OFFICIAL NEWSLETTER OF THE PHILIPPINE SOCIETY OF NEPHROLOGY

Dialysis Advocay GROUP

HELEN T. OCDOL, MD, FPCP, FPSN

Dr. Helen Ocdol was appointed by the Board of Trustees to head the PSN Dialysis Advocacy Group, which will spearhead all efforts of the PSN pertaining to legislation and health policies affecting the practice of hemodialysis and peritoneal dialysis in the Philippines. Here, Dr. Ocdol writes on the comprehensive renal replacement therapy bill to be proposed in Congress and the Senate.

VOLUME 14 ISSUE 1

The Comprehensive Renal Replacement Therapy Act is a bill being proposed to provide a comprehensive renal replacement therapy (RRT) for patients with ESRD in the national, regional and provincial government hospitals. It encompasses the increase in the Phil-Health package rate for renal replacement therapy of its members and therefore the government appropriating funds for its fruition.

The proposed bill consolidates the "Dialysis Services and Benefit Act" providing dialysis services in the national, regional and provincial hospitals and establishment of kidney transplant centers in government hospitals that is strategically located in different areas of the country.

Dr. Roberto Tanchanco attended the first hearing on the creation of dialysis units in government hospitals in Congress by the Committee on Health chaired by Dr. Angelina Tan last May 10, 2017. Dr. Noel Castillo, on the other hand, attended the technical working group meeting on the substitute bill which now includes the establishment of KT centers last November 22, 2017. Drs. Roberto Tanchanco, Elizabeth Roasa and Helen Ocdol attended the Senate hearing to present the PSN position on the creation of dialysis units in government hospitals. Senator JV Ejercito, who chairs the Committee on Health has invited us back to the next hearing. The position papers of PSN on both bills have been disseminated to all the members of Congress.

To summarize, the proposed bill mandates the establishment, operation and maintenance of dialysis units in the national, regional and provincial hospitals including stand-alone dialysis units partly or wholly operated and maintained by a government hospital. It also mandates that KT centers be made available in strategic areas of the country. The same hospitals and dialysis facilities are also mandated to train nephrologists, dialysis nurses, dialysis technicians and operating room nurses in both dialysis modalities and KT.

All identified ESRD patients will be sent to a government hospital for orientation on the different renal replacement therapy. The proposed bill provides that for the treatment of ESRD patients, the order of preference is kidney transplantation (KT), peritoneal dialysis (in resonance with the PD first policy) and hemodialysis. Kidney transplantation must be offered in the first 2 years of treatment.

The proposed bill also mandates the creation of a deceased donor program to cater to patients without living related donor. For chronic kidney disease(CKD) patients, a CKD prevention program which includes counseling and education clinics will be set up together with their access to laboratory and medications will be provided by the government.

All these government hospitals shall comply with the DOH and PhilHealth requirements for the establishment of such units. All dialysis and transplant units shall be monitored with regards to its safety and quality standards by both institutions (DOH and PhilHealth, specifically the Facilities and Hospital Regulatory Board).

The DOH, in coordination with DOLE, TESDA, DSWD and other pertinent agencies, shall establish a comprehensive rehabilitation program for KT patients for them to reach their full potential in life.

Reimbursement from PhilHealth will cover both the hospital cost for dialysis (dialysis costs: 3 exchanges of PD/day for a year and 90 HD sessions/annum) and professional fees. PCSO will cover the remaining cost for both PD and HD. Reimbursement for KT by PhilHealth will include pre-transplant work-up for both donor and recipient, hospitalization for the transplant operation inclu-

Image: Non-angle of the state of the st

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Expert Champions for Kidney Health



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<u>2 broadcast</u>

For the past six years, the PSN Mindanao Chapter has been going around Mindanao to provide lectures to non-nephrologists, be it doctors, nurses, or barangay health workers, regarding basic renal health. This activity of the Chapter aims to provide additional knowledge especially at the grassroots level and to the front-liners of renal health. It includes recognition of simple renal conditions, basic renal management and the recognition of a need for referral. This has also been an avenue for the Chapter to conduct its Annual General Assembly, to strengthen its camaraderie and an opportunity for the nephrologists of Mindanao to visit the beautiful cities in the region. In the past, such lectures have been conducted in Tandag City, Surigao del Sur, General Santos City, Zamboanga City, Davao City and Cagayan de Oro City.

