support its work. For more details, please contact NKF Hotline: 1300-88-3110, Website: www.nkf.org.my.



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