END - STAGE RENAL DISEASE AND KIDNEY REPLACEMENT THERAPY IN BACHMAI HOSPITAL HANOI - VIETNAM

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Overview of Vietnam

Location: South East Asia

Population: 84 millions 332 000 km2 60 provinces and 5 cities

Urban areas: 25%

Rural areas: 75%

Population growth rate: 2.1% per year

People of working age: 52 millions

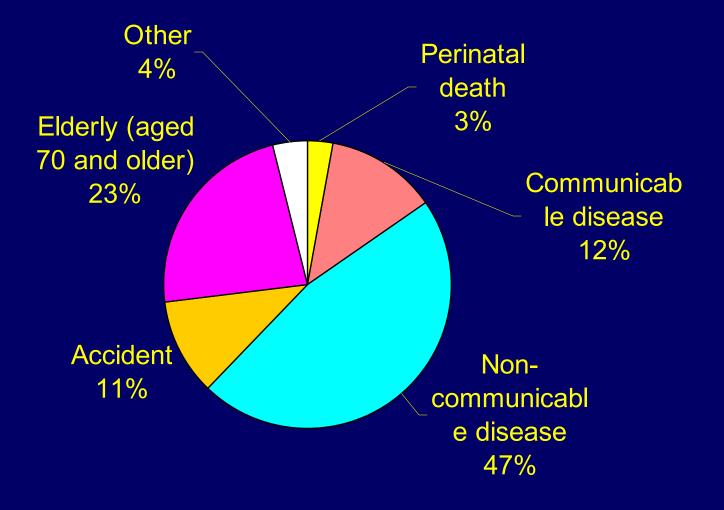
In 2005:

6 doctors and 6.3 nurses

per 10,000 inhabitants



HEALTH CARE IN VIETNAM Structure of cause of death



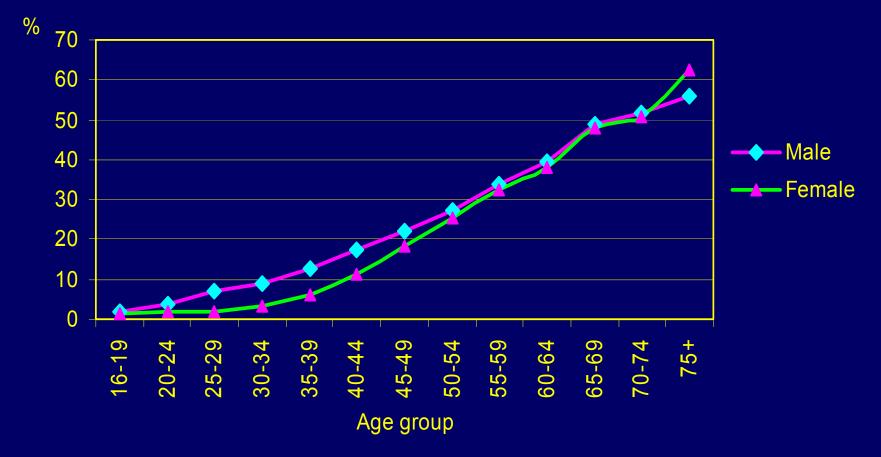
Important non-communicable diseases

Economic growth, aging population, lifestyle changes are causes leading to an increasing burden of noncommunicable diseases.

Cancer: Vietnam reports about 75 000 new cases of cancer/year. The case fatality rate is high, and cancer accounts for around 12% of total deaths annually in Vietnam.

Vavular heart diseases decrease, MI is now one of leading causes of mortality.

Prevalence of hypertension by age group and sex



-Hypertension: prevalence of hypertension in those \geq 16 years is 15.1% in males and 13.5% in females. An estimated 50% of men and women > 65 years have hypertension.

Accidents and injuries

- * Accidents and injury: accidents are the 4th leading cause of death in Vietnam (11%) as well as disability.
- * Traffic accidents is alarming cause. On average, > 40 people died each day
- * \Rightarrow Strong intervention from government: helmet wearing is obligated since 15th, Sept 2007.







