

## **NEWSLETTER**

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## 50 Successful Kidney Transplants

## **CONTENT**

- World Kidney Day: Local perspective and the way forward
- AMC Cricket Gala Season IV 2019
- Rheumatic Fever
- Self Medication Practice
- Patients' Testimonials
- AMC Dental Department

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## World kidney day: Local perspective and the way forward





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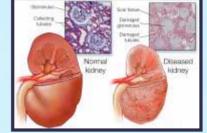
World Kidney Day (WKD) is a global campaign for raising awareness about the importance of kidneys. In 2019, WKD focuses on the high and increasing burden of kidney diseases globally and the urgent need for developing effective strategies for kidney diseases prevention and management.

According to recent estimates, 850 million people are suffering from kidney diseases globally. Both patterns of kidney injuries, Acute Kidney Injury (AKI) and Chronic Kidney Diseases (CKD) are increasingly being recognized as contributing substantially to adverse outcomes. CKD was ranked 27th in the list of causes of total number of worldwide deaths in 1990, but rose to 18th in 2010. Around 2.4 million deaths per year are caused by chronic kidney disease, making it the one of the leading emerging cause of death.

Acute Kidney Injury, not only affects over 13 million people worldwide but is an important contributor to CKD. As disease multipliers and contributors, AKI and CKD exponentially increases morbidity and mortality from other diseases and risk factors including Cardiovascular disease, diabetes, hypertension and obesity.

Pertinent to us, 85% of these cases are reported to be from low and middle income countries. In Asia, which has 60% of the global population, the reported prevalence of CKD is among the highest in the world. While there is Lack of national registry data in Pakistan, the estimated Prevalence of CKD is even amongst the highest in south asia; reportedly 12-29% of its adult population. Furthermore, CKD of unknown aetiology and late presentation to a Nephrologist is quite common.

CKD is being termed as silent epidemic at global level. For an individual as well, CKD is silent in early stages. With rampant lack of awareness in developing countries, there is under-detection of earlier stages of CKD, leading to lack of preventive measures, which inevitably facilitates progression of mild, potentially treatable CKD to End Stage Renal Disease (ESRD).



Renal replacement therapies are lifesaving treatment modalities that help counter ESRD. Transplantation is considered to be the most cost-effective treatment of CKD. However, it has huge infrastructure related cost and requires highly qualified teams, living related organ donors (Pakistan) and an available dialysis backup. In India and Pakistan, around only 10% of all ESRD patients receive any kind of renal replacement therapy.

Renal transplant is scarce and maintenance hemodialysis is the commonest mode.

Against this backdrop, Ali Medical Centre has been offering cost effective renal transplant services with excellent patient and graft related outcomes for past three years.

Ali Medical Centre has performed over 50 transplants with 100% success rate so far.

Recognizing the disease burden, some countries have implemented mass screening programs. Alternatively, case based screening in high risk group is recommended by all the major clinical guidelines. Patients who are at risk for developing CKD should be evaluated with a urine test for proteinuria and a blood test for creatinine to estimate glomerular filtration rate (eGFR). Cost effectiveness of screening has been validated in people with diabetes (DM), hypertension (HTN) and patients aged more than 50 years of age.



Since the total number of Nephrologists in Pakistan is less than 1500, comanagement of CKD patients with primary care physicians and medical specialists is the only logical way forward in taming this epidemic. Primary care physicians can manage DM and HTN, recognize and test at-risk patients, educate patients about CKD, address other risk factors, monitor eGFR and proteinuria, liaison and refer to organ specialists when appropriate, modify drug dosages and help patients adjust their diet in collaboration with the organ specialist.

## **AMC Cricket Gala Season IV 2019**



AMC Cricket Gala Season IV was organized in Punjab Cricket Ground F-10 Islamabad. Seven teams from different departments of hospital participated in the event. It was a very well organized event and all teams gave their best to claim the title. AMC Falcons claimed the title by beating last year champions i.e. AMC Dragons.



## **Rheumatic Fever**



#### **Overview**

Rheumatic fever is an inflammatory disease that can develop as a complication of inadequately treated strep throat or scarlet fever. Strep throat and scarlet fever are caused by an infection with streptococcus bacteria.

Rheumatic fever is most common in 5- to 15-year-old children, though it can develop in younger children and adults. Although strep throat is common, rheumatic fever is rare in developed countries. However, rheumatic fever remains common in many developing nations.

