

Official News Magazine of the Philippine Society of Nephrology

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Together with PSN Unity in Renewal

Contents

- 3 Editorial By: Maria Eliza R. Navarro, MD
- 4 Feliz Dia Mundial del Riñon na Zamboanga! World Kidney Day 2025 By: Margarita S. Abalon-Trinidad, MD and Abu Baddiri, MD
- 12 World Kidney Day 2025 Celebration
- **20** A Year of Going Green and Raising Red By: Aubrey Andales-Severo, MD
- 22 Update: Committee on Advocacy PSN Joins "Safer Together: Strengthening Families Against Exploitation" By: Aubrey Andales-Severo, MD and Marissa Mamate, MD
- 24 PSN Hemodialysis Committee Accomplishment Report Fiscal Year 2024-2025 By: Jeffrey Mora, MD
- **26 Update: Committee on Peritoneal Dialysis** *By: Nicetas Corazon Reyes, MD*
- **27 Update Committee on Research** *By: Alyce Gail Arejola-Tan, MD*
- 28 Makati Medical Center's Nephrology Section Launches Atlas of Urinoscopy during World Kidney Day Celebration By: Beryl Anne Louise P. Tan, MD and Josierina Y. Sarmiento-Veloso, MD, FPCP, FPSN
- 30 Update: Central and Eastern Visayas
 Chapter
 KIDNEY CARE REVOLUTION: Latest Updates
 from Philippine Society of Nephrology
 Central and Eastern Visayas Chapter
 By: Joyce Rosario A. Matoza-Serna, MD

- 35 Update: Southern Tagalog Chapter Dialysis Life Balance By: Camille Ng, MD
- 37 Kidney Teaser: This or That By: Kevin Gumabon, MD
- **38 To Remember** *By: Rey Isidto, MD*
- **44** PNSP World Kidney Day: Protecting the Kidneys Thru Preventive Nephrology By: Nathan C. Bumanglag, M.D.
- 45 Treading Pursposefully:
 Advocating Towards Ethically Versed
 Nephrologists For Children
 By: Sophia Manalo Dimalibot, MD
- 48 Beyond the Clinic Progressive Overload: Bridging Fitness Principles with Nephrology Practice By: Daniel Guevara, MD
- 51 Beyond the Clinic
 Born out of Necessity and Love:
 A Story of a Certified Cynophilist
 By Reina Lynn G. Antonio, MD
- **56** The Practical Prescriber By: Czarlota Valdenor, MD
- 58 Philippine Society of Nephrology (PSN)
 Academy: Advancing Nephrology
 Education in the Philippines
 By: Ricardo A. Francisco, JR., MD, FPCP,
 FPSN, FISN
- 59 A YEAR OF PROGRESS: Championing Kidney Health By: Pelagio L. Esmaquel, Jr. MD, FPCP, FPSN, FISN

Our cover depicts the kidney as a hydrangea flower— each floret contributing to a beautiful and functional whole, fresh and green. Full and renewed.

Cover Art by: Maia Celeste Arbatin, MD

Of Love and Service

By: Maria Eliza R. Navarro, MD

was supposed to find it funny as I watched three senatorial candidates ham it up for the camera by dancing and gyrating to an audience who was probably more amused than I was. I didn't even have the energy to feel anything else but dismay, and eye rolling would not even be sufficient to describe the amount of cringe I was feeling at that moment. Is this what we have come to?

It's the midterm election season, and in this country, it's akin to the usual circus that we have unfortunately been used to. It's easy to give in to the disgust by swearing off participation and keeping to yourself. But as someone reminded me, who else would love this country enough to fight for it? Yes, I had to be reminded because the unscrupulousness that runs rampant here is so discordant with what we aspire for as healers. I have to keep telling myself there are still some people out there who have sense, there are still people who just need to have that sense knocked into them, and most important there are so many people who need us to make sense of all the chaos that is destroying this country. Who else could stay to continue to love it but us? Times like these, you begin to understand why love often is apropos of suffering as Dostoevsky would like to call us out on. But that is a topic for another occasion...

I won't even attempt to dissect the latest issue that has widened the already gaping schism amongst us. Political colors, arrogant conjectures and personal gratitude replace rational thought and civilized discussion. Instead of laboring to mend the divide, these politicians are going into overdrive to cover their own bases and protect their assets. As a tax-paying citizen, my question would be—is not the Filipino the greatest asset this country has? Shouldn't the government be working for me, and not the other way around?

With an internal promise not to neglect my responsibility as a citizen of this nation, I shake off the fog of uncertainty this whole political madhouse is causing and opt to focus for now on what is well within my reach—how to be a functionary of the

kind of service in our needfulness now. Am I holding steadfast to the



Art by Dr. Mayleen Laico

"We're not making much progress," said the ox as he struggled against the river. "Don't be afraid of going slowly," replied the rabbit.

"Only be afraid of standing still."

oath I took when I became a doctor? Do I expect compensation, monetary or otherwise, for everything I do? Am I the nephrologist I set out to be? Am I, or at least working to be, a good member of this society we are part of?

We need not look far to discern just how imperative our commitment is. In a country where healthcare and education take the backseat to politicking and pocket filling, our job as healthcare workers now cannot be confined to prescriptions and daily rounds. Our teaching should now extend our trainees' consciousness well beyond the bulwarks of the hospital and lecture halls. We would be remiss in our duty as a teacher and mentor if we do not impart to them the state of the country they would be serving. Resemblant to the dismay at finding out many of our young people do not even know how the COMELEC functions, I will risk belaboring the point considering there is an increasing number in our fold who now perceive

our role as physicians to be less of a calling and more as an enterprise. It is not entirely surprising but no less discomfiting. Yet I would like to think that there are still many who abide in humility to be the communicators, advocates, and leaders this nation needs us to be.

I love being a doctor. I love my country. Inasmuch as it is becoming a herculean effort, I will remain to do so. &



ix weeks before the celebration, the poster making and Tiktok video making contests were launched nationally which emphasized this year's theme of early detection and prevention of chronic kidney disease: "Are Your Kidney's OK? Detect early. Promote kidney health.". Invited to participate were patients, their families, advocates and members of training institutions. Each chapter were asked to submit their chosen representative entries. top three winners were then selected from these finalists. PSN Southern Tagalog, Mindanao and Northern Luzon Chapters won first, second and third place respectively for the poster making contest whereas PSN Central Luzon, Southern Tagalog and Western Visayas-Negros Occidental Chapters respectively won first, second and third place in the Tiktok video making contest.

Another competition was held locally in Zamboanga City one week before WKD among elementary students of five public schools. Dr. Roselle Manuel, pediatric nephrologist, organized a dance contest last March 4 at City Mall, Tetuan, with the 8 Golden Rules of Kidney Health "Ocho" jingle created and sung by the Pediatric Nephrology Society of the Philippines (PNSP) as the background dance music. Students from the Baliwasan Elementary School emerged as the grand champion.

On March 13, a series of festive activities were organized for the day of celebration. The opening ceremonies were held as early as five thirty in the morning along the shores of Paseo del Mar. Amidst the backdrop of beautiful blue skies and filtering sunlight, 50 colorful vintas, the traditional and iconic boats in Zamboanga, sailed through the











waters of the Moro Gulf. These were accompanied by ethnic music of "Kulintang" instruments and graceful cultural dances by two members of the Jambangan Dance Troupe. Hanging on the sails of the vintas were logos of the society and its chapters, WKD, ISN-IFKF, local government agencies, hospitals, pharmaceutical industries and other stakeholders supporting the WKD campaign. Indeed, the unique Vinta Fluvial Display was, "a beautiful representation of unity in diversity where different sectors played a vital role in the fight against kidney disease" as described by Dr. Margarita Abalon-Trinidad, the president of Mindanao chapter and BOT member/Chapter Representative, in her opening remarks.







A motorcade through the bustling city soon followed going to KCC Convention Center Hall A, where the main program was held. Outside the hall of the venue, a free screening for fasting blood sugar, cholesterol, creatinine and uric acid sponsored by different pharmaceutical companies, free consultations and a bloodletting activity by the Zamboanga City Medical Center Blood Bank Unit were conducted. About five hundred attendees composed of patients and their families, students from elementary, nursing and medical schools and personnel from various healthcare institutions participated in the event.

Inside the hall, the Jambangan Dance Troupe started the program with another rousing performance. PSN President Dr. Pelagio Esmaquel Jr. formally opened the event and reiterated the importance of celebrating World Kidney Day and the vital role of screening and early detection as part of primary prevention against the increasing incidence of kidney disease. Special messages were then given by the Cluster Head of the Non-Communicable Disease Division of the Department of Health Region IX, Dr. Rolando Lilienthal L. Bucoy and City Health Officer, Dr. Dulce Amor Miravite. Both emphasized the shared and collective responsibility of everyone in the community in the promotion of kidney health.

The simultaneous celebrations by the different chapters of the society in other parts of the country were also demonstrated during the program by virtual communication via zoom.









A lay forum in a talk show format soon followed with Drs. Vimar Luz, Jerome Barrera and Karna Igasan-Kamlon as special guests representing their respective fields of expertise: Nephrology, Endocrinology and Clinical Nutrition. Their clear and concise explanations further emphasized the importance of kidney health including its basic functions, signs and symptoms of renal failure, risk factors and prevention.

An exciting game adapted from the popular series "Squid Game" called "8 Legs" in reference to the 8 golden rules of kidney health, truly energized the crowd when a team of "squid guards" entered and supervised the relay game. But unlike that of the series, the losers received consolation prizes while the winners received both cash and special prizes.









PSN Vice President Dr Ricardo Francisco expressed his gratitude for this year's successful celebration and encouraged the audience to continue spreading the campaign for renal health, thus formally ending the main program of the day.

In the evening, the organizing chapter and the national BOT concluded the celebration with a fellowship night dubbed "A Tropical Night in Asia's Latin City" dressed in their vibrant flowery Havana attires. The guests witnessed show stopping local song and dance performances, enthusiastically played games and joyously danced the night away.



















The following morning, the group toured the nearby island of Sta Cruz located off the coast of Zamboanga City. After cruising through the mangroves and a hearty lunch, they all headed back for the Chapter General Assembly in the evening.









Although majority of the delegates returned back to their homes on the next day, members of the National Board of Trustees extended their stay to conduct the Kidney Disease Management postgraduate conference: the nephrology to the non-nephrology course geared for primary care physicians. Seventy-five doctors composed of general practitioners, family physicians, internists and internal medicine residents attended the one whole day program. This was a fitting end to a meaningful and impactful WKD celebration.

It truly was a most wonderful **Feliz Dia Mundial del Riñon!** ও





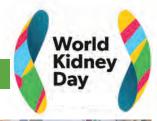
Detect early, protect kidney health

World Kidney Day 2025 Celebration





BICOL CHAPTER























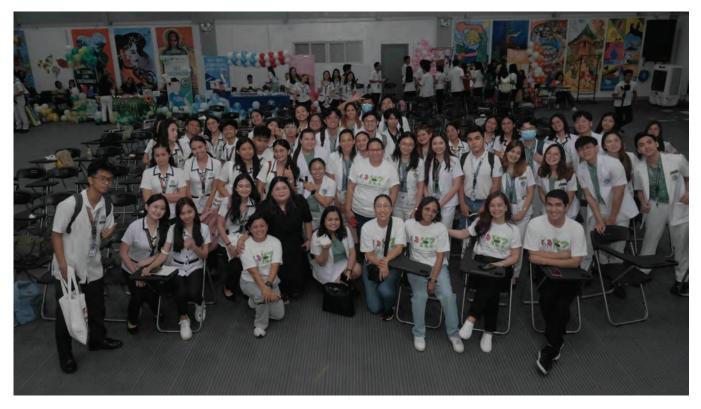




BICOL CHAPTER







CENTRAL LUZON

















CENTRAL LUZON









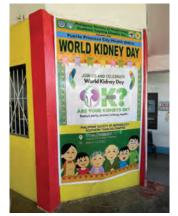


SOUTHERN TAGALOG CHAPTER















WESTERN VISAYAS AND NEGROS OCCIDENTAL























WESTERN VISAYAS PANAY























A Year of Going Green and Raising Red

By: Aubrey Andales-Severo, MD

uring the past fiscal year, the PSN Advocacy Committee launched a series activities to promote Green Nephrology and to fight against Organ Trafficking. From August to September of 2024, digital posters were uploaded weekly to the PSN official Facebook page. The posters illustrated several tips on how to make dialysis centers environmental-friendly. topics of the posters were: (1) how to minimize plastic usage in dialysis centers, (2) energy efficiency, (3) digital technology, (4) smart water habits, and (5) sustainable building design.