In celebration of the World Kidney day, the PSN Mindanao Chapter decided to conduct its celebration in the Municipality of Luna in Siargao last March 17, 2018. It was chosen because of the scarcity of nephrologist in the area, thus educating the residents on renal health will be of greatest benefit to the region. It is also one of the best spot to enjoy each other's company.



RODELIE A. BANICO, MD, FPCP, FPSN

The WKD Celebration started off with the Opening Remarks by the Chapter President, Dr. Jeanette Ybiernas followed by a message from the Municipal Mayor of General Luna, Hon. Jaime P. Rusillon who was very gracious in welcoming us to his town. In keeping up with the WKD Theme "Kidneys and Women's Health", relevant lectures were delivered by Dr. Deanna Rae Libarios who spoke about "Women and Kidney Function", Dr. Andrea Loise Licuan discussed "Lupus Nephropathy, Chronic Kidney Disease and Women" and Dr. Floravil Mabras talked about "Kidney Diseases and Pregnancy". Lastly, Dr. Roselle Manuel of Zamboanga City imparted her knowledge on "Renal Health in the Pediatric Population". Additional activities included screening for FBS, total cholesterol and dipstick urinalysis; and of course, a WKD celebration will not be complete without the obligatory Zumba



dance workout led by local high school students. Dr. Philip Neri Lazo, Vice President of the Chapter gave the Closing Remarks. The activity was a success as it was attended by the barangay health workers, staff of the Rural Health Unit, elementary and high school teachers, senior citizens, and residents.

Last March 16, 2018, the Chapter also conducted its yearly General Assembly, updating its members of the accomplishments of the Chapter as well as future plans including the venue of the Chapter's next activities.



From page 1, PSN Forms Dialysis Advocacy Group

ding immunosuppression and other medications required during the hospital stay and post-discharge laboratories up to one month for the recipient and up to one year for the donor. PCSO will provide immunosuppression for the patient's lifetime as long as there is no rejection. For the KT Z-package, immunosuppression will be provided for a year and the patient may reapply yearly thereafter. No balance billing remains applicable for all indigent patients.

The DOH, NKTI and the PSN shall provide training for personnel (nephrologists, physicians-on-duty for hemodialysis centers, hemodialysis and peritoneal dialysis nurses, hemodialysis and peritoneal dialysis technicians, operating room nurses, transplant ward nurses, transplant coordinators) and nonmedical barangay health workers to support home-based peritoneal dialysis. The NKTI shall accredit the centers that can provide training which include hands-on workshops for dialysis.

The Philippine Renal Disease Registry will collect data on the incidence of CKD, dialysis and kidney transplantation. Compliance to reporting will be a requirement for re-issuing of the facility license. Each government facility will also collate data on the incidence and progression of CKD of their patients.

Indeed, this proposed bill is comprehensive from CKD prevention, counseling, renal replacement therapy to rehabilitation of CKD patients in government hospitals, training of health care providers, licensing, reimbursements and data collection. The PSN Board of Trustees is cognizant of the fact that we, as a Society, should be vigilant of bills or laws that may affect the delivery of care to our patients. This was the main reason why the Board decided to create a new committee on advocacy specifically to address the concerns on dialysis issues. There is a sense that having a permanent group to keep track on these issues will not be affected with the changes that come when the new Board of Trustees assumes their positions heading different clusters every year.

The PSN is happy about the prioritization of KIDNEY HEALTH for all but the Society must also remain vigilant so that we can properly guide the institution of a safe, appropriate and equitable renal care for all.

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BROADCAST 3

Message FROMTHE PRESIDENT ROBERTO C. TANCHANCO, MD, MBA, FPCP, FPSN



"To curb the rising incidence and burden of kidney disease in the Philippines" – this is the short version of the mission statement of our Society that served as a mantra for the Board as it tackled the journey of the last year, the 47th year of existence of the PSN. It was, I would say, a full year, a year where it may be said with honesty and candor, there was "so much to do, and so little time."

We started the year, as we have done for the last several years, with a strategic planning workshop, during which we decided that we would focus on two particular building blocks of the WHO Health Systems Framework – building the renal health workforce, and improving information and research in the field of nephrology – and prioritizing the goal of improving renal health in terms of level of care and equity.



