

Nephrologist's Opinion Regarding COVID-19 Pandemic

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In the recent outbreak of Coronavirus disease 2019 (COVID-19), the role of physician is critical in order to treat COVID-19 patients in particular and to take care of the routine patients in general. A nephrologist has to deal with the immunocompromised state of the patients all the time and in this regard, considering the pandemic, there are guidelines and protocols shared by authentic societies which are of great help in to treat the patient with kidney disease.

The COVID-19 pandemic presents various challenges to health care systems around the world. Several initiatives focused on virus transmission may affect ongoing care of people with pre-existing health conditions, especially in resource-constrained settings.

Most people with renal failure need to receive treatment at dialysis centers every 2-3 days. Strict lockdowns impose limitations on public and private transport that normally support travel for people who often live at significant distances from treatment centers. In addition, interruptions in supply chains, and increased demand, have led to shortages of Personal Protective Equipment (PPE) for dialysis center staff, placing these health care workers at risk. Shortages of medications and consumables necessary for dialysis treatment also create obstacles to care for people with kidney failure.

Staff placed in quarantine when a patient or healthcare worker has the infection may limit the ability of some centers to offer dialysis. Many facilities are struggling to provide the required health workforce, and the burden of finding an alternative facility often falls on patients. Initial data have shown that about 20-30% of patients hospitalized with COVID-19 develop kidney failure, leading to a surge in requirement for dialysis. Yet regular dialysis services have been interrupted to prepare hospitals to provide optimum care to COVID-19 patients.

"Hospitals need to be prepared to enhance dialysis capacity in order to provide effective care to patients with COVID-19 and stringent measures should be adopted to protect the frail dialysis population from COVID-19 infection," said Professor Carmine Zoccali, President of the European Renal Association-European Dialysis and Transplant Association.

"Interruption of this life-saving treatment is a certain death sentence for patients on dialysis. Making them collateral damage to this pandemic would be a tragedy," observed Professor Anupam Agarwal, President of the American Society of Nephrology. "The COVID-19 pandemic is exposing the deficiencies in healthcare delivery, especially in countries with weak health systems.

Worldwide healthcare community and policy makers should anticipate and address the unique needs of different patient groups such as those with kidney failure," said Professor Vivekanand Jha, President of the International Society of Nephrology.¹

On behalf of these three societies, we ask that government agencies overseeing dialysis centers in

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the developing world ensure that they provide support to staff, nephrologists, and other health professionals delivering life-saving dialysis treatments to these vulnerable patients. At the same time, government agencies must make rapid testing capabilities and personal protective equipment an utmost priority.

CONFLICT OF INTEREST

None to declare.

REFERENCE

1. Joint statement from ASN, ERA-EDTA, ISN: Ensuring optimal care for people with kidney diseases during the COVID-19 pandemic. 2020. Available online at https://www.theisn.org/images/Statement_ASN_ERA-EDTA_ISN.pdf. [Last accessed on May 15, 2020]

FINANCIAL DISCLOSURE

None to disclose.

The author is a Nephrologist (MBBS; FCPS Nephrology), working currently as Senior Registrar Nephrology, at Armed Forces Hospital Khamis Mushayt, Kingdom of Saudia Arabia. He has a keen interest in dialysis, transplant nephrology and immunology, chronic kidney disease, and evidence-based medicine with interest in updates of infectious diseases that has compelled him to share this information with the readers.