The first Green Nephrology Webinar of the committee was also held last September 25, 2024. This activity was in partnership with PSN Southern Tagalog Chapter (STC). The speakers of the webinar included: Dr. Michael Manalaysay, a pediatric nephrologist and an advocate of Green Nephrology, Ms. Kyla Patrizze Pernes, Sustainability Advocacy Officer of Health Care without Harm – Asia, and Ms. Rica Rafaela-Jarcia, Global Green and Healthy

Hospitals Associate. The webinar was moderated by Dr. John Neal Bastona of PSN-STC. Attendees were from various dialysis centers and healthcare facilities.

Being as they felt that they can do more globally by becoming a member of the International Society of Nephrology (ISN) Green K Initiative, the committee requested to be included in the Green K initiative and has started to attend its workshops to help in the preparation of guidelines for sustainable kidney care. In addition to this, through the initiative of Health care Without Harm Asia and PSN Advocacy Committee, PSN became a signatory to the Open Letter

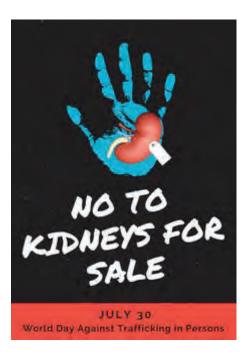
from Health Care Professionals on Global Plastics Treaty of United Nations Environment Program (UNEP). The open letter urged leaders to remove the blanket exemption of healthcare sector in the Plastics Treaty of United Nations. Such blanket exemption would stall movement away from single-use and toxic plastics and hinder innovation.

The Advocacy Committee also launched activities to help fight organ trafficking. On July 30, 2024, the committee had an awareness campaign to observe the World Day Against Trafficking in Persons. This involved urging PSN members and the public to use their profile picture with the slogan, "No to Kidneys for Sale" along with the caption #HulyoTrenta. During the same year, the committee completed an animated video that discusses the dangers of organ trafficking, particularly the sale of one's kidney. The video highlighted the many schemes that middlemen use to manipulate victims and the dangers to the victims' health. The video served as a reminder to everyone that organ trafficking is a crime.

The animated video was first presented in public last December 12, 2024 during the joint outreach activity organized by CYBERTIP, Interagency Council Against Trafficking (IACAT), Department of Social Welfare and Development (DSWD), and Exodus Road Philippines (a non-profit organization). Attendees were gathered from some homeless families in the heart of Manila. The

committee plans to present the video to more public activities of government agencies and non-profit organizations so as to raise awareness and help prevent the vulnerable groups from becoming victims of organ trafficking.

Early this January 2025, a meeting with the Department of Health – Philippine Network on Organ Sharing (DOH-PhilNOS) was held to discuss potential partnership on projects to promote deceased organ donation. For the coming year, the committee will not only strengthen its campaign against organ trafficking but will also focus on strengthening deceased organ donation.





PSN Joins

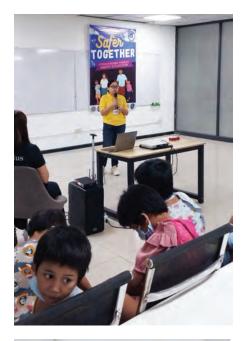
"Safer Together: Strengthening Families Against Exploitation"

By: Aubrey Andales-Severo, MD and Marissa Mamate, MD

n December 12, 2024, the Department of Justice Inter-Agency Council Against Trafficking (DOJ-IACAT), Cyber-TIP, Department of Social Welfare and Development (DSWD), and Exodus Road Philippines, a nonprofit organization, collaborated to host an outreach activity for homeless families in Manila. The program, titled "Safer Together: Strengthening Families Against Exploitation" was held at the Cyber-TIP Monitoring Center, Pasay City. It aimed to educate street families about exploitation and abuse, equip them with knowledge and strategies to protect themselves, inform them of the available resources and services for their safety and well-being, and build resilience and a sense of community.

The participants were street families who qualified for the Oplan Pag-Abot program of DSWD. They were offered options to return to their provinces or places of origin. The program included financial and social assistance to participants with temporary housing in the Cyber-TIP facility while waiting for their transportation back to their respective provinces. A representative from DSWD highlighted the services and support available to Pag-Abot Program beneficiaries. Meanwhile, a DOJ-IACAT representative illustrated







the critical dangers of exploitation and educated the participants on the strategies they need to protect themselves

The Philippine Society of Nephrology (PSN) was invited to speak on the dangers of organ trafficking and trafficking in persons for the purpose of organ removal. PSN was represented by members of PSN Advocacy Committee: Dr. Benita Padilla (Past President of PSN), Dr. Aubrey Andales-Severo (Chair of PSN Advocacy Committee) and Dr. Maria Eliza Navarro, also the present editor of the Broad Cast. They presented an animated video created by the PSN Advocacy Committee, which discussed the concept of organ trafficking, highlighted its dangers to its victims, and showed how brokers or "middlemen" exploit vulnerable individuals. It also discussed the potential impacts on the health of kidney vendors, and emphasized that organ trafficking is a crime, implying a warning that those involved could face severe penalties, including imprisonment. Furthermore, the video underscored the nobility of organ donation and the importance of every organ in the body. Following the video presentation, participants actively engaged in a question-and-answer portion and sharing of experiences. One participant, notably, was found to be a victim of organ trafficking and had sold his kidney twenty years ago, as he shared his story with the group.

"We are very fortunate to have been invited by Exodus Road Philippines to take part in this activity," Dr. Andales-Severo said. "Programs such as this one allow us to reach the vulnerable groups who may potentially be exploited by organ and human traffickers. This is a good opportunity for us to educate potential victims and help prevent them from falling prey to organ trafficking. This may only be the beginning and we are hoping to gain more audience and help eliminate organ trafficking in the country. We are also looking forward to strengthening our ties with government agencies such as DOJ-IACAT, Cyber-TIP, and DSWD and nonprofit organizations such as Exodus Road."

When asked regarding the plans of the PSN Advocacy Committee, Dr. Andales-Severo shared, "For the coming months, we will not only focus on raising awareness on the dangers of organ trafficking, but we also plan to collaborate with the Department of Health- Philippine Network of Organ Sharing (PhilNOS) for

more sustainable projects to strengthen deceased organ donation in the country. We have very eager members in the committee but with the enormous tasks ahead, it will be difficult for us to take on all the activities we have planned. We really need more members in the committee and would like to invite PSN members who are passionate about promoting the advocacies of our society to join our committee."

PSN Hemodialysis Committee Accomplishment Report Fiscal Year 2024-2025

By: Jeffrey Mora, MD

"Whatever you do, work at it with all your heart, as working for the Lord, not for human masters."

- Colossians 3:23

f PSN Hemodialysis Committee is likened to a kidney, it would very well fit the role of glomerulus as it is incessantly working, receiving undulating pressures and forces from both internal and external environments, while balancing the different concentrations to ultimately refine the final output and ensure the body's homeostasis.

One crucial issue that was successfully and holistically handled by the Committee this fiscal year was the Philhealth HD Benefit Package. In July 2024, Philhealth released a circular increasing the package rate from Php 2,600 per session to Php 4,000 per session but maintaining the Nephrologist Professional Fee (PF) at Php 350 per session. After about three months, in October 2024, another subsidy increase to Php 6,350 per session was implemented by Philhealth, albeit abruptly, it was much appreciated and highly beneficial to patients since it endeavors to shoulder some laboratory tests and some important medications. However, the nephrologist's professional fee was apparently pegged at Php 350 per session. It was probably an AKI-inducing issue for the Committee as it was compounded by legal, ethical, and medical quandary. It generated numerous questions and concerns from all stakeholders (PSN colleagues, dialysis owners and operators, Philhealth officers, as well as dialysis patients) that were directed to us for answers and clarifications, or at minimum, just plain elaboration of the said circular.

The HD Committee, through brainstorming and series of consultations, was able to provide a balanced approach to address all stakeholders. On one end, the Committee provided Philhealth the data on the average prevailing cost per treatment based on collected data taken from sample Dialysis units all over the country. Furthermore, the Committee presented to Philhealth the recommendations on minimum standard of care for each HD treatment supported by evidences from international and local guidelines. From another pole, the clamor from PSN colleagues to proportionately increase subsidized PF was also strongly lobbied and defended by the Committee to Philhealth officers, further bringing it to the attention of the Secretary of Health himself, however, much to our dismay, the prayer was not favored. On a different front, the Committee, together with the PSN Board of Trustees, met with the Dialysis Coalition of the Philippines Inc, a local organization of operators of Privately owned Dialysis Centers, to discuss the new case rate as well as to ensure proper implementation of its guidelines. In response to the aggressive construction of LGU operated or funded Dialysis Centers, the HD Committee sought an audience with the then DILG Secretary Benjamin Abalos to emphasize the importance of adherence to the minimum standards on how to properly plan and manage dialysis units.

The HD Committee, in pursuit of highest ethical standards to complement good medical practices, is constantly improving its recommendations on the proper conduct of PSN members as head and as attending physicians in a dialysis center. Constant efforts are being undertaken in reminding new PSN Members of this guidelines.

Cognizant of the fact that guidelines addressing important medical issues that confronts our dialysis patients should not be eclipsed by the ethical issues amongst professionals and some managerial issues arising in the operations of Dialysis Center, the HD Committee developed local guidelines on the prevention and management of Bloodborne Viruses in the Dialysis Unit, namely Hepatitis B, Hepatitis C, and HIV. This will be of great help for our colleagues in ensuring the safety of dialysis patients in preventing and controlling the spread of these infections. The guidelines will be released during the PSN Annual Convention in April 2025. The guidelines on Monkey pox and Covid-19 in the HD Units were also updated based on the latest local and international recommendations. The Committee is aiming for the timely completion followed by its immediate release of other important guidelines such as the Care and Management of Patient's Dialysis Access and the Guidelines on Proper Reprocessing of Dialyzer.

On a different capacity, the HD Committee was enjoined by the DOH to be part of its Technical Working Group in developing policies on staff workload in the management of Renal Diseases to be used in the implementation of the Universal Health Care.

At the outset, it was a busy but productive year for all the hardworking members of the HD Committee headed by the chairman, Dr. Glenn R. Butuyan. The Committee strongly demanded from each member time, commitment, and clinical wisdom, but in the process it honed them to be more patient, understanding, and compassionate physicians. The success of this year's PSN HD Committee is a testament of obedience to a verse from the Holy Scripture, that whatever we do, we should do it for the Lord.

Update: Committee on Peritoneal Dialysis

By: Nicetas Corazon Reyes, MD

"It does not matter how slowly you go as long as you do not stop."

eritoneal Dialysis is definitely being revived as the optimal renal bridge of Chronic Kidney Disease Stage 5 patients needing renal replacement therapy prior to kidney transplantation. It may not be immediate, but resurgence of it being more apt, safer, and more economical is being achieved.

The PSN Peritoneal Dialysis Committee started this rebirth through re-education, training, and advocacy. Both healthcare workers and patients are being involved in this revival. This past year, the committee focused on educational materials, revisited existing policies, and strengthened collaboration with key stakeholders for the improvement and best promulgation of peritoneal dialysis.

