

EC PHARMACOLOGY AND TOXICOLOGY

Opinion

The Increasing Frequency of Hemodialysis in Pakistan

Fazal ur Rehman Khilji, Fahad Saleem* and Nafees Ahmad

Faculty of Pharmacy and Health Sciences, University of Balochistan, Quetta, Pakistan

*Corresponding Author: Fahad Saleem, Faculty of Pharmacy and Health Sciences, University of Balochistan, Quetta, Pakistan.

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Pakistan is one of the largest and most populous countries of the South Asian region. The burden of non-communicable disease (NCDs) has increased in recent years and it is estimated that over 40% of all deaths are due to NCDs in the country. In terms of healthcare delivery, Pakistan is a developing country with a deprived healthcare system. Among multiple concerns, a great apprehension for the healthcare system today is the increased frequency of NCDs including chronic kidney disease or end-stage kidney disease thus resulting in an increase of hemodialysis recipients in recent years. In Pakistan, around 20 million people are suffering from kidney diseases and nearly 16,000 new cases of kidney failure are registered [1,2]. Furthermore, 40-50 percent of the patients are not surgically fit for transplantation, while only 15 percent donate their kidneys to relatives [2]. This ultimately results in the increased frequency of hemodialysis across the country as there is no other treatment option available for kidney patients in Pakistan.

The underline cause of this increased frequency of hemodialysis is still not taken into consideration seriously. In Pakistan, majority of the population suffering from any disease prefer religious, mythical and complementary and alternative therapies. Additionally, approaching a quake is also a common practice. This goes same for kidney related issues whereby patients opt for medical pluralism before consulting a qualified physician. Even at the healthcare institutes, patients consult general practitioners and physicians who lack experience in managing kidney diseases. Such patients are treated on empirical therapies and physical signs and symptoms. Only when the conditions worsen, the patients then approaches the nephrologist but have already progressed to the advanced stage of kidney disease leading to End Stage Renal Disease in majority of the cases whereby kidney transplant or hemodialysis is left as the only option for the nephrologist and the patients. Consequently, this imposes a huge financial, economical and societal burden on the deprived healthcare system.

According to our observation, poor disease related knowledge among the patients, sub optimal performance of the healthcare system and lack of early referral results in the increased frequency of renal diseases including hemodialysis. It is high time that immediate actions are needed to address this critical issue in Pakistan. General practitioners and physicians should recommend initial renal function tests and echocardiography to such patients presenting early signs and symptoms of renal complications. Immediate referral to a nephrologist is also recommended in case of any diagnostic changes. On the other hand, patients and their families should be encouraged to approach a nephrologist in case of complications, and we believe this can be aided by providing community based education towards renal diseases.

Disclosure

We do not have any conflict of interest to disclose.

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