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**Anemia and chronic renal failure on replacement therapy (dialysis) in a population of patients awaiting renal transplants from a tertiary care nonprofit making Institute Government of Karnataka, India**

The burden of chronic renal failure on the patients with ongoing renal replacement therapy. This observation is dedicated to all the patients regardless of where they are who belong to, the deep end of poverty due to the disease per say in a gradual process every cycle means depletion of resources.

This is story of a group of 94 patients who enrolled for renal replacement therapy after being diagnosed as chronic renal failure. These patients have gone through various modalities of renal replacement therapy from haemodialysis to repeated graft failures to peritoneal dialysis. Their age varies from 9 to 70 odd years. These patients have a had haemoglobin on arrival as low as 4.5. These patients were then started on erythropoietin stimulating agents on weekly basis or fortnightly basis. The legacy of chronic anaemia and their mortality. The question is is low haemoglobin the only mortality indicator?

Over a period of 5 to 6 years we have seen that the mortality is 50% predominantly low haemoglobin, infection and the causal factor being non compliance due to the burden of


economics on the patients. Lack of education has also been the second leading factor which has lead to block of fistulas loss of access for haemodialysis then opted for peritoneal dialysis. The other causes have been pulmonary oedema, palliative approach of the patient not wanting to burden the family of its resources 2 patients have succumbed to death after transplant 85% of these patents come from rural background.

We have also seen that patients with nuclear family and joint family and emotional support structure has not improved their overall smile curve.

### **Speaker Biography**

Sujatha Siddappa has qualified in Pathology, pain and palliative care, human resource management, law regarding fundamental rights, waste management currently pursuing masters in hospital management. Over the last 2 decades and more of pathology practice she has gradually swerved towards renal pathology and GU pathology in the last 10 years. Her forte of interest includes clinical pathology, cytology histopathology, with focus on renal and GU pathology. She has had a good innings in her publication related to GU pathology which have reached out to highly engaged audience with Google scholar and research gate credits nearing 500 reads in the last couple of years and citations

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