Rheumatic fever can cause permanent damage to the heart, including damaged heart valves and heart failure. Treatments can reduce damage from inflammation, lessen pain and other symptoms, and prevent the recurrence of rheumatic fever.

## **Symptoms**

- Fever
- Painful and tender joints most often in the knees, ankles, elbows and wrists
- Pain in one joint that migrates to another joint
- Red, hot or swollen joints
- Small, painless bumps (nodules) beneath the skin
- Chest pain
- Heart murmur
- Fatique
- Flat or slightly raised, painless rash with a ragged edge (erythema marginatum)
- Jerky, uncontrollable body movements (Sydenham chorea, or St. Vitus' dance) most often in the hands, feet and face
- Outbursts of unusual behavior, such as crying or inappropriate laughing, that accompanies Sydenham chorea

#### **Causes**

Rheumatic fever can occur after an infection of the throat with a bacterium called Group A streptococcus. Group A streptococcus infections of the throat cause strep throat or, less commonly, scarlet fever. Group A streptococcus infections of the skin or other parts of the body rarely trigger rheumatic fever.

The link between strep infection and rheumatic fever isn't clear, but it appears that the bacterium tricks the immune system. The strep bacterium contains a protein similar to one found in certain tissues of the body. So immune system cells that would normally target the bacterium may treat the body's own tissues as if they were infectious agents — particularly tissues of the heart, joints, skin and central nervous system. This immune system reaction results in inflammation.

If your child receives prompt treatment with an antibiotic to eliminate strep bacteria and takes all medication as prescribed, there's little chance of developing rheumatic fever. If your child has one or more episodes of strep throat or scarlet fever that aren't treated or not treated completely, he or she might develop rheumatic fever.

### **Complications**

Inflammation caused by rheumatic fever can last a few weeks to several months. In some cases, the inflammation causes long-term complications.

Rheumatic heart disease is permanent damage to the heart caused by rheumatic fever. It usually occurs 10 to 20 years after the original illness. Problems are most common with the valve between the two left chambers of the heart (mitral valve), but the other valves can be affected.



### **Prevention**

The only way to prevent rheumatic fever is to treat strep throat infections or scarlet fever promptly with a full course of appropriate antibiotics.

## **Diagnosis**

Although there's no single test for rheumatic fever, diagnosis is based on medical history, physical exam and certain test results.

- Blood tests
- Electrocardiogram (ECG or EKG)
- Echocardiogram

#### **Treatment**

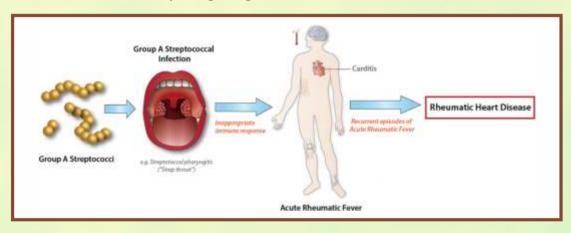
The goals of treatment for rheumatic fever are to destroy remaining Group A streptococcal bacteria, relieve symptoms, control inflammation and prevent recurrences.

Treatments include:

- Antibiotics
- Anti-inflammatory treatment
- Anticonvulsant medications

### Long-term care

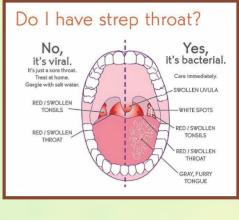
Discuss with your doctor what type of follow-up and long-term care your child will need. Heart damage from rheumatic fever might not show up for years. When your child grows up, he or she needs to include the information in his or her medical history and get regular heart exams.



## **Self Medication Practice: A Current Challenge**

The use of medications without prior medical consultation regarding indication, dosage, and duration of treatment is referred to as self-medication. In most illness episodes; self-medication is the first option which makes it a common practice worldwide.

Responsible self-medication which requires a certain level of knowledge and health orientation has some advantages. Self-medication is thought to reduce the load on the medical services, decrease the time spent in waiting to see the physician, and saves cost especially in economically deprived countries with limited health resources. However, responsible self-medication is not free of risk which can increase the burden and out- of- pocket expenses since it may result in adverse health effects that require medical intervention.