Recently, the Philippine Health Insurance Corporation (PhilHealth) approved of policy revisions for peritoneal dialysis. This is the PHIC Circular 2024-0036 Z Benefit Package for Peritoneal Dialysis. With this, PhilHealth has started reaching out to all hospitals private and public alike for the best implementation of its policies in all approved health institutions.

The following were the activities that the committee undertook: (a) Development of PSN PD Instructional Videos, (b) Primer on Peritoneal Dialysis, (c) Percutaneous PD Catheter Insertion Workshop, and (d) strengthened advocacy and policy development with PhilHealth. Such activities have certain challenges that the committee is and will continuously and promptly work on. Plans for this coming year/s will be the continuation and enhancement of the "Primer on Peritoneal Dialysis" to include current best practices, emerging evidences, and updated PD guidelines.





Peritoneal Dialysis revival seems difficult and slow, but with a heart full of hope and optimism, we will confidently and definitely get there. &

Update: RESEARCH COMMITTEE

By: Alyce Gail Arejola-Tan, MD

he PSN Research Committee made remarkable strides in fostering academic excellence last 2024 through a series of impactful workshops. These events were designed to nurture research skills and did promote collaboration of experts.

Throughout the year, the committee successfully organized eight workshops, covering essential topics such as Research Protocol with manuscript writing, advanced research methodologies, and ethical research practices and use AI in recent age. Each workshop aimed to empower participants with practical tools, and encourage high-quality research outcomes.

This year marked the launching of the PSN Young Investigators Award, showcasing the innovative research of PSN members-in-training. This event offered a great opportunity including recognition, and gained visibility and insights.

Looking ahead, the Research Committee remains dedicated to expanding its workshop offerings. The committee remains committed to nurturing a thriving research environment with initiatives that will continue to empower the research community and help the trainees and consultants to improve on their research projects. Building on last year's success, they look forward to hosting even more enriching workshops this year.

Research Education and Training

- 1. Research Protocol
- 2. Research Manuscript
- 3. Research Publication do's and don'ts
- 4. Meta-analysis Workshop
- 5. Case Series/Reports and Descriptive Studies in the Clinical Setting
- 6. AI in Research (next fiscal year)
- 7. Evidence generation (for CPGs)
- 8. Conflict of interest in the clinical research setting

PHILIPPINE SOCIETY OF NEPHROLOGY YOUNG INVESTIGATORS

AWARD

27

BROADCAST | April 2025



Atlas launch during World Kidney Day

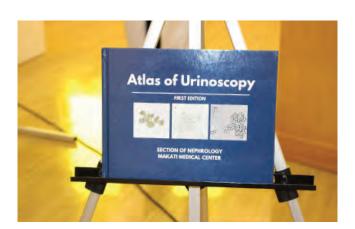
Makati Medical Center's Nephrology Section Launches Atlas of Urinoscopy during World Kidney Day Celebration

By: Beryl Anne Louise P. Tan, MD and Josierina Y. Sarmiento-Veloso, MD, FPCP, FPSN

akati Medical Center's (MMC) Section of Nephrology joined hospitals across the Philippines and around the world in celebrating World Kidney Day last March 13, 2025. This year's theme "Are Your Kidneys OK? - Detect early, protect kidney health" highlighted importance of kidney disease prevention to reduce morbidity impact and improve quality of life; thus, the section of Nephrology continued its social media engagement, lay fora and free urine dipstick screenings, but the real highlight of the celebration was the section's new breakthrough - launching the first edition of an atlas dedicated to urine microscopy, one of the first in the country.

A Milestone in Nephrology Education

Titled Atlas of Urinoscopy, First Edition, the book serves as an essential educational resource for medical students, internists and nephrologists. This atlas provides a detailed visual and descriptive insights into urinalysis, covering key aspects such as interpretation of findings, and clinical



Atlas of Urinoscopy First Edition

correlations. The atlas has an International Standard Book Number (ISBN) issued by the National Library allowing it to be part of any library globally. The ISBN is a distinctive numerical code given to books and publications to streamline their cataloging, distribution, and recognition internationally, making it easily accessible in libraries, bookstores, and online platforms.

Honoring a Pioneer in Nephrology

The launch of the atlas serves as a tribute to Dr. Claver P. Ramos, the pioneer who spearheaded the founding of the section in the year 1969, and the main driving force behind the establishment of one of the oldest Nephrology fellowship training programs in the country in 1981. With Dr. Ramos' passion for teaching, urinoscopy is one of the skillsets he imbibed in all his mentees and trainees. He believed that urine analysis provides key clues for the diagnosis of patient's renal conditions. His commitment to this field inspired today's nephrologists. Hence, the section, led by Dr. Eladio Miguel M. Peñaranda, Jr., incumbent chief of section, and Dr. Josierina Y. Sarmiento-Veloso, current training officer, started the endeavor of creating an atlas in 2021. With the vision of strengthening the skills of Nephrology Fellowsin-Training in urine microscopy, the section collaborated with the Department of Pathology, by providing them with clinical rotations in the laboratory. Urine specimen findings were correlated with patient's clinical cases - cementing the learning points related to the field of Nephrology and maximizing urine as a simple and inexpensive learning and clinical tool. The fruition of all of these efforts brought us the first atlas of urinoscopy.

A Legacy That Lives On

With the launch of Atlas of Urinoscopy, First Edition, MMC's Section of Nephrology continues its legacy of advancing knowledge and improving clinical practice in the



Dr. Sarmiento presenting a copy for PSN thru its President Dr. Esmaquel

fields of nephrology and internal medicine. But more than just a book, it represents years of expertise, mentorship, and dedication to our patients and advocacy of healing. As MMC celebrates World Kidney Day, this milestone serves as a reminder that even the simplest medical tests—like urinalysis—can provide valuable insights and improve patient care.

If you're interested in purchasing a copy of MMC's Atlas of Urinoscopy, First Edition, it will be available during the Philippine Society of Nephrology's Annual Convention on April 25, 2025. To place an order and complete your payment, please fill out the Google Form: https://forms.gle/SxiFHPep83CUaRBE9 and send your payment via Bank Transfer:

Banco de Oro (BDO) People Support Account Name: MMC-Section of Nephrology Account Number: 007500034498



Consultants & Fellows with Dr. Ramos at the launch



KIDNEY CARE REVOLUTION: Latest Updates from Philippine Society of Nephrology Central and Eastern Visayas Chapter

By: Joyce Rosario A. Matoza-Serna, MD

he Philippine Society of Nephrology Central and Eastern Visayas Chapter (PSN-CEV) chapter embarked on a series of activities at the start of the first quarter of 2025 aimed at increasing awareness and engaging healthcare professionals, patients and communities on kidney disease recognition, prevention and managing its complications.

Kidney Crosstalk and Fellowship

A postgraduate course titled "The Renal Network: Crosstalk between the Kidneys and Other Organ Systems" was successfully held on January 31, 2025, at the Casino Español Grand Ballroom in Cebu City, bringing together 296 physicians from Cebu, Bohol, Negros Oriental, and Eastern Visayas.

The topics covered were highly relevant and emphasized the crucial role of the kidneys in the context of liver dysfunction, malignancies, cardiovascular diseases, diabetes mellitus, rheumatologic diseases, and heart failure.



Additionally, sessions on psychological issues in pediatric patients with kidney diseases, diet and nutrition in chronic kidney disease, kidney stones, and the concept of "doctorpreneurs" - when doctors transition into business—were both thought-provoking and inspiring.



Nephrologists then gathered for a fellowship night, which provided an opportunity for PSN CEV officers and members to build strong professional bonds, welcome new members, and strengthen collaboration while addressing challenges within the chapter. Games and raffle activities added a fun and social element, fostering camaraderie among members who meet twice a year for major chapter initiatives. The course was organized by Dr. Minnie Monteclaro, PSN CEV President, Dr. Monina Cabral, Vice President, Dr. Maia Celesta Arbatin, and other active members of the chapter.

Free AVF Surgical Mission

On February 1, 2025, PSN CEV Southern Leyte-based nephrologists, in collaboration with vascular surgeons Dr. Deaver Merin (Tacloban City) and Dr. Carl Davin Tam (Cebu City), organized and successfully conducted a free surgical mission for arteriovenous fistula (AVF) creation for 30 chronic kidney disease patients at Christ the Healer Hospital (CTH) in Sogod, Southern Leyte.





Now in its second year, this initiative has benefited indigent patients from Southern Leyte, Leyte, and Biliran islands.

The surgical outreach program has been greatly appreciated by patients, providing them with access to quality and equitable vascular surgery.

Dr. Joselito Trumata, Medical Director of CTH, expressed strong support for the initiative, confirming that it will be conducted annually to continue serving CKD patients in the region.

World Kidney Day

In celebration of National Kidney Month in March, the PSN CEV chapter organized a range of activities across various island groups, including Cebu, Bohol, Negros Oriental, Leyte, Southern Leyte, Samar, and Northern Samar, on March 13, 2025, in observance of World Kidney Day. This was anchored on the theme "Are Your Kidneys OK? Detect Early, Protect Kidney Health."

The events focused on raising awareness about kidney health and disease prevention. Organized by nephrologists, the activities were attended by internal medicine residents, fellows-in-training, patients, teachers, students, and local communities,

ensuring an engaging and impactful educational experience. Remarkably, about 2,003 participants took part in the CEV WKD activities.

Simultaneous programs featured similar activities across all regions, including an energetic Zumba session, a lay forum on kidney disease prevention with both adult and pediatric nephrologists as speakers, free urine albumin-creatinine ratio screenings for participants, interpreted by physicians and medical interns, and "Ask Your Nephrologist" sessions

offering free medical advice and consultations on preventive measures.

PSN core members from each island group—Dr. Minnie Monteclaro (Cebu City), Dr. Catherine Chu and Dr. Rodrigo Capahi (Leyte), Dr. Maiza Arco (Negros Oriental), Dr. Maria Theresa de Asis (Northern Samar), and Dr. Jonathan Luzano and Dr. Mercia Ranze (Southern Leyte) - expressed their gratitude for the strong community participation. The chapter officers emphasized their commitment to making kidney care accessible at the community level, particularly in underserved areas.

Additional World Kidney Day activities included media guesting, where nephrologists were invited as speakers on various television and radio programs, as well as a postermaking contest and TikTok challenge. These interactive activities saw enthusiastic participation from patients, residents, nephrologists, and dialysis community members.





With the growing number of kidney diseases, these initiatives by members of the PSN CEV chapter played a crucial role in empowering communities with knowledge and preventive strategies ensuring healthier kidneys for all in the future.