We also made the rounds of all the chapters from Northern Luzon to Mindanao, sharing the outputs of the strategic planning workshop and soliciting the thoughts of each chapter. To this end, the various clusters and committees of the PSN, and the chapters, embarked on their chosen priority projects to contribute to this shared mission. To pursue the building of the renal health workforce, under the stewardship of the cluster head of Internal Affairs, our Vice President Dr. Helen Ocdol, the Adult Specialty Board under its new Chair, Dr. Vonn Velasco, continued its work and passed 33 out of 40 exam takers in 2017, while the Pediatric Specialty Board under Dr. Norma Zamora passed 3 out of 3 pediatric nephrologists. The CME Committee under Dr. Mar Lim conducted seven fora, all well-attended. Our Board Secretary, Dr. Beth Roasa, worked tirelessly towards the end of continuing our status as a Collective Member Society of the International Society of Nephrology, but this will require the strong support of all members.

The Cluster on Quality Assurance under Dr. Noel Castillo continued its work in promoting the practice of dialysis, with the Committee on Hemodialysis under Dr. Ric Francisco conducting its various postgraduate courses for medical directors, physicians-on-duty (for both nephrologists and non-nephrologists), dialysis nurses and dialysis technicians; and with the Committee on Peritoneal Dialysis under Dr. Rose Bisquera launching its PD Summit to promote the practice of peritoneal dialysis across the country. Meanwhile, the Committee on Kidney Transplantation continued its dissemination of the Deceased Organ Donor Module, targeting internal medicine residents, to propagate awareness among internists of deceased organ donation and bolster our transplantation efforts by addressing the organ donor shortage. However, recognizing that there is also a "recipient shortage", the Committee saw it fit as well to remind ourselves that kidney transplantation is the treatment of choice for endstage renal disease.

To pursue the improvement of information and research in the field of nephrology, the Research Board under Dr. Ronnie Perez and assisted by the Committee Head Dr. Reina Lynn Antonio, conducted the research fora for fellows-in-training. and also continued the work in conducting research on the long-term outcomes of patients on hemodialysis. Also, the Committee on Hemodialysis, with the assistance of the Asia Pacific Center for Evidence-Based Healthcare, embarked on the process of developing a Hemodialysis Clinical Practice Guidelines for the Philippines, a landmark effort that will hopefully enable more ESRD patients to derive the benefits of this life-saving modality in a cost-effective and equitable manner. Under the guidance of Board Cluster Head Dr. Ginger Samonte, the CME Committee of Dr. Mar Lim also embarked on an audacious effort to launch a manual on CKD nutrition that our members can share with our patients to help them with this difficult but crucial aspect of CKD treatment.

The ultimate end in mind, with all these efforts, is to help improve the level of renal health in the population and to improve equity in renal health. To this end, each chapter made their own contributions, including launching community partnerships, information cam-

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ADAPTATION COMMITTEE

MARISSA ELIZABETH L. LIM, MD, FPCP, FPSN

The last five years have been a period of growth for the Continuing Medical Education Committee. The pride of the Committee was the development of the In-Service Examination for the Nephrology Fellows-in-Training. We had the most number of examinees this year at 85.

The In-Service Examination aims to better prepare the fellows-in-training for private practice by enhancing their theoretical knowledge in nephrology. It has evolved from a written format to an electronic type of examination. The examinations are now conducted electronically, online.

In preparation, all the members of this Committee underwent a test construction seminar under Dr. Nenita Collantes. A half day session on test construction and test critiquing was held at the Philippine Society of Nephrology Office.

After this training, the Committee had

paigns on nutraceuticals with no ap-

proved therapeutic claims, modules on

chronic kidney disease for non-nephro-

logists and promoting renal nurse prac-

titioner and renal dietitian training

programs in their localities. The PSN also

participated in hearings at the House of

Representatives and the Senate on

issues of renal health, particularly, on

bills being discussed that seek to provide

dialysis services for free to indigent pa-

tients seen in government hospitals and

on bills that seek to promote organ

donation and transplantation, with the

PSN weighing in on ensuring that

potential living donors from vulnerable

populations, particularly the poor, are

not exploited. We have formed a Dialysis

Advocacy Group, headed by Dr. Helen

Ocdol, our Vice President-elect, to be

ever vigilant for developments and lead

the efforts of PSN in taking the best

course of action that helps achieve our

From page 3, Message from the President.



monthly meetings to construct and critique each others questions. An initial run of the online examinations was done at three testing centers: Chong Hua Hospital, National Kidney & Transplant Institute and University of Sto. Tomas. The half-day examination was successfully operational at the NKTI and the Chong Hua Hospital but technical glitches were noted at UST that led to the pen and paper examination format for the 50 fellows-in-training in that institution. The Committee patiently encoded their answers with rechecking by several parties at UST and was submitted for scantron checking at the UPCM. Data analyses were then done. We are currently preparing the protocol for the preparation of the written examination and the mock exams for the years to



mission and vision.