Many articles reported that common Over The Counter (OTC) and Prescription Only Medications (POM) have been associated with adverse health reactions or fatalities. In addition self-medication can slip towards medication with POM and Controlled Drug Prescription Only Medicines (CD-POM). This inappropriate use may result in irrational medicine use, delayed seeking medical advice, increased side effects and drug interactions.

It is alarming that half a million people die annually in the country because of medication errors. The practice is quite common in our society. Whenever one suffers a little pain etc., he takes tablets or syrup on his own without consulting a physician. According to a report published in 2017, about 500,000 people, including women and children, die annually in Pakistan because of self-medication.



Health professionals are one who has potential role in preventing risks of self-medication. Because he is the one who work on three main therapeutic aspects of professionalism in his daily practice: Information, therapeutic advice and education.

Pharmacist is one of the key role players in educating his customers about the proper use of medicines, which are intended for self-medication. For that necessary steps have to be taken in his training and practice.



Pharmacists play a valuable role in identifying, solving and preventing drug-related problems for the purpose of achieving optimal patient outcomes and quality of life. Ambulatory (out-patient) based pharmacists have the opportunity and responsibility to foster safe, appropriate, effective and economical use of all medications, especially those therapies patients are self-selecting. Pharmacists should guide their customers to consult the physician before taking any medication by self.

As a member of the health-care team, the pharmacist must participate in health screening to identify health problems and those at risk in the community, participate in health promotion campaigns to raise awareness of health issues and disease prevention, provide advice to individuals to help them make informed health choices.

Self-medication is an alarming concept. It would be safe, if the people who are using it, have sufficient knowledge about its dose, time of intake, side-effect on over dose, but due to lack of information it can cause serious effects such as antibiotic resistance, skin problem, hypersensitivity and allergy. Hence it is recommended that holistic approach should be taken to prevent this problem, which includes proper awareness and education regarding the self-medication and strictness regarding pharmaceutical advertising.

Health professionals have to spend some extra time in educating patients regarding self-medication outcomes. Improved knowledge and understanding about self-medication may result in rationale use and thus limit emerging issues like microbial resistance.



## Patients' Testimonials



I am very satisfied by the efforts of your staff. They took good care of me, especially Mr. Shad Raes and Mr. Adil both are very dedicated to their job. Mam Munira and Mr. Alauddin are also very brilliant and have trained their staff brilliantly.

44

Naeem Massi and Bushra's behavior was very good. They are very nice persons with polite attitude and good behavior. They were very cooperative with us.

## **Umar Arshad**

## Zeeshan

"

All staffs are very accommodating with fast Service. Cleanliness is very good.

**L** Every patient was managed very well besides a very busy day. Staff was very cooperative & highly trained. This place is not less than any ER in USA. Cleanliness was magnificent. Doctor was available & very cooperative. Nursing staff & other assistive staff was also very good.

## Yuka

## Fatima Saleem

"

Dealing of nurse afsana was upto the mark with great educated conduct and good behavior. She listens to the patient clearly and visibly notices and helps out. Good and well done Nurse Afsana! "

Really wonderful staff. May Allah bless them all!

77

## Lubna Azhar

## Saadia Ilyas

" We came here through emergency for cardiac assessment. We were given excellent privileged treatment. Staff is very caring and courteous. Thumbs up to entire staff & administration. May Allah give you best reward in both worlds. Aameen

" Staff has been very courteous and caring since I have been bringing my father to the ER for almost a month now. Excellent staff and very professional. A suggestion to offer a discount to senior citizens in the ER. Keep up the good work!

## M. Abdul Latif

## Mehmood M Azad

" Highly professional, extraordinary patient care imported to the patient especially by Nurse Shah Raees with his kind attitude. Doctors regular visits and explaining every detail was much appreciated.

"

77



## **Iilal Hussain**

## **Child: Shirien Noor**

All the staff, nurses & doctors were awesome and great. Especially Salman a very responsive guy. Aroosa, Areen, the quard standing over door was so protective and vigilant. The cute old senior nurse in labor room was an 'angel' I found in AMC. She was so nice, delicate and humble. Dr. Javeria, a very spledid doctor I ever found in my life. I am thankful to all. Dr. Nazia & many nurses of labor room, I dont know their names, all were awesome.

I stayed at SP-10 Room from 15 to 18 April, 2019. I have no complaint. I found doctors and para medical staff extremely cooperative and hard working. I am very thankful to hospital management and administration also.

Samina Zulfigar

Adil Ali



## AMC DENTAL DEPARTMENT

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8