WKD across CEV Regions

We are pleased to present the WKD activities across the CEV regions, along with the number of participants in tabular form. We would like to acknowledge the valuable contributions of the following nephrologists for this data: Dr. Maia Arbatin, Dr. Catherine Chu, Dr. Jameel Camenforte, Dr. Jonathan Luzano, Dr. Ariel Indo, Dr. Julie Ann Pestaño, Dr. Shena Quebec, Dr. Maiza Arco, Dr Monina Cabral, Dr. Mercia Ranze, Dr. Angelica Kuizon, Dr Alexander Fajardo, Dr. Maria Theresa de Asis and Perpetual Succour Hospital, The Kidney Service. 9



Central and Eastern Visayas Chapter	Venue	Number of Participants	Activities
Tagbilaran City, Bohol	- Gov. Celestino Gallares Memorial Medical Center Outpatient Clinic	100	CKD Lay Forum Zumba session Free nephrology consultation
	- Cortes Municipal Hall, Cortes, Bohol Tubigon Cohol Court	62 50	
Oras and Borongan City, Eastern Samar	Oras and Borongan City Gymnasium	100	CKD Lay forum Adult and Pediatric Preventive Nephrology
Cebu	 Labangon Bliss Homeowners Association Gym Perpetual Succour Hospital, Renal Service Waiting Area 	150	CKD Lay Forum UACR Testing Zumba session CKD Lay Forum
	- Vicente Sotto Memorial Medical Center, Venue: Brgy Sambang II B Rodriguez St Cebu City.	50	Lay forum UACR, BP and RBS testing Zumba session Lecture for Children on Healthy Lifestyle, BP taking and Urinary dipstick testing Blood sugar and urinary dipstick testing
	- Brgy Guadalupe Hall, Department of Pediatrics Vicente Sotto Memorial Medical Center	40	
	- Perpetual Succour Hospital, The Kidney Service	30	
Tacloban City, Leyte and Palo, Leyte	 Leyte National High School Gov. Benjamin T. Romualdez Hospital and Schistosomiasis Center 	180 75	CKD Lay forum UACR Testing and Blood pressure taking Zumba session
	Cerner		Lay forum for employees and outpatient clients
Ormoc City, Leyte	- OSPA Farmers' Medical Center OPD Clinic	100	CKD Lay Forum
Sogod, Southern Leyte	- Christ the Healer Hospital and - Havillah Polymedic	100 100	CKD Lay Forum UACR Testing
	- Salvacion Oppus Yniguez Memorial Provincial Hospital and Living Hope Hospital and Dialysis Center	100	Lay Forum Blood donation Radio Talk

Central and Eastern Visayas Chapter	Venue	Number of Participants	Activities
Catarman, Northern Samar	- Catarman Doctors Hospital Inc. OPD and Hemodialysis Center	500	Lay forum Zumba session
	- Suremed Hemodialysis Center	30	Lay forum on Stop CKD
	- Northern Samar Provincial Hospital Conference Room	30	Zumba session
		50	
Calbayog City, Western Samar	Gaisano Mall in cooperation with Calbayog District Hospital and Dialysis Unit co-sponsored by BCBP	156	Lay Forum Zumba session
Dumaguete City, Negros Oriental	Siliman University Medical Center Solarium	100	Lay forum Game show
Total		2,003	

Post Scripts:

As the PSN CEV chapter continues to lead the way in kidney health advocacy and education, their dedication to raising awareness, providing accessible care, and fostering collaboration within the nephrology community stands as a testament to the collective effort in improving the lives of patients affected by kidney disease.

These initiatives not only empower healthcare professionals and communities but also create lasting impact in the fight against kidney-related illnesses.

The chapter's unwavering commitment to education, outreach, and patient care promises a brighter future for kidney health in the Central and Eastern Visayas region as it looks forward to continuing its efforts and expanding its reach.



Dialysis Life Balance

By: Camille Ng, MD

he Philippine Society of Nephrology-Southern Tagalog Chapter recently hosted its 14th post-graduate course, Dialysis Life Balance: Bridging Gaps and Advocating Life-saving Advancements in Nephrology while Championing Patient Education, on January 26, 2025, at the picturesque Taal Vista Hotel, Tagaytay City. The event was a resounding success, drawing 751 registrants and an impressive 587 attendees, all eager to immerse themselves in a weekend of insightful and inspiring discussions.

The course covered five vital topics, each designed to address the most pressing challenges in nephrology today.

- Balancing Care: Access Preparation and Treating Access Infection
- Balancing Salts: Refractory Hyperkalemia/ Hypercalcemia/ Hyperphosphatemia in Dialysis Patients
- 3. Balancing Thoughts: Withholding and Withdrawing Dialysis
- 4. Balancing Targets: Renal Anemia and Iron Overload

5. Balancing Act: Sustainable and Eco-friendly Dialysis Practices

Dialysis Access Education: This topic emphasized the importance of incorporating dialysis access education into patient programs. It's crucial for patients to understand the risks and benefits of various access modalities, learn how to care for their access points, and know how to troubleshoot potential problems. Proper access preparation is key to preventing poorly functioning fistulas or malfunctioning catheters. Catheter-related infections, a major cause of morbidity and mortality in hemodialysis patients, necessitate prompt administration of appropriate antibiotics and culture tests.

Refractory Electrolyte Abnormalities: Managing these abnormalities remains a significant challenge. Electrolyte imbalances can occur unexpectedly, adversely affecting patient outcomes. For example, refractory hyperkalemia can lead to life-threatening cardiac arrhythmias, while imbalances in calcium and phosphorus can cause debilitating

bone malformations. Detecting, preventing, and treating these disturbances is essential for patient well-being.

Withholding and Withdrawing Dialysis: Decisions about withholding or withdrawing dialysis in seriously ill patients are often fraught with difficulty. In the Philippines, discontinuing dialysis is not widely accepted by the majority of the population. Physicians play a crucial role in explaining the risks and benefits to patients and their families. It is also essential for healthcare providers to consider the patient's choices and wishes during these challenging times.

Eco-friendly Dialysis: As climate change impacts all aspects of patient care, sustainable dialysis practices have gained momentum. Moving towards more ecological dialysis should be a priority for every dialysis unit in the country.

The 14TH Annual Convention of the Philippine Society of Nephrology-Southern Tagalog Chapter concluded with attendees enriched with valuable insights into dialysis life balance. These learnings will undoubtedly contribute to the improvement of dialysis units across the Philippines. 9







This or That?

By: Kevin Gumabon, MD

To start off the year of 2025, let's look back at the history of Nephrology and world events. Order the events in each column in chronological order from earliest to latest. Then once in chronologic order, for each pair in the row, determine which event took place first. Good luck and be amazed with history!

	History of Nephrology	World History
	William Howship Dickinson describing and detailing acute nephritis	 Publication of "the Origin of Species" by Charles Darwin
	First successful use of hemodialysis by Willem Kolff	 First meeting and General Assembly of the United Nations
	Richard Bright detailing the features and consequences of kidney disease in his book, "Reports of Medical Cases"	 Use of ether as an anesthetic in surgery by William Morton in Massachusetts
	First successful kidney transplant in identical twins by Joseph E. Murray in Boston	 Start of the Montgomery bus boycott with Rosa Parks refusing to sit at the back of the bus
	Creation of a cuff encircling the arm for a sphygmograph by Scipione Riva-Rocci	 Wilhelm Röntgen begins the study of X-rays and its medical utility
Anguage on		
Answers on _I	page 57	7

To Remember

By: Rey Isidto, MD

oth my parents are offshoot from farming stock. After years of scrounging and budgeting to the marrow, they managed to purchase a few hectares of arable land in Jibao-an, Mandurriao, a 30-minute ride from our house in the neighboring municipality of Pavia. This was in the late 80's, when large tracts of land were still viable for farming, and the inexorable rise of low-cost housing and generic subdivisions was a hazy vision in the future.

Papa believed in the purifying qualities of the crucible- which is manual labor, so he made us help in the farm when elementary school was out for the summer. My brothers and I did not mind; chasing after skittish hens and their chicks made up for our choice of juvenile sport. My only gripe was that thanks to questionable agriculture, the property was bordered by deep trenches disguised as irrigation dikes. Access to and from the farm was limited to three bamboo poles lashed together to form a bridge so suspect, I would rather risk sliding down the irrigation canals than use it. I was a child then, and the few seconds it took to skid to the

bottom seemed to be several terrifying hours.

That day I was holding a watermelon curled in each arm, and after the harrowing slide, I waddled my way to our jeepney which was parked on a grassy lot nearby. This was where I first met you. It would be far too ambitious for me to peg the exact date but in a child's mind, things of import are not marked by the numbers defined by a calendar, but by the ambient emotions that colored the event of significance.

You were carelessly sprawled on the ground, a thin, young sapling of a girl, hacking away at the ubiquitous *palag-tiki*. This is a reticent weed that is a delicacy to goats and other four-legged herbivores. Raven black hair which could easily have reached near your waist cascaded down from your bent head and pooled like oily puddles when it touched the ground. It was fascinating.

The Dr. Arturo B. Rotor Memorial Awards for Literature is an annual literary writing contest among all internists in the Philippines. It was established by the Philippine College of Physicians Foundation to honor the late Dr. Arturo B. Rotor who, aside from being an influential and revered internist, was also a civil servant, musician and writer. The contest was in its third permutation in the year 2024 and included two categories: Short Story and Creative Nonfiction writing.

The piece "To Remember" won First Place in the Creative Nonfiction category.

"What are you doing?" I whispered hesitantly, and to make myself smaller, I dropped to a crouch near you. I was painfully shy despite my family's assiduous validation in an effort to improve my confidence. Sure, I was clever compared to my peers, but this paled beside the soaring spatial intelligence my siblings displayed. My father is a chemical engineer, and it naturally follows that the progeny show a general aptitude for Math. Unfortunately, the genetic lottery skipped me.

"These are for my pets." you declared. You methodically unfolded your legs as you stood up, much like the way storks do. I trailed behind you, mesmerized, as you prattled on and on like we were old friends who were just catching up, and not having met for the first time minutes ago. You brought me to your house, a squat mixture of concrete and wood typical in the province, with hedges made from bamboo, chicken wire, and other flowering vegetation.

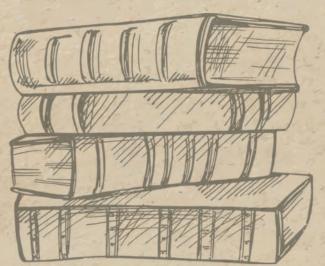
I found my parents in animated conversation with yours. They became friends when mine first requested to park the jeepney near your house during the initial ocular inspections until the acquisition of the farm.

You led me to the backyard where a large cage was fashioned out of steel mesh and wooden signages that proudly announced the brand names of several pesticides and artificial fertilizers. I could hear the scurrying of tiny, clawed feet and the insistent, peculiar porcine squealing which made me picture tiny piglets impatient for food.

"These are my guinea pigs." you said, dumping the handful of weeds inside and rattling off several names you had for them. Interestingly, they were human names, instead of the Whiteys or Blackys that unimaginative people often resort to. I would often steal glances your way as you droned on effortlessly in that sweet, breathy voice, noticing your pleasant dark skin, the thick eyelashes and the tiny drops of perspiration that clung on your upper lip. We stood close together, hovering over the cage, and we extolled the various virtues your different pets had, pretending they were a human family. Before long, we were laughing and chatting like familiar friends.

I went home that afternoon with one of the porky rodents you gave me as a gift.

This would be the start of a seasonal ritual that would go on for years. Throughout the months leading to



summer break, I would gather gifts for you: a large box of multicolored pencils that an uncle sent over from Australia, various knickknacks from an aunt in the US, and several old books I had scavenged and pillaged from the stack of rejected tomes found at the back of my school's library. I kept these in a box under my bed, watching the pile grow bigger with every addition. The promise of summer kept me on the lookout for things that might interest you and I hoarded these objects diligently.

Over the course of several years, you gifted me with additional guinea pigs, chicks which later matured to brooding hens and a gray tabby cat we christened "Meow Malandi!" because he would often ingratiate himself, brushing on our legs to plead for food. Oh, he was quite a character! He would search me out, even climbing trees to purr and nestle on my lap while I was engrossed with a book. I had to be careful though, because his



affections prompted him to offer me with gifts of his latest kill. He would ceremoniously approach and lay it beside me, or worse, on my lap. It started with grasshoppers with the legs chewed off, and eventually became birds, mice and the occasional garden snake absent the head.

Summer in the rural setting is often heralded by the scent of crushed grass trodden underfoot, drying out in the sun. The smell would make my heartbeat race a little faster and I would be giddy with excitement over imagined pursuits. It was not every day that we visited the farm, but on the days that we did, I would implore my mother to leave early. After the expected duties, I would make a beeline for your house. We greeted each other like old friends, not minding that each time we did this, a year had passed, and we become less of what we were before, but more of what we should be. This did not faze us, however. You always had something planned for us to do, going to our favorite haunts and gathering food for the growing family of guinea pigs. Eventually, dusk would darken the sky with lavender hues, and our voices would be hoarse from

shrieking and crawling through the cogon grass as we hunted for grasshoppers. I'd be itching like mad come dinner time, but I reveled at my catch, ogling at them through a covered, empty aquarium.