What I have learned and what I have seen, in my short stint at the helm of our beloved Society, is that we do not have a shortage of people who have the passion to pursue our mission, the capacity to accomplish it and the perseverance to overcome the difficulties ahead. I am filled with gladness and gratitude to be part of such a society. Our future might be strewn with challenges, but the out-





come.

The Committee also acknowledges the role of feedback in the learning of our fellows-in-training thus is looking for the conduct of this activity.

The Continuing Medical Education Committee is led by Dr. Marissa Elizabeth L. Limguided by our very consistent and dedicated adviser Dr. Nenita Collantes. Online examination will not be possible without the help of the Chair of the Information Technology - Dr. William Gregory Rivero. The Committee continues to welcome new members who have the passion for education and is adaptable to the needs of the times.

look is bright, and I am filled with optimism.

The year also passed with three of our members not being with us anymore – Dr. Antonio Talusan, one of our founding members and a past president, and Dr. Arlene Muñoz and Dr. Winston Felix Quebec, who both left us too young and too soon. We remember them in our prayers, and we honor them with a moment of silence; we honor them as well by continuing the work that they pursued in their life on earth, serving humanity with our expertise in the science and art of nephrology.

We who remain must continue our journey. We all have our own tasks ahead of us, and commitments we made that we declared, some just to ourselves and some to others. We all have, in the words of a beloved poet, our promises to keep and miles to go before we sleep. •

Palawan never fails to conjure up images of nature and the environment, after all, it is supposed to be the Philippines' "last ecological frontier". So when PSN Southern Tagalog Chapter received official word that it was hosting the 2017 PSN Midyear Convention, there was no other 'natural' choice but to hold it in Puerto Princesa, Palawan... with a theme that could not have been more resonant and tailor-fit: GREEN NEPHROLOGY: <u>Physicians as St</u>ewards of <u>N</u>ature.

To everyone's realization, turns out there is indeed a worldwide movement espousing sustainable nephrology practice, with Great Britain and Australia as its strongest proponents. Through the Convention's scientific program, it was revealed how the practice of nephrology, particularly dialysis, can be extremely wasteful and disproportionately contributory to the earth's carbon footprint. Various never-beforeheard concepts about Green Nephrology were presented. It was certainly a huge eye-opener for everyone, and soon



EDGARDO F. FAUSTINO, MD, FPCP, FPSN

enough, most of those present were already talking ways and means to make their dialysis practices more ecofriendly. If only for that, the Convention had achieved its primary objective, and it's only the beginning.

The Convention also tackled other interesting environment-related topics such as Mesoamerican nephropathy, occupational and toxic nephropathies, "disaster nephrology" and the epidemiological aspects of CKD.

As with every Midyear Convention, the Palawan event provided another wonderful opportunity for the PSN membership to bond and fully enjoy one another's company. Besides wallowing in Palawan's natural wonders, those who were fortunate enough to be there simply loved being there. The camaraderie was contagious! The Grand Fellowship Night was especially exhilarating! The fun...the music...the PSN spirit all reverberated into the night as if there was no tomorrow! To say that everyone had a great time is an understatement.

But more than anything else, the Midyear Convention effectively opened PSN's eyes to the many intriguing, yet practical and potentially beneficial aspects of Green Nephrology. For its part, PSN Southern Tagalog Chapter has taken a very strong stance on Green Nephrology and has vowed to actively advocate and promote its practice in the region.

SN SOUTHERN TAGALOG CHAPTER

EDGARDO F. FAUSTINO, MD, FPCP, FPSN

PSN Southern Tagalog Chapter recently embarked on a major organizational maneuver to chart and direct its course for the next 5-10 years. It had been almost a decade since its inception as a Chapter, and with its member base now expanded to 70, everyone agreed it was time to re-visit the original vision and mission crafted in 2009.