Health care in commune



TRAM Y TÉ XĂ CẨM NHƯỢNG, HUTÊN CẨM XUYÊN (HÀ TÎNH)





Health care center In districts





Health care in Hospita



BỆNH VIỆN TRUNG ƯƠNG HUẾ

Bach Mai Hospital Hanoi Vietnam

Establishment: more than 100 years hystory. The biggest general

hospital in Vietnam

Total staff: >2170

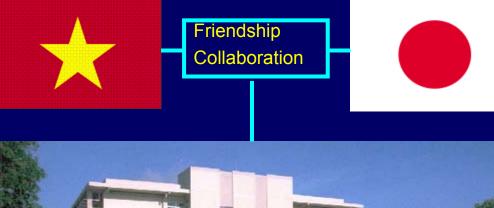
Medical doctor: > 350

Nurse: > 900

Professor and Associate Prof: >30

Ph.D degree: >50

Master degree: >70





Building which was funded by Japanese government and people (JICA project)

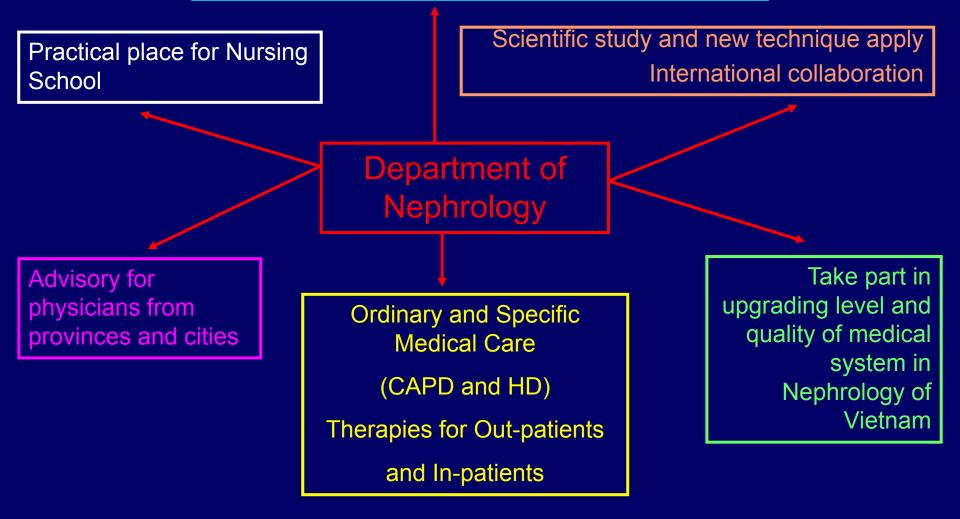
Number of bed in Nephrology for in-patients: 80

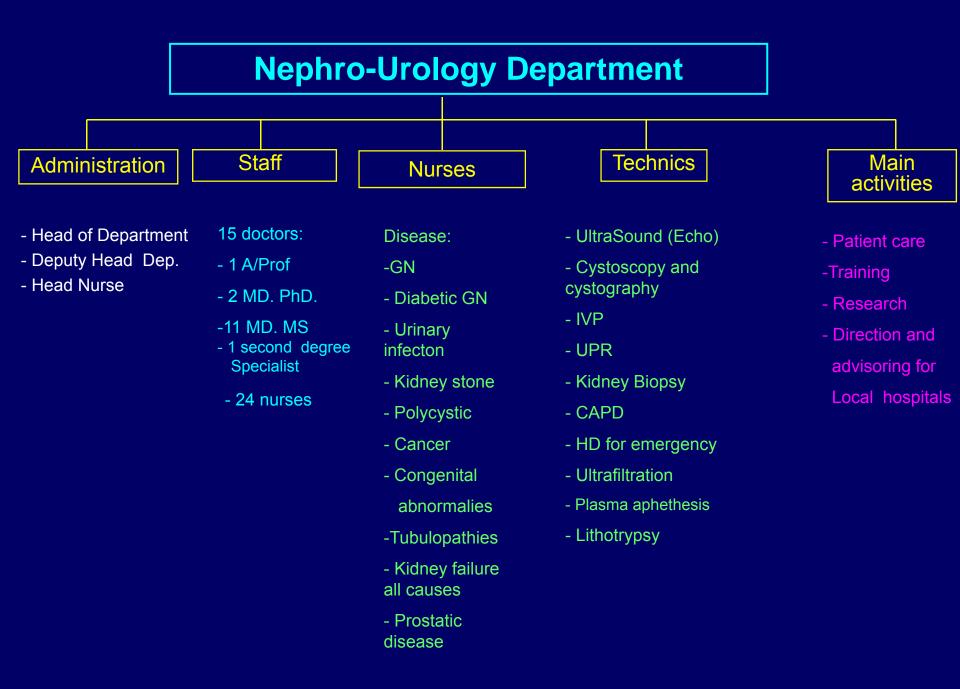
Functional Characteristics of Nephro-urology