One day, I found you crouched over the ground, prodding at something with a stick.

"Is it dead?" you whispered. It was a maya, a tiny collection of brown feathers with wings folded at its side, feet in the air. It looked clean, with none of the tell-tale rigor or blood that is evident with a kill.

"It's dead." I said with finality. I had tried on several personas over the years, and that time, I was a morbid 12-year-old.

We scavenged for something to bury it in and eventually settled for a large orange matchbox with the picture of a guitar in front. The ground under the gumamelas that reinforced the bamboo fence which surrounded your house was an ideal avian cemetery.

We worked in somber silence and despite the packed earth, we quickly dug a shallow crypt and gently laid the bird to rest. You stared at the mound of dirt for a while, scattering yellow santan flowers we ceremoniously tore apart for the occasion. We then fashioned a makeshift cross to go along with the funeral flowers.

"To remember." you emphasized, breathing into the warm summer air, your eyes fixed on mine, but at the same time glazed and unfocused. I did not understand but I nodded solemnly in agreement. We spent the remainder of the afternoon searching for a nest with eggs but to our frustration, we found none. The remainder of the summer was spent in the usual hijinks, but each day would start with a trip to the avian grave which we decorated with whatever flowers we found.

We were already on our first year in high school the next time we met. I was surprised to find you restrained and not given to the usual game of tag, nor did you find it appealing to raid the resident Indian mango tree and hang upside down from its branches. Nevertheless, we talked about several things, subjects so inane but to our young minds, seemed to be of the utmost intent. The animals were a constant for you though, and your



brood had expanded to include rabbits apart from the usual cats, dogs, fowl and guinea pigs. I remember squatting on the grass beside you, our chins resting on our knees while our hands were mindlessly gathering palagtiki.

The next few years found us growing apart. I grew increasingly fascinated with

sciences while you gradually became enamored by the arts. We struggled to maintain the tendrils of our vestigial friendship. I would still visit you each summer, the day starting off-kilter. There were lesser and fewer ties that tethered us, and we labored for topics to agree on. But when we did, oh how our conversations soared! The future was always an exciting theme for us, the promise of unlimited potential a heady and addictive drug.

We met for a few more summers after that. But eventually the self-important events of high school and college won over. I remember congratulating you when you were accepted to the region's state university. Being accepted is a feat unto itself and you bested several others who were angling for a slot.

One summer during one of my visits, you confided that you had to stop school for a while. I concluded

that it had something to do with finances. I can sympathize. My family fell on hard times when the Gulf War hit. Papa had to be unceremoniously shipped back home when fighter jets started to traverse Saudi skies on a regular basis. We leaned heavily on the farm as a source of income, but unfortunately, the irrigation dried up,

the continuity of the canals interrupted by several subdivisions being developed in the area. Crop cycles had to be shortened, belts had to be cinched tighter. So, when you expressed your plans to delay schooling, I understood. I knew you will eventually graduate.

Months before this particular conversation, you were diagnosed when a routine, pre-enrollment complete blood count yielded alarming results. After several visits to a hematologist, it was confirmed: leukemia. You had to stop school because of the urgency of chemotherapy. I did not know you already had cancer but it still haunts me that I didn't press on for you to elaborate.

I came as soon as I heard the news. I was not prepared to see you then. My undergraduate degree was para-medical, but there was a comforting veneer that separated what I've read in books from what is happening in the hospital. This was different. The gaunt, skeleton-thin figure in the hospital bed that smiled wanly at me was not you. The room was not air-conditioned, and a single ceiling fan managed to roil the heated air above like a miasma or plague cloud. It became unbearably hot. Again, I apologize for bolting out the door after having just stepped in, to weep shamelessly in the corridors. My cheeks

You were in and out of the hospital several times after that. I visited often, and I can still see you despite the ravages of chemotherapy and the horrible cachexia as the disease ate away at you. Our talks never wavered, from discussions on the imagined adventures of your pets, to more subdued introsportion on the future and our prospects. We

sink.

burned with embarrassment

at the appalling display of

untempered emotions. I

struggled to the public

restroom, tears, snot

and vomitus staining

the white porcelain

ironic that we had to shed our adolescent selves in the present then, and travel back to the past where we can surmise about our future.

You grew weaker with each admission. Your cheeks became more hollow, and your once proud hair fell in clumps and gathered in heaps around the bed. The charity rooms for oncology patients were mercifully for one patient only, and those days were the most meaningful non-conversations we had. There were times when I had to be content with reading hasty scribbles you left for me to read while I listened to your shallow breathing as you slept. I would write back answers to your monologue, comforted that you would read them as soon you as you awaken.

One admission was different from the others. This time, it was at the Intensive Care Unit. You had opened your eyes briefly to acknowledge me and drifted off to sleep. I knew that the tube in your mouth helped you breathe because you cannot do so on your own. I knew what it did, but I did not know what it meant.

The next day, I peeked in to the ICU window and you were not there. I rang the doorbell, three curt streaks that meant business. The nurses inside in their immaculate white unifoms and caps leapt up like startled cats, their white caps with the pointed tips bobbed in panic, galvanized by the audible electric current. One of them whipped her head around and slitted her eyes at me.

"What?!" she asked through clenched teeth when she opened the door.

"Ma'am, may I know where is the patient at Bed 2?"

"I don't know." The dismissive tone curdled like acid. "I just came back from off duty. You have to wait after endorsements."

"Can I come back after an hour?"

"You can. But visiting hours are over." And she shut the door at my face before I can protest. It was late, and the provincial jeepneys ebbed quickly away with the sunlight. It was a weekend though, and I thought of visiting you the next week as the college was near the hospital.

Tita, however, came the next day. She mutely presented me with a piece of paper with your scribblings. You were giving your things away. And then I *knew*. In it you asked me to adopt the stray kitten that one day showed up at your doorstep. It was gray and tabby, with markings similar to Meow Malandi's, who years prior had unfortunately succumbed after eating a poison-laced rat.

I looked at Tita's face, lined with furrows the tears had ploughed through.

"No." I said, seething. I hated that cat. Again, I am sorry. This time for denying you your last wish. If I did, I would have the constant reminder of your death prancing about the grass, bringing me gifts of legless grasshoppers and headless snakes. I was not ready to give you up. Honestly, I never did know what happened to the waif because I left shortly and locked the door to my room. I

could hear your mother's muffled crying, and my own who was talking to her in a low, soothing voice.

I went to the church where you lay before your interment, but I did not go in. I was with my parents to pay our final respects, but I was adamant. I balked, staring at the ground, holding back the tears that welled each time I remembered you. I paced around the church garden for something to occupy my hands while I waited for the procession to start so I can sneak back home. Seeing that it could be quite some time before the service ended, I left the church grounds to wander aimlessly in the plaza that fronted the church. Eventually, I bumped onto the hedge that lined the plaza. And what met me were rows upon rows of santan abloom with thick globes of flowers. These were of a different color, but they bloomed with unabashed abandon like the ones at your house. I remembered helping you plant them, which was quite an easy feat: break off the branch, remove excess leaves, sharpen the end and stick them to the ground. And repeat ad nauseum.

Around me, people went on with their daily ministrations, jeepneys were blaring their horns at errant commuters and dogs barked excitedly at eating park-goers, begging for a treat. I marveled bitterly at how the world never ceased to go on despite the silent tragedy in that church. The world does not weep for the fallen.

I sat at the bench and watched the procession of people pour out of the church. The service was over. Eventually, the large white car that bore your casket lumbered out and the people milling about followed it, like sheep to a shepherd. I watched the vestiges of the mourners leave on foot, followed by children on bikes who were keen on the refreshments that followed each burial. My eyes followed them, too, until dusk's dirty skirt of deep purple and sooty ash dipped down from the sky.

The church's lights winked out, and the balding caretaker locked the door, then the gate. He shuffled off and crossed to the other side of the street. The church went back to hibernation, and just like that it was as if nothing had happened.

During one of our digging sessions for *palag-tiki*, you confided in me that you were adopted. And it answered why you were tall with long, straight hair and brown-skinned, while Tito

and Tita were both short with fair complexion. You never knew your mother, or father, and your adoptive parents were stubbornly silent. And you did not know if you had any siblings. I realized that just like the church switching off its lights, you will soon be forgotten once Tito's and Tita's lights eventually goes out. It was then that I promised you that I will keep you alive in my mind, that I will honor your memory somehow.

I have seen you suffer because of your cancer, and I wished then that I could've done something for you then. Perhaps not for you, but for others who will go through much pain because of disease. I am a doctor now; your death became the impetus and the seed that gave birth to several other decisions that eventually led me on this path of service. I hope I have fulfilled your expectations.

Now, each time I pass by that church I remember you. And if I have time, I would visit the spot in the plaza where several years ago I finally acceded to losing one of my best friends. At times, I would ponder on the temporal nature of things and that its ephemeral state is both its beauty and its curse. But most of all, I try to recount my memories of you. Because as young as we were then, you taught me it is important to remember.



PNSP World Kidney Day: Protecting the Kidneys Thru Preventive Nephrology

By: Nathan C. Bumanglag, M.D.

he World Kidney Day (WKD) is a worldwide health awareness campaign that focuses on the importance of the kidneys. It is a joint initiative of the International Society of Nephrology (ISN) and the International Federation of Kidney Foundations (IPKF). Its main thrust is to reduce the impact and prevalence of kidney diseases and its associated complications. It was established in 2006, and is celebrated annually on the second Thursday of March. Initially, a total of 66 countries participated in celebrating this campaign, but has since spread to most nations.



According to latest international data in the WKD website, "Chronic Kidney Disease (CKD) is estimated to affect approximately 850 million people worldwide.

If left undetected and untreated in a timely manner, CKD can progress to kidney failure leading to severe complications and premature death. It is projected that by 2040, CKD will become the 5th leading cause of years of life lost".

Unlike in adults, wherein diabetes mellitus and hypertension are the major causes of Chronic Kidney Diseases, in children the majority of CKD are caused by Congenital Anomalies of the Kidneys and Urinary Tract (CAKUT) and steroid-resistant nephrotic syndrome like focal segmental glomerulosclerosis. Furthermore, insults to the kidney occurring during the neonatal period can have deleterious effects later in adult life



Thus, it is one the main advocacies of the Pediatric Nephrology Society of the Philippines (PNSP, Inc), led very ably by its President Dr. Bettina Cercenia, together with its complement of officers and Board of Trustees, to focus on Preventive Nephrology. Meaning, trying to nip the development of some kidney disease that may be prevented. Thru a combination of hospital, school and community outreach, social media, and educational fora, the PNSP is keeping in line with this year's WKD theme: "Are Your Kidneys OK? Detect early, Protect kidney health".

On March 13, 2025, a nationwide network of pediatric nephrologists in alignment with their adult counterparts in the Philippine Society of Nephrology, held forth numerous activities celebrating World Kidney Day. This year's WKD lead group held its land and sea activities in Zamboanga. For the PNSP, the cluster on patient service and advocacy, led by Dr. Ma. Angeles Marbella, held a lively educational forum for around 300 Grade 6 pupils. This included accessible lectures on 1) kidney anatomy-physiology, 2) Common signs and symptoms of renal diseases, and 3) Steps on how to prevent kidney diseases.