Under the leadership of Chapter President Joseph Accede, the officers conducted a preliminary strategic planning workshop last January 27, 2018 at the Unilab Bayanihan Complex in Pasig City. In attendance were Drs. G. Diaz, J. Ty, E. Faustino, C. Punzalan, A. Escobin, T. Reynera, R. Valenzona, D. Reyes, J. Monzon, F. Vergara, E. Basilan, M. Roxas, E. Bernaldo and P. Villena.

At the said forum, the vision and mission

of the Chapter were thoroughly reviewed to gauge its continued relevance to the times. The overall consensus was to incorporate the concept of Green Nephrology into the Chapter's identity, it being an advocacy strongly espoused by and identified with the Chapter since the 2017 PSN Midyear Convention.

It also provided an opportunity to restudy the organizational structure of the Chapter, with the primary objective of engaging the membership into more active involvement and participation in the Chapter's activities. This resulted in the formation of more committees with well-defined functions and responsibilities.

More importantly, through the workshop, the Chapter was able to effectively chart a "course of progress" for the next 5 years, based on its renewed vision and



mission. Among its plans is to actively venture into preventive nephrology down to the grassroots level, particularly in the area of Chronic Kidney Disease. Also in the horizon is a move to actively promote and cultivate a culture of Green Nephrology" in the region not only among the nephrologists but also among the dialysis facilities and patients. The Chapter will likewise explore and facilitate the establishment of hospital-based multidisciplinary Renal Wellness Clinics in the region which will tackle the various aspects of the prevention and treatment of kidney disease.

The above resolutions were further discussed, refined and consolidated in a concluding workshop held February 2, 2018 in Ho Chi Minh City, Vietnam, and will be presented to the general membership for ratification on February 28, 2018.

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EDITORIAL AGNES ALARILLA-ALBA, MD, FPPS, FPSN, FPNSP

The challenge these days is to equip nephrologists not only with knowledge and skills but also with the value and compassion of giving equity in the distribution of resources among Filipinos. The medical challenges faced by low-to-middle income population are numerous. This subset of population is often disproportionately affected by a high burden of renal disease owing to a variety of factors including environmental exposures, malnutrition and unhealthy behavior and is exacerbated by a lack of resources and access to care. This multifactorial burden is apparent because of the dynamics associated with poverty, such as low birth weight and exposure to infectious agents that are coupled with the often prohibitive costs associated with dialysis and transplantation. It is very timely therefore that there are numerous bills at the Senate and at the House of Representatives (House Bills 621, 2466, 3924, 4391, 5503, 5914, and 6526; House Resolutions Number 224 and 1048 and Senate Bills 1505, 1507, 1329) that have been proposed to provide holistic engagements in renal care. The government is planning to provide support to our patients from the initiation, treatment and even mental and psychological support.

Prioritization of appropriate and ideal care for ESRD/CKD is to offer first renal transplantation and then renal replace-

ment therapy. Between peritoneal dialysis and hemodialysis, peritoneal dialysis is offered first because of less capitalization and its provision of homecare unlike hemodialysis that is center related. However as stated in the PSN statement - there are increasing number of hemodialysis center. It is therefore the obligation of our Society to safeguard the delivery of high standard of care. We believe that the government wants to give provisions for the Filipino people BUT we have to ensure the safety of every renal patient. It is not the number of hemodialysis center that was set up that ensures adequacy but the quality of the health care delivered from the appropriate prescriptions given by a nephrologist to the people who man and understands the intricacies of having a hemodialysis center. It is complicated which spans from quality of water delivery and the expertise of the staff to handle medical emergency situations and post HD care. Equity is not only for the patient but for the nephrologist as well. Services rendered by a nephrologist, whether private or public, should be appropriately compensated. We appreciate the PSN's vigilance but it should be relentless to protect not only the patients but the integrity of each and every nephrologist and its role played in the holistic aspect of renal care.



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Vote **YES**

TO THE PROPOSAL TO MAKE ALL PSN DIPLOMATES AND FELLOWS AUTOMATICALLY ISN MEMBERS!



<u>BROADCAST 7</u>

APRIL 2018



World Kidney Day is a preventive nephrology initiative which aims to educate people from all walks of life to take care of their kidneys. As we weave the curriculum for medical education to be relevant for future medical practice, we became so engrossed with anatomy and physiology as well as the different disease conditions manifesting with renal signs and symptoms, that we forget preventing renal diseases and recognizing renal disorders to halt disease progression. It is one chunk of knowledge that we should arm our students in the classroom.