Major center for training of Hanoi Medical University

Under-graduate, Graduate level

Training for clinical specialist and CME





CLINICAL ACTIVITIES

Department has experienced in treatment and education for 30 years with:

- 1. The nephrology out-patient service : Approx: 18000 patients visit/year.
- 1. Inpatient activity: 80 inpatient beds, over 3563 patients/year
- 2. Before 9/2007: we had 12-25 cases acute HD daily
- 3. From 9/2007 : Received dialysis machines from NPO Japan many of life are timely saved.

In-patients

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Out-patients

NOI NHÂN MÀ XẾT NGHIỆN SINH HƠA - HUYỆT HỌC MHẾN NOI NHÂN SINH HOA - HUYET HỌC - VI SINH

CLINICAL ACTIVITIES

- 1. Patients admissions :
- □ Acute renal failure,
- Chronic renal failure with or without complications
- Nephrotic syndromewith or without complications
- Obstructive uropathy or urinary tract infection.

CLINICAL ACTIVITIES

1. The follow up :

- Consultation units for chronic renal failure patients
- New patient who are referred to the nephrology department for (CAPD) or kidney transplantation.
- Urologic problems



CKD IN VIETNAM

- 2002 in central vietnam: 3,38 % CKD at various stage:
- Stage I : 0,28%,
- Stage II : 0,39%
- Stage III : 0,16% ,
- Stage IV , V: 0,09%
- Age : 51,7 ± 16,5 years

2005 : Hanoi screening: Identified 3.1% of subjects as CKD (stages 3-5) with positive findings in urine test

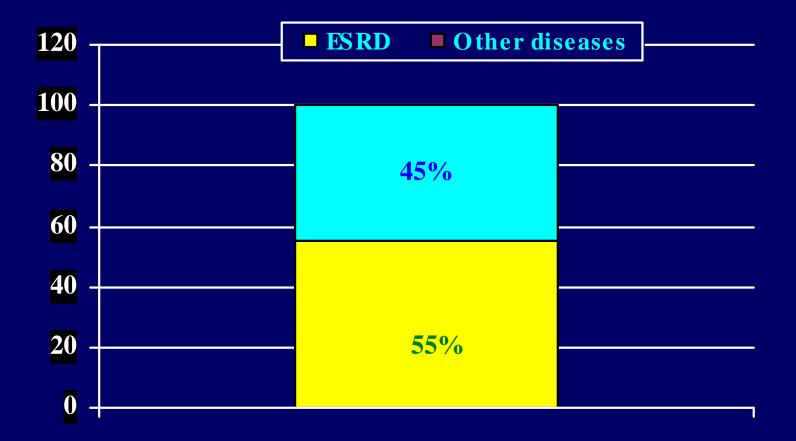
2008:

• Estimated 100-150 new patients/ million/ year

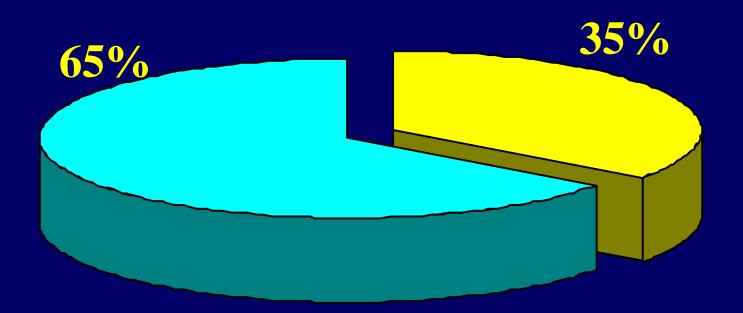
•Total new patients/ years : 1000

•ESRD patients on hemodialysis : 10000

PERCENTAGE OF ESRD PATIENTS IN DEPARTMENT OF NEPHROLOGY

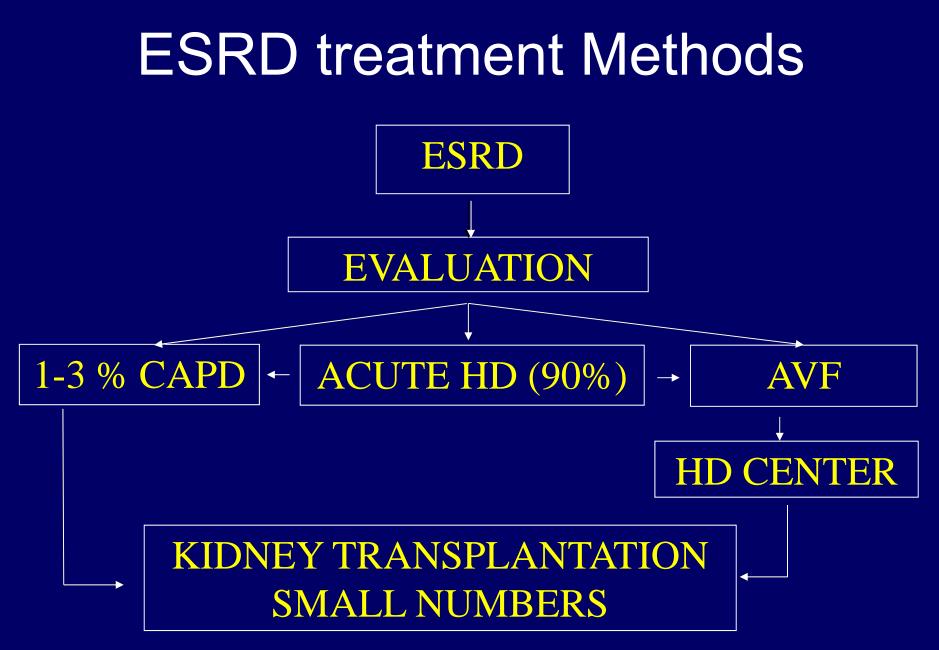


Sex distribution of ESRD patients



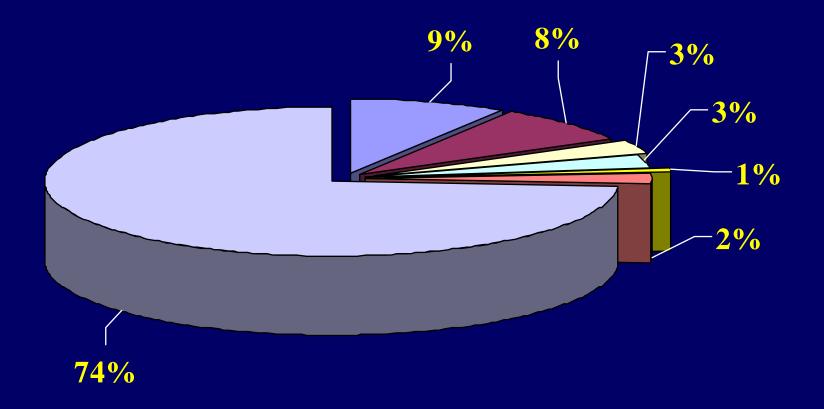






90% ESRD patients come at very late with complications

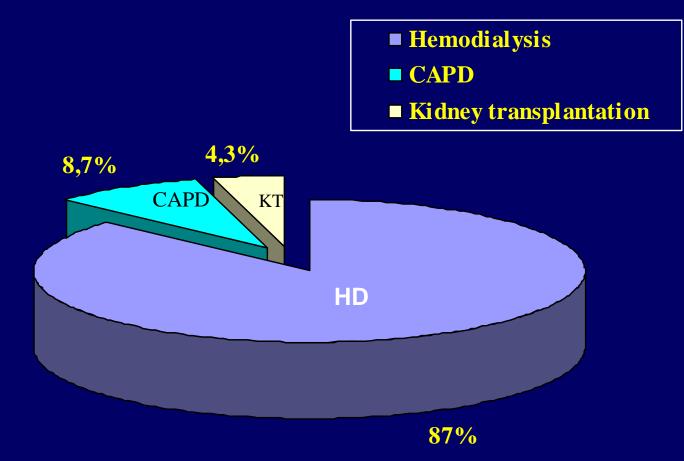
CAUSES OF RENAL DISEASES ON HD



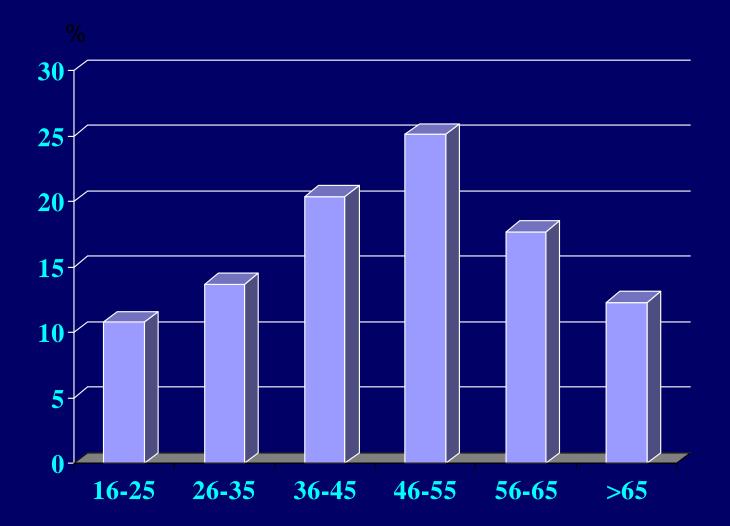
Diabetic Nephropathy
 Polycystic kidney disease
 SLE
 Chronic GN

Kidney Stone
Hypertension
other

ESRD AND TREATMENT METHODS



HD AND PATIENT AGE



Internal jugular central line or femoral line for acute hemodialysis