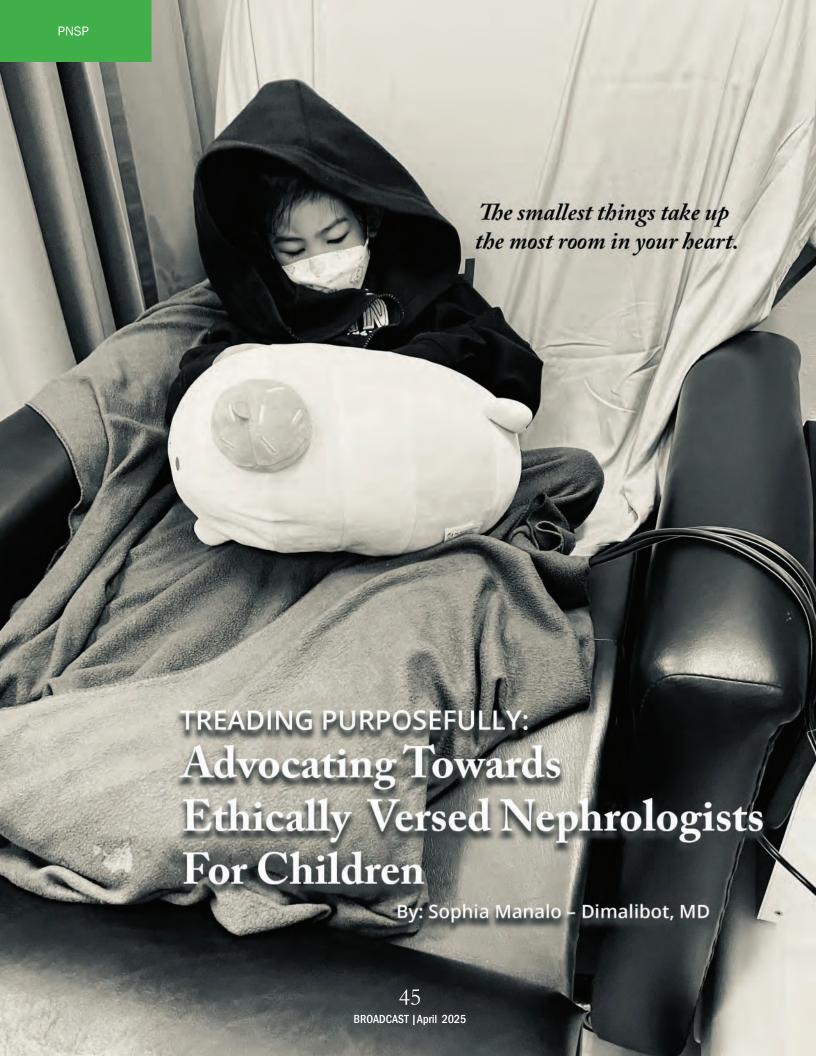
However, the main and most memorable highlight of the event was the surprise guest appearance of no other than Kit the Kidney Kid. The undisputed champion for kidney health in children was warmly greeted by

the pupils who rose to their feet, clapped and shouted as soon as they saw Kit. These types of events were replicated throughout the country, from up in north Luzon to down in Mindanao with the teaming-up of both adult and pediatric nephrologists.

Truly, in line with the WKD theme, an ounce prevention of kidney disease is indeed worth a lot! Happy World Kidney Day! ⁹







s clinicians at the bedside, we Nephrologists are faced with critical choices more times in the totality of our practice than not, some instances by ourselves, but more often, and thankfully, in a multi - disciplinary setting. Complex medical decision - making is indeed familiar territory. For Pediatric Nephrologists, considerations that come with caring for younger - aged patients whose mental maturity are not yet at capacity and whose lives we often consider as "yet to be lived" convolutes the path towards creating sound decisions hence the impetus to target the best health outcomes more.

The Pediatric Nephrology Society of the Philippines (PNSP) recognizes the need to shift the appreciation of ethical principles into application of the same theories into practice. The Subcommittee on Ethics of the Internal Affairs Committee kick-started this advocacy by holding the first official PNSP Ethics Forum last March 25, 2025 via online platform. None other than Dr. Agnes A. Allarilla – Alba, past PNSP President and Head of the Sub-Committee on Ethics, tells us more on this project.

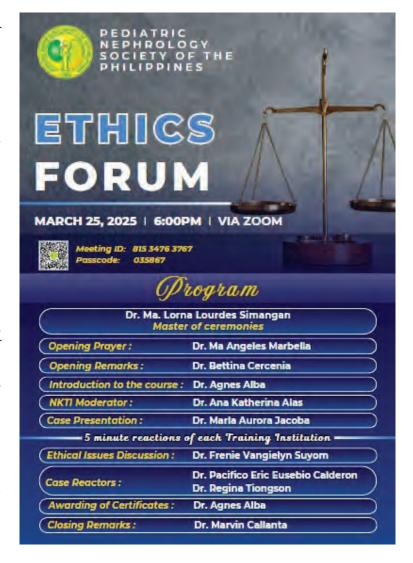
Question: What were the aims of the society in holding this activity?

Dr. Alba: "The Pediatric Nephrology Society of the Philippines (PNSP) aligns with the Philippine Society of Nephrology's Committee on Teaching Ethics with the same function in mind:

- Provide guidance, educational and training resources for Nephrology Fellows-in-training (NFIT) on ethical issues relevant to Nephrology
- 2. Promote integrity in research and clinical practice among NFIT
- 3. Promote a culture of ethical reflection and discussion within accredited Pediatric Nephrology Fellowship Training institutions and as such redound to the whole of its membership
- 4. Develop an enabling environment for teaching Ethics in the training institution through curriculum recommendation to the FTPAB, guidance on implementation and provision of training resources
- 5. Promote a culture of integrity, ethical reflection, and ethical decision making in both research and clinical practice within accredited Pediatric Nephrology Fellowship Training Programs and to the society as well"

Question: What was the driving force or antecedents as to the conception of this activity?

Dr. Alba: "I and the incumbent president of the PNSP usually represent the Pediatric team in the meetings of PSN Ethics. We also attended the



Training the Trainors of PSN's Ethics team. In the analysis of the survey and in my meetings with the chairs and of the group, we realized that Ethics is discussed but is not structured, the confidence in teaching all the pillars as in stating what principle is followed is not clearly stated. Ethics is practiced and is felt but not clearly delineated and deliberate. Our senior consultants

guide us in decision making but the team believes that a DELIBERATE and clearly intended curriculum will deeply imbed in them the principles we loosely remember.

We tried the Adult Nephrology style of having the cases discussed by the fellows but the Trainors themselves clamor for expertise in the community, thus to standardize, at the same time share our resources in having experts in the field with the deliberate intent of making Fellows participate, we have reimagined how it will be done at PNSP.

The issues in Pediatric Nephrology also varies from the adult, I agree that there are common issues we have but we have adolescents that needs an ascent, we have an adult that decides on the patients' condition so the issues on AUTONOMY and informed CONSENT, best interest standards, confidentiality and privacy, vulnerability and protection from harm is a whole different drama."

Question: What are the mechanics and how often will this activity recur?

Dr. Alba: "We will have a common activity every 3 months. It is called the ETHICS FORUM. There will be a lead institution who will get the case. It will pass thru the committee on Ethics. Once approved, they must send the case to the different institutions and is given one month to prepare for it. Internal discussion will be done per institution. The lead institution is expected to present a full discussion and to look for a local Ethicist that will be the main reactor. The other institutions to comment in 5 minutes their comments and opinion. The PNSP has only 6 training institutions compared to the adults of 28. The PNSP reactors are Dr. Regina Tiongson and Dr. Dolet Bonzon who can stimulate further discussion during the sessions. It will be synthesized at the end by the host. There is a reflection google form that all the fellows will submit. We are at this time creating a space at FTPAB to formalize the curriculum to be included in the training manual.

We had the first run and it really stimulated a lot of interest. It was cool and less formal as the PNSP's home advisers instigate questions and suggestions.

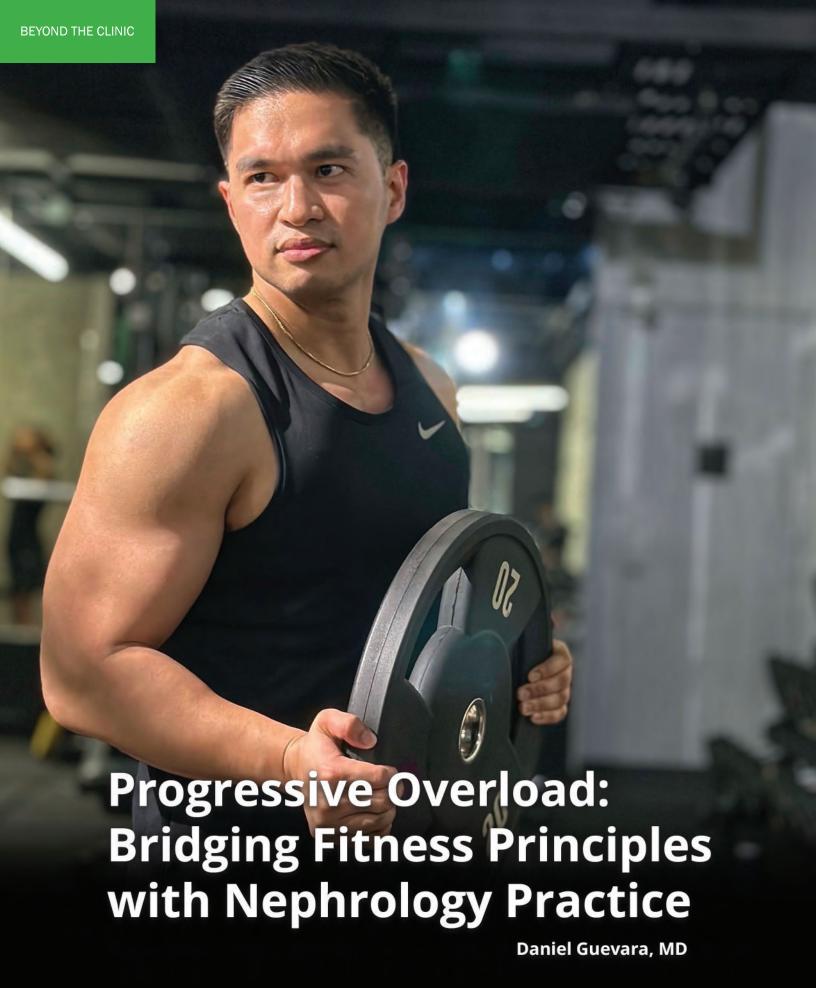
Trigger questions for the case: 1) While parents have both legal and moral responsibility for their child's well-being, where should the boundary be set between protecting their child and exerting excessive control? 2) To what extent should patients have the right to make their own medical decisions, such as choosing to go home or refusing medication? How much autonomy should they have in determining their care? 3) How can we strike a balance between respecting adolescents' autonomy and ensuring their safety and overall well-being?"

Question: Will Dr. Calderon and Dr. Tiongson act as inhouse reactors or will other experts be invited also in the future? Dr. Alba: "Dr. Pacifico Eric Calderon is the ethicist chosen by NKTI but in the next sessions depending on PCMC if they will get another one like Dr. Rivera or Dr. Tan - Alora for UST. It all depends on the lead group but the mainstays will either be Dr. Tiongson, Dr. Bonzon or both."

Question: As Subcommittee Head, what message would you like to send out to the members of PNSP and PSN?

Dr: Alba: My great appreciation to the team of the Adult Ethics Committee, with the passion and fervor of its leader Dr. Benita Padilla and the open culture discussion no holds barred team members Dr. Collantes, Dr. Gueco, and Dr. Ric Francisco. It actually inspired me to think higher than the usual needs of a nephrologist – the heart to instill in our members what is the true mindset and heart of a nephrologist- it may sound too cliché but it still stings the heart that we are responsible in instilling the proper guidance, principles and preserve the dignity and integrity of every physician. We as Nephrologists are very vulnerable and if we set it right as trainees – deliberately instilling the about it . Such passion driven in my team mates are very palpable and if it is a virus I think I am infected and we wish to infect more people too."

With this, the PNSP remains true to the words of Sir William Osler, "To cure sometimes, to relieve often, and to comfort always."