Making classroom instruction relevant in this era of outcome-based education is a challenge for us teachers delivering relevant education both in the classroom and the different training programs we handle in the hospital and the clinical setting. Aligning curriculum which is both relevant and in consonance with the times demands a dynamic mode of instruction which allows students to explore concepts and prepare materials and activities which for them is meaningful and relevant. This opportunity gives them the privilege to own their learning.

When the celebration of World Kidney Day 2018 happened to fall on the schedule of the genito-urinary block in

Making THE Classroom More Relevant FOR Kidney Health

LYNETTE FILLONE- ALCALA, MD, MSEd, FPPS, FPSN, FPNSP



the College, we challenged the students to make this learning more relevant and worthwhile. We empowered them to learn from the experience. Searching relevant concepts in the website and through team effort, the third year medical students were challenged to prepare an activity to celebrate World Kidney Day with the theme - "Kidneys & Women's Health: Include, Value and Empower". With very minimal supervision, they were able to prepare a program to celebrate this global initiative. The activity started with a short program highlighting the theme for this year's celebration and with the president of the local chapter giving the inspirational message for the students. A Zumba party followed with all the students participating in the activity with the local chapter members joining them. They also prepared a freedom wall to sign in commitment to such an initiative accepting the challenge for everyone to be kidney warriors in the campaign for renal health. The students, likewise, prepared pamphlets to be distributed

around the campus with blood pressure monitoring station and a urinalysis dipstick screening booth for anybody in the university campus to avail of.

It was indeed a fruitful morning for the faculty and students to gather for kidney health. Capped with photoshoots and friendly interactions among kidney specialists and students as well as the administrative staff of the college the experience did not only remind us that empowering students for learning is the way to go in this era of outcome-based education.





BROADCAST 9



MARVIN C. CALLANTA, MD, FPPS, FPSN, FPNSP

Panghi: masangsang na amoy ng ihi Panghimagas: pamutat o panghuling pagkain upang matanggal ang suya

Pag mahirap, hampas lupa, Pag mayaman, hampas tiles?

Nakahuli ako ng tipaklong, Kaso maliit lang. Tipakshort?

> Yung Puregold, green Yung Brownies, black!

Pantalon pero pinanglalakad! Asan ang hustisya!

Yung lemon square, bilog. Yung boxing ring, square. Weird noh?

Pag manloloko, sineseryoso. Pag seryoso, niloloko. Mas weird noh?

Paano mangumusta ang mga taga Laguna? Musta na? Okay Calamba?

Ano mangyayari sa iyo kapag di mo kabisado Bulacan? Malamang Malolos ka!

Ano sinabi ni Rizal nang huliin ng mga guwadiya civil? Naholi me tangene!!!\$%#@&!!!

Maganda daw ang paglangoy sa pigura, Musta naman kaya mga balyena?

Bakit nilalangaw ang ebak? Kasi walang takip!

Ano gagawin mo para mawala Cebu sa Pilipinas? Gamitan mo lang ng Joy!

Saan lumiliko ang mga spaceship? Sa Saturn!



PNSP Focuses on the Essentials of Pediatric Fluid & Electrolytes

MARIA LORNA LOURDES L. SIMANGAN, MD, FPPS, FPSN, FPNSP

Just done with the 4th Teaching Course Module 1 last March 18 at Angeles University Foundation, we are now simultaneously working on our 5th Teaching Course Module 2 this July at the Ateneo School of Medicine and Public Health and our 6th Teaching Course Module 3 in November which will be held at the UERMMMC.

PNSP is so blessed to be supported by the International Pediatric Nephrology Association (IPNA) to finally embark on our long-time goal which is to bring back the basics on fluid and electrolyte management and to give an update on the management of specific electrolyte disorders in children. This program was launched last November 2016 upon completion of our Module 1 on Sodium, Water, Acid-Base and Potassium Balance which was a concerted effort of all our pediatric nephrologist nationwide. This course had its first re-run last July 2017. Module 2 featured Neonatal Fluid and Electrolyte Management and this was a collaboration with some of our distinguished neonatologists which was initially shared last November 2017.

The 3rd upcoming module will emphasize Potassium, Calcium, Magnesium and Phosphorus Regulation and this will be in partnership with pediatric gastroenterologists and endocrinologists.

This undertaking did not only allow physicians to better appreciate the physiology behind pediatric fluid and electrolytes but also empowered them to plan a rational approach whenever faced with fluid and electrolyte disorders. For us pediatric nephrologists, this program further strengthened our solidarity as we continue to keep on reaching out to our colleagues all over the country with open consultations with other subspecialties.