Internal jugular central line for acute dialysis



HD THERAPY

- Total number in Vietnam: Approx: 10000
- Not all provinces have dialysis center
- Mostly located in cities and big hospital:
- Hanoi : 300, Hochiminh City: 600 patients
- Payment: Insurance cover for insurance card holders
- Dialyzer : Reused and most low flux
- Cost : 20 USD/ 4 hours

HD THERAPY in hospital

- **1.** Acute dialysis unit
- 25-30 patients /day
- Internal jugular central I or femoral line
- waiting for AVF maturation
- 2. Chronic dialysis unit
- Patients : 600
- Total HD machines: 80
- 4 shifts per day
- Patients with longest duration on HD : 20 years

Acute HD unit



Chronic DIALYSIS unit





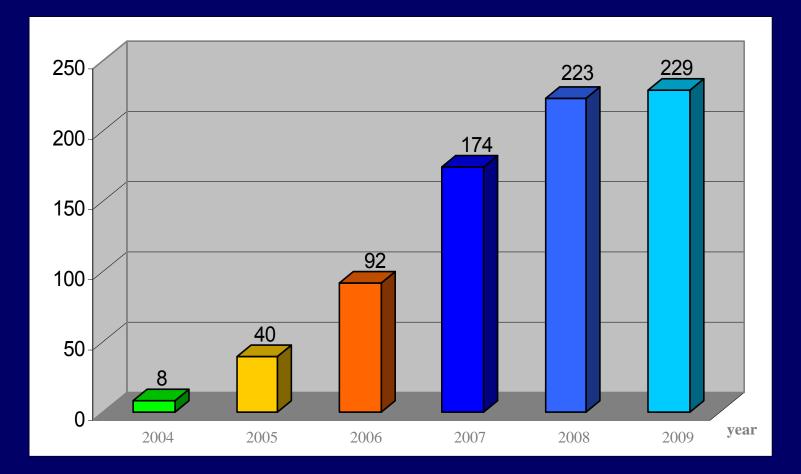




CAPD TREATMENT