I consider myself both fairly healthy and fit, and take some pride in the fact that I don't have to contend with maintenance medications at my age. As all physicians can attest to, the measure of stress that accompanies the profession lends considerable pressure on managing that level of good health we always trumpet to our patients.

So, when I encounter someone who not only embodies that concept of health but uses his knowledge to further that image with ideas we would usually shy away from, we'd be remiss if we don't at least explore how these could ultimately get us to that state of wellness many of us want to attain.

m.e.r.navarro, EIC



y fitness journey began in 2015 during residency. At the time, I wasn't deeply committed due to the demanding nature of medical training. However, my motivation stemmed from a desire to become physically stronger, as I had always been a scrawny kid. Another driving force was my aging parents—I wanted to ensure I had the strength to assist them in case of an emergency.

I primarily engage in weight training, which I've mostly learned through self-teaching and fitness videos. My workouts became more consistent and serious during the pandemic when I finally had more time. A principle I follow in my exercise regimen is progressive overload, which involves gradually increasing the stress placed on muscles to promote growth, strength, and endurance. This method has been key to my progress, as it continually challenges my body, leading to tangible improvements in performance over time.

Over the years, I've also become well-acquainted with the macronutrient composition of various food types, which has deepened my interest in nutrition. This knowledge facilitates better communication during lectures, allowing me to educate patients and audiences more effectively.

I frequently take whey protein and have addressed the topic of supplements in my talks, combining my lifting experience with my knowledge of nephrology. Based on best available evidence, a high-protein diet and creatine are generally safe for individuals with normal kidney function, particularly when paired with resistance training. This combination ensures excess amino acids are utilized effectively for protein synthesis, minimizing risks such as hyperfiltration.

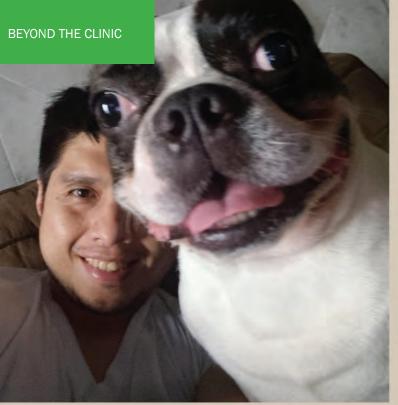
Regular quality exercise has not only improved my physical health but made me a better health advocate. Through an active lifestyle and proper nutrition, I can set a good example for my patients and inspire them to take proactive steps in their health.

For busy professionals, particularly doctors, staying fit requires commitment and strategic planning. One of the most effective approaches is to make exercise a



non-negotiable part of your daily routine. Scheduling workouts at the same time each day helps establish consistency, making fitness an integral part of your lifestyle rather than an afterthought. In the gym, applying the principle of progressive overload is essential. Equally important is being mindful of diet. Familiarity with the caloric densities of different foods—focusing on nutrient-dense options and avoiding energy-dense, highly processed items—provides flexibility while meeting optimal dietary requirements. On a hectic day, it's easy to resort to convenience foods, but choosing whole, balanced meals can make a significant difference in overall health and fitness.

Ultimately, being fit as a doctor is not just about physical health—it's about embodying the principles we advocate for our patients. By incorporating consistently challenging exercise and mindful eating into your routine, you can set an example and inspire those you care for to prioritize their own well-being. $^{\circ}$





Born out of Necessity and Love:

A Story of a Certified Cynophilist

By Reina Lynn G. Antonio, MD





Cynophilist or Cynophile is a person who is fond of dogs, and according to a study made by Rakuten Insight in 2020, more than 67% of the Philippines' population are dog lovers, which makes us number one in whole Asia. During the COVID-19 pandemic, they counted 10.8 million dogs in our country and had even increased by 40% as more Filipinos became interested in them.

From being protectors, dogs had become our companions that provide comfort, support, stress and anxiety relief, loyalty and unconditional love, especially during the pandemic. From referring to dogs as our "Bantay", which we used to say likening them as one of our properties, we now regard them as our "fur babies" or members of our families.

We cared for them like our adopted children. It meant we go beyond providing food and shelter. We ensure they are vaccinated completely and annually, have regular veterinary checkups and grooming, and even shopped for clothes, diapers, toothbrush, toothpaste, toys and other accessories and toiletries. There are those who have their own airconditioned and fully furnished room in the house. Some are even sent to institutions for schooling or training and are traveled on planes and checked in hotels during vacations. Jobs for pet walkers or pet sitters were even created for fur parents to avail for their babies. To cater to the increasing demands for pet related services, the opening of more veterinary clinics and pet grooming centers had become a necessity.

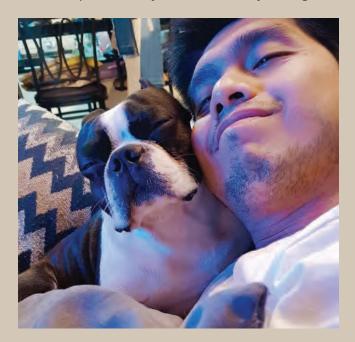
Our featured nephrologist Dr. Jose Mari "Joma" Galauran, being a certified cynophilist, had actually set up a veterinary hospital instead of establishing a medical clinic, hospital or a chain of dialysis centers. He even considered studying veterinary medicine because of his personal experience as a dog lover.

"I find immense joy in their (dogs) enthusiastic greetings when I come home from work and their comforting presence when they cuddle up to me for sleep", he said as he fondly talks about how initially, he only found



them cute but eventually fell in love with them when he adopted his first Boston Terrier, Hamilton, eight years ago.

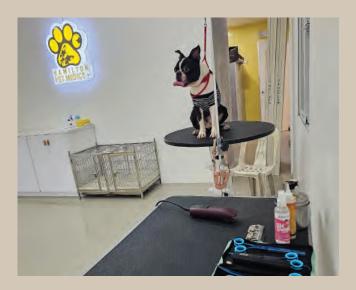
"I'm not entirely sure why I gravitated towards this breed. I believe the connection you have with a dog that matters more than their breed." Dr. Galauran replied when asked if he preferred a particular breed to take care of and as he revealed that at present, he is taking care of Evan, his second Boston Terrier, who he adored just as much. He adopted him after Hamilton passed away more than two years ago.





"My dogs are intelligent. They know the usual tricks: fetch, play dead, bark on command, and freeze until told to move." He adoringly reveals how remarkable and adorable they are. "The trick I'm most proud of is his (Evan's) habit of waiting to go outside before doing his business." He pointed out Evan being a trained or disciplined discriminate toileter. He also fondly shared their favorite activities. "Evan's obsession is fetching. He never tires of bringing back the toy I throw. We take short walks around the condo garden, but I don't typically walk him in malls."

Dr. Galauran also narrated that he has been taking care of his dogs personally and that he has been giving them baths until the establishment of his veterinary clinic with grooming service.



"I entrust their thorough cleaning to our professional groomers." He pertains to the growing number of these skillful individuals and he admitted, grooming costs approximately Php 600.00 per monthly visit.

"Evan is very low-maintenance when it comes to food. I buy special adult dry food and feed him twice a day, sometimes mixing in a small amount of wet food. He's trained not to gobble his food, so I leave his bowl full, and he eats whenever he's hungry."

Dr. Galauran also shared that he usually spends around Php 150.00 per week on dried food and occasionally, when mixed with canned wet food, it would cost him around Php 100.00 per week.

He rarely buys toys for them but he would spend Php 500 to 800 every four to five months for these and other accessories. When he travels abroad and brings them with him, he needs to make arrangements for their hotel accommodation too, which means spending around Php 500.00 per night for his fur baby.

So imagine those fur parents who chose to take care of the larger breed and adopted more than one dog? They are definitely spending a lot more. Therefore, to adopt a dog means you need to be fully committed to fulfill various responsibilities that will ensure his comfort, emotional well-being and good health, and includes receiving complete veterinary care, during his short lifespan. You love them in sickness, in imperfection and in health, unconditionally.

"It's crucial to consider potential veterinary expenses." Dr. Galauran emphasized as he recalled his experience with Hamilton's when he became critically ill due to development of a bloodborne infection that required hospitalization in an intensive care unit (ICU). Hamilton was his first dog, his first love. He was the one that made Dr. Galauran realize he could care about another species in a way that he did not comprehend was possible. It was like Hamilton was his first child and like what we would

do for a loved one and Dr. Galauran did everything to save him.

"It's clear that when you become attached to a dog as a family member, you want to provide them with the best possible care." He admitted when he openly spoke of the expenses incurred for Hamilton's treatment that time. One week in the ICU cost Php 50,000.00. He then spent around Php 9,000.00 - 10, 000 for his blood transfusions.

Sadly, despite all the effort and possible treatment the doctors could offer, Hamilton passed away.

"Yes, I learned this firsthand." He professed as he discussed this painful experience. "I had Hamilton for less than six years. It's difficult to overcome the loss because each dog has a unique personality. Adopting a new dog doesn't replace the bond you had."

Although he and Evan have a special connection, it is different from what he had with Hamilton, and like in any separation or end of a relationship, it is always the hardest to let go of your first love.

"Hamilton Pet Medics Plus is named after my previous pet, and I believe it's one way I've dealt with the loss." Dr. Galauran admitted when he finally talked about his Veterinary Clinic. Hamilton Pet Medics Veterinary and Grooming Center was actually established after Dr. Galuran's experience with Hamilton's illness. He initially brought him to a small veterinary clinic, which referred them to a hospital as the facility lacks services and treatment modalities that patients like Hamilton needed.

"I realized there were few centers that catered to critically ill dogs needing ICU care and blood transfusions. After Hamilton's passing, which I found profoundly difficult,













I decided to create the veterinary center with the help of fellow dog lovers, aiming to provide specialized healthcare at an affordable price."

Hamilton Pet Medics Plus is a clinic and wellness center. It offers comprehensive well-pet care, OPD consultations, hospitalizations, and critical care. They perform surgeries, blood transfusions, manage pregnancy needs including cesarean sections and normal delivery, dental services like prophylaxis, and more.

Do you know that it has a dog hotel too? That is why the "Plus" in Hamilton Pet Medics' name does not only pertain to grooming services.

So, for those travelling with your fur babies to Manila and needing accommodation or for those who will

go abroad and cannot find anyone who can take care of their babies while they are away, Hamilton Pet Medics Plus can help you.

It is easy to make appointments or booking too. You can reach them at their Facebook accounts with the clinic name. Currently, they have branches in Congressional Avenue and V. Luna street, Quezon City.

Hamilton will always be ingrained in Dr. Galauran's memory for being associated with the discovery of "falling in love" with dogs, and for unfortunately being the cause of his first heartbreak as a fur parent. But because of the establishment of Hamilton Pet Medic Plus, born out of necessity and love, Hamilton will remain with him longer like what he hoped for. §

*Dr. Jose Mari Galauran is the Training Officer of the Nephrology Fellowship program and the head of the Peritoneal Dialysis Unit at the Veterans Memorial Medical Center. He is also practicing at Valenzuela Citicare, Metronorth Medical Center, Ace Valenzuela, Bocaue Medical Specialist.

TRIVIA: Being a musical lover, Dr. Galauran named his fur babies after characters in Broadway Musicals

**Special thanks to Dr. Justin Castro and Dr. Maribel Arquiza

The Practical Prescriber

Sensible information to help guide your everyday medication management

By: Czarlota Valdenor, MD

This series aims to provide our nephrologists practical tips on prescribing medications to our patients. This is not meant as an evidence review, but rather to provide helpful information that can assist you in your day-to-day practice and how these affect medication management. For comments and suggestions, please do not hesitate to send an email to the Committee on Patient Protection thru psnmanila@gmail.com.