We enjoin everyone to support us in this endeavor! •



10 BROADCAST

REFOCUSING: Interventional Nephrology

AILENE R. BUELVA-MARTIN, MD, FPCP, FPSN

Interventional nephrology is a relatively new subspecialty of nephrology worldwide. It mainly deals with the following procedures:

- Ultrasonography of kidneys and ultrasound-guided renal biopsy
- Insertion of peritoneal dialysis catheters
- Insertion of temporary and tunneled dialysis catheters
- Percutaneous endovascular procedures performed to manage dysfunction of arteriovenous fistulas or grafts.

The aforementioned procedures have slowly been delegated to other subspecialties. The International Society of Nephrology (ISN) has taken notice of this 'loss' of nephrology procedures previously performed by nephrologists. It was in the year 2004 that ISN created the Interventional Nephrology Committee to address issues and promote interventional nephrology to improve quality of patient care. Refocusing in interventional nephrology has proven its benefits to the renal patients by avoiding delays in management and its cost effectiveness.

The American Society of Diagnostic and Interventional Nephrology was only founded in the year 2000. Asian countries followed suit: Japanese Society for Dialysis Access and the Korean Society of Nephrology organized the first Dialysis Access Symposium in 2015. In 2017, the Asian Pacific Society of Dialysis Access was established to further continue educational programs focusing in the Asia-Pacific Region.

How far along are we in Interventional Nephrology? Indeed, the journey of a thousand miles begins with a single step.

The following nephrologists have trained in interventional and diagnostic nephrology:

- Ramon Jose Suarez, MD Trained in Diagnostic Nephrology at Emory University School of Medicine and Health Care Systems, USA in 2012 and trained in interventional nephrology (based on direct mentoring and observership with different institutions).
- Joy Mallari-De Lara, MD Trained in Diagnostic Nephrology at Emory University School of Medicine and Health Care Systems, USA in 2014 and Vascular Access Insertion at Australian Institute of Ultrasound in 2015.
- Frederick Ogbac, MD Trained in Interventional Nephrology at St. Mary's Hospital, Seoul, South Korea in 2015.
- Coe Dela Sena, MD Trained in Interventional Nephrology at St. Mary's Hospital, Seoul, South Korea in 2016.

The Philippine Society of Nephrology currently has no database on this subspecialty. If you have trained under this subspecialty, please contact the Society to be included. There is a need to increase the interest in this field here in the Philippines, especially in the farflung areas where there is still shortage of doctors. Having an interventional nephrologist in the staff may be life saving and truly cost effective.



Last December 3, 2017, the PSN Central Luzon Chapter's 3rd Post-Graduate Course entitled "Dialysis ETC... (Everything That Counts)" was held at Kingsborough International Convention Center in San Fernando, Pampanga. More than 500 nurses, physicians-on-duty and nephrologists attended the whole day event to update their knowledge on the various facets of care for hemodialysis patients.

Speakers shared their expertise from hemodialysis access by Dra. Hilda Sagayaga, a TCVS from National Kidney and Transplant Institute to comprehensive pre- and post-HD assessment by our current PSN National President Dr. Roberto Tanchanco. The faculty also boasts of members in our Chapter, discussing cost-beneficial laboratory testing by Dra. Agnes Estrella and hemodiafiltration by one of our past presidents, Dr. Ramon Jose Suarez. Other topics were



MARIA LORNA YAP-WONG, MD, FPCP, FPSN

PSN-Bicol consists of six provinces with corresponding number of nephrologist: Camarines Norte (1), Camarines Sur (4), Albay (5), Sorsogon (4), Catanduanes (0) and Masbate (1). With 15 nephrologists on board, the Bicol Chapter was created last January 31, 2016 under the term of Dr. Gina Nazareth. We envision to be a chapter that upholds the highest ethical, moral and social standards in providing excellent renal care. Its mission is to create sustainable programs thru partnership with public and private sectors, promote research in renal and related diseases, camaraderie and professional support among its member. The hemodialysis centers now total 25 and more are coming - CamNorte (1), CamSur (11), Albay (7), Sorsogon (4), Masbate (1) and Catanduanes (1).

Since its conception, PSN-Bicol partners with various institutions for its different activities like the celebration of World Kidney Day and the National Kidney

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ROMMEL P. BATACLAN, MD, FPCP, FPSN

infection control (Dr. Anne Margaret Ang), pregnancy in CKD (Dr. Josephine Valdez) and disaster preparedness (Dr. Russell Villanueva). The program was interactive and ample time was given for open-forum to enhance discussions.

Overall, it was a successful event given the short time of preparation. Hats-off particularly to the Chapter Officers; Chairperson of the Scientific Committee, Dr. Agnes Estrella for the preparation of the program; and to Dr. Alejandro Sese for the venue arrangements. Other members also contributed in making this event possible.

As of press time, the Chapter will also hold its 6th Nephro Quiz Bee, to coincide



with the World Kidney Day at the Subic Bay Pointe Hospital, Olongapo City. This is an annual event where we invite PCP Accredited Training Institutions in Central Luzon to test their wits and knowledge about kidney diseases. The Chapter will continue to prepare programs that will impart timely information on proper kidney health among the different sectors in Central Luzon.



Month. We partner with DOH-Region V. Bicol University College of Medicine, **Bicol Regional Training and Teaching** Hospital (BRTTH), DepEd, the media and the different organizations like Albay Medical Society and the different Bicol chapters of the medical organizations like PCP, POGS, PPS, PUA, PAFP and even with religious and civic societies. This is to be able to spread our message to as many people as possible. Together with the Bicol University College of Medicine, we take the opportunity to do a mini-research on the KAP (knowledge, attitude and practices) of selected students and teachers in selected schools. PSN-Bicol (Dr. Lorna Yap-Wong) together with Dr. Gil Ludovici of BU College of Medicine now is on its follow-up survey for the upcoming World Kidney Day activity.

Initially, we called a meeting with stakeholders and gave them a lecture on the theme of the WKD and provided them with lecture materials that were provided to us by PSN-National. They were the ones who organized the different activities in their areas and if they needed physicians to give the lecture, we provided them a lecturer from PSN-Bicol or other physicians in our area. We also asked the medical residents and even the medical students who were in their community immersion program to give lectures in their respective communities.

The PSN-Bicol joined hands with PSN-National in the Disaster Preparedness Program like the clamp and cap procedure in different dialysis centers as well as the earthquake drill.

We hope to be true to our motto: "Together we can do it, together we can do more, together we can prevent kidney disease". We align with the mother society - The PSN National and we move forward to provide better renal health for all.



ANTHONY RUSSELL T. VILLANUEVA, MD, FPCP, FPSN

Chronic Kidney Disease (CKD) is a rising concern in public health, both locally and internationally. This leads to adverse outcomes of kidney failure and premature death. Based on the data of the Department of Health, kidney diseases remain to be in the top 10 causes of mortality among Filipinos.

Internationally, CKD has afflicted close to 200 million women and it is currently the 8th leading cause of death in women. According to some studies, CKD is more likely to develop in women compared with men, with an average 14% prevalence in women and 12% in men. However, the number of women on dialysis is lower than the number of men. This has been attributed to three major reasons: progression of CKD is slower in women, socioeconomic barriers such as lower disease awareness lead to late or no start of dialysis among women and uneven access to healthcare.

This year, World Kidney Day and the International Women's Day 2018 are celebrated on the same day, paving the way for us to reflect on the importance of women's health. The international community renal healthcare providers, through the International Society of Nephrology, would want to promote affordable and equitable access to health education, healthcare and prevention for kidney diseases for all womeninthe world

The National Kidney and Transplant Institute (2018 host), along with the different nephrology centers in the country, led the celebration of World Kidney Day 2018 with the theme "Kidneys and Women's Health: Include, Value and Empower". The World Kidney Day celebrations was opened by PSN President Dr. Roberto Tanchanco at the NKTI Atrium. He stressed the importance of monitoring women who are at risk of kidney disease such as those who are pregnant and those suffering from lupus. He shared also the statistics on the growing number of women undergoing renal replacement therapy. An interactive program followed which was participated by female nephrologists of the NKTI and patients who suffered

from chronic kidney disease. The patients shared their personal journey on how they have battled their disease and successfully overcome the adversities of their illness

The host led a number of activities to commemorate the day, such as lay fora, free medical consultation and yoga session. A WKD Fun Run at the Quezon Memorial Circle was held last March 11 with more than 200 runners participating in the event, which aimed to raise awareness on kidney diseases and provide a venue to promote a healthy lifestyle for all.



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