Getting in the Loop with Furosemide: Practical Insights for Today's Nephrologist

In this issue, we shine a spotlight on furosemide, one of the most frequently used medications in renal practice. Furosemide plays a pivotal role in managing edema, controlling blood pressure, and addressing hyperkalemia. To help our nephrologists optimize its use in clinical practice, here are some practical tips for getting the most out of furosemide therapy:

Route: PO, IV bolus, IV infusion

Intravenous (IV) furosemide is twice as potent as oral furosemide, and its bioavailability is highly variable, with food affecting absorption. While it can be taken with or without food, the diuretic response is generally maximized when taken on an empty stomach. Peak diuretic effects occur 1-1.5 hours after oral administration and 10-30 minutes after IV administration.

After an IV dose of furosemide, rapid sodium excretion and water diuresis can be achieved. However, this excretion is at its maximum for the first 1-2 hours and then it progressively declines. The peak natriuretic effect with the second dose is 25% less than that of the first dose. Furosemide should be injected at short intervals every 6-8 hours or infused continuously to avoid the breaking phenomenon of post-diuretic compensatory sodium retention.

Continuous IV infusion maintains an effective rate of furosemide excretion and inhibition of Na+ reabsorption over time. The maximum diuresis occurs 3 hours after starting continuous IV infusion. Therefore, when furosemide is administered by continuous IV infusion, it is recommended to give an IV loading dose of furosemide to increase the initial diuretic effect.





Furosemide has both a threshold dose (minimum dose required for effect) and a ceiling dose (maximum effective dose). The threshold dose is typically 10 mg IV for patients with normal renal function, but may range from 80–160 mg for those with declining renal function. Doses below 80 mg may be ineffective in advanced CKD patients. The ceiling dose for intravenous furosemide varies: 80-200 mg in CKD or nephrotic syndrome and 40-80 mg in congestive heart failure or liver cirrhosis. If diuresis remains suboptimal, consider repeated infusions rather than increasing the dose.

Furosemide's half-life is 1-1.5 hours, and it is prolonged in advanced renal dysfunction. It needs to be administered two or three times a day.

Side effects

Common adverse events include hypovolemia, electrolyte imbalances, hypersensitivity reactions, and ototoxicity.

- Excessive Diuresis: Older patients, those with advanced CKD, and those on NSAIDs are at higher risk. Monitor intake/output carefully in these populations.
- *Electrolyte Imbalances:* Furosemide can cause hypokalemia, hypomagnesemia, hypocalcemia, hyponatremia, and hyperuricemia. Regular monitoring of serum potassium is essential, and supplementation may be necessary. Be cautious when prescribing to patients on digoxin, as hypokalemia increases the risk of arrhythmias.
- *Hypersensitivity:* Furosemide is a sulfonamide and can cause allergic reactions like rash or acute interstitial nephritis. Consider alternative diuretics if allergic reactions occur.
- *Ototoxicity:* Furosemide can cause reversible ototoxicity, with rare cases of permanent deafness. To minimize risk, infuse high-dose furosemide slowly (max rate: 4 mg/min). Be especially cautious in patients also taking aminoglycosides.
- Other Drug Interactions: Furosemide can displace warfarin from blood protein binding sites, potentially requiring a lower warfarin dose when both medications are used.

Furosemide is an essential medication in everyday nephrology practice, but getting the most out of its use benefits from careful attention to dosing, route, and potential side effects. By applying these practical tips, nephrologists can enhance their approach to furosemide therapy and better manage its challenges in routine clinical care. 9

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This or That?

Answer

History of Nephrology	World History	
Richard Bright detailing the features and consequences of kidney disease in his book, "Reports of Medical Cases" (1827)	Use of ether as an anesthetic in surgery by William Morton in Massachusetts (1846)	
William Howship Dickinson describing and detailing acute nephritis (1875)	Publication of "the Origin of Species" by Charles Darwin (1859)	
Creation of a cuff encircling the arm for a sphygmograph by Scipione Riva-Rocci (1896)	Wilhelm Röntgen begins the study of X-rays and its medical utility (1895)	
First successful use of hemodialysis by Willem Kolff (1945)	First meeting and General Assembly of the United Nations (1946)	
First successful kidney transplant in identical twins by Joseph E. Murray in Boston (1954)	Start of the Montgomery bus boycott with Rosa Parks refusing to sit at the back of the bus (1955)	

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Philippine Society of Nephrology (PSN) Academy: Advancing Nephrology Education in the Philippines

By: RICARDO A. FRANCISCO, JR., MD, FPCP, FPSN, FISN Chair, Cluster on Education and PSN Vice President

he PSN Academy serves as the premier educational platform of the Philippine
Society of Nephrology (PSN), dedicated to the continuous professional development
of nephrologists and allied healthcare professionals across the country. Formerly operating as the Committee on
Education, the Academy has evolved into a comprehensive educational arm of the society under its Cluster on
Education, delivering evidence-based and practice-changing content developed by PSN members themselves.

The academy will oversee a diverse portfolio of educational initiatives including postgraduate courses, webinars, workshops and conferences to address the specific needs of PSN members and other stakeholders in pursuit of their professional advancement with CPD units from the Professional Regulations Commission. These initiatives will be developed through strategic collaboration with other medical societies and industry partners.

The PSN Academy is headed by its Director, Dr. Roberto Tanchanco and Assistant Director, Dr. Raisa Esperon Lobaton, also the Chair of the CPD Committee of PSN. The PSN Academy Council, chaired by Dr. Tanchanco, is composed of all the chairs of the standing and ad hoc committees of the society. The PSN Academy Council is tasked to review, evaluate the relevance, feasibility, and alignment of all new and existing CPD and other educational activities of the different PSN standing and ad hoc committees vis-à-vis with PSN's educational goals. If approved by the council, the proposed CPD activities shall be forwarded to the Board of trustees for approval and implementation.

The CPD Committee, whose chair is the assistant director of the PSN Academy, will ensure that all activities of the academy comply with relevant laws, regulations, and accreditation standards of PRC, PMA, PSN, PCP and PPS. It will maintain an accurate and complete records of all CPD activities and ensure that the scientific activities of the academy are accredited and awarded with appropriate CPD units. The committee shall likewise be the body that will award CPD units to programs applying for PSN CPD accreditation.

The PSN Academy has formulated the PSN Academy module template that will be used by the committees in planning their educational activities for PSN members. This template was developed so that all the necessary elements are included to facilitate submission for CPD units, evaluation for quality assurance purposes, and in the future also pursue micro-credentialing recognition by CHED as well.

After its creation, the academy was tasked by the PSN board to review and update the postgraduate courses in hemodialysis whose instructional design and modules where developed several years ago. The modules for the postgraduate courses for hemodialysis nurses, non-nephrologist physician on duty and dialysis unit heads were reviewed by the academy council together with other stakeholders last January 18, 2025 and the instructional design and the modules are being finalized and to be implemented starting June 2025.

Starting May 2025, the standing committees will be be tasked to update and/or develop educational activities based on the perceived educational needs of PSN members and the topics they want to be included in the activities of the PSN academy for fiscal year 2025-2026.

As PSN looks forward to the future, the PSN academy will undoubtedly play a major role equipping its members with the knowledge, skills and practical experience necessary to become exceptional nephrologists, poised to make a lasting impact on the healthcare landscape of the country. 9

A YEAR OF PROGRESS:

Championing Kidney Health

By: Pelagio L. Esmaquel, Jr. MD, FPCP, FPSN, FISN

year ago, as I stood before you, my esteemed colleagues, during my induction, I have recalled from memories—from my early fascination with Dr. Daysog's urinoscopy examinations to the challenges and triumphs I encountered on my journey in nephrology. This passion for the fundamentals of our practice was reignited as I reflected on the upcoming Dr. Filoteo Alano Memorial Lecture, which will focus on the Value and Relevance of Urinoscopy in Modern-Day Nephrology. My esteemed mentor, Dr. Claver P. Ramos, will deliver this talk.

In this personal context, I shared my vision: to see the Philippine Society of Nephrology (PSN) recognized as the leading authority in Kidney Health. This aspiration extends beyond professional goals; it is a deep conviction based on my belief in our collective potential to create meaningful change. This vision aligns perfectly with our mission: to promote and disseminate current knowledge in nephrology, provide guidelines for quality care, and serve as a trusted resource for policy formulation.

Our strategic planning session in June further solidified our vision of PSN as the Expert Champion. We are concentrating our e[orts on achieving Organizational Excellence and ensuring Financial Sustainability, which is essential for supporting our core goals in Education, Training, and Research.

This strategic direction is crucial for PSN's continued growth and impact. Organizational Excellence goes beyond e[icient administration; it involves enhancing our educational initiatives to empower our members with the latest knowledge and skills. We aim to foster a vibrant research culture to advance nephrology, establish strong governance structures to ensure accountability and transparency and guarantee financial sustainability to provide the necessary resources to achieve our goals.

These priorities are reflected in the PSN Strategic Map, which outlines our commitment to capacity development in clinical and ethical practice, delivering the highest quality care, and building a culture of professionalism and integrity within our society. The initial quarter of the fiscal year presented an unexpected challenge due to the PhilHealth issue. However, this situation allowed us to assert our role as Expert Champions. We acted swiftly and decisively, engaging in meaningful discussions with various government units, including PhilHealth, the Department of Health, and the Philippine Congress, as well as other stakeholders involved in the practice of hemodialysis.

The Philippine Society of Nephrology (PSN) proposed that PhilHealth coverage should be based on well-established

minimum standards of care. These standards, recommended by our PSN and international clinical practice guidelines, are designed to ensure the highest quality of patient care. Through this proactive and collaborative approach, PSN played a crucial role in defining these minimum standards for hemodialysis, directly impacting and improving our patients' benefits. Despite the challenges, this situation highlighted PSN's leadership and expertise in advocating optimal kidney health.

Despite facing an initial challenge related to PhilHealth, we have made significant progress in implementing our strategic direction. Our commitment to Organizational Excellence and Education/Training drives transformative changes within the Philippine Society of Nephrology (PSN).

In pursuit of Organizational Excellence, we have successfully implemented the new PSN Constitution. A notable development is the establishment of the Philippine College of Adult Nephrology, which distinguishes between adult and pediatric nephrology while preserving the cohesiveness our founders established from the beginning of PSN. Additionally, we have realigned the various clusters and committees within PSN to make them more responsive to modern needs.

Our dedication to Education and Training is exemplified by the creation of the PSN Academy, which will serve as a central hub for the educational and continuing professional development needs of all PSN members. We have enhanced our educational o[erings with new and revised courses and conducted a comprehensive review of our PSN Outcomes-Based Education (OBE) Curriculum, adding refinements that will benefit all our trainees. This work aligns with our ongoing revisions and improvements to the Training Program Accreditation Efforts.

These are just a few key developments we have initiated in the education and training areas, demonstrating our commitment to empowering our members with the knowledge and skills necessary to provide the highest quality care.

To further secure our future and enhance Organizational Excellence, we also decided to invest in a physical space to support our activities, reflecting our focus on Financial Sustainability. This initiative was presented to the general membership during the last PSN Mid-Year Meeting in November and was met with favorable reception. We are conducting due diligence studies on several identified properties and assure everyone that we are pursuing this project with careful consideration and diligence.

One year is certainly not enough time to see the full results of all our ambitious projects. We have planted these seeds, which require time, care, and ongoing dedication to flourish. However, this year has shown our collective strength—it has been a time of decisive progress, during which we have built a solid foundation for future success. This achievement is not mine alone; it reflects every PSN member's unwavering e[ort, tireless dedication, and passionate commitment. Our spirit of collaboration and shared purpose has propelled us forward, allowing us to overcome challenges and seize opportunities to improve kidney health in the Philippines.

As we embark on the next chapter, let us remain united in our mission, driven by our determination to achieve excellence. Let us continue to find inspiration in our vision of PSN as the leading authority and champion for kidney health in the Philippines. Together, we can ensure that our contributions—no matter how small they may seem—collectively shape a healthier future for all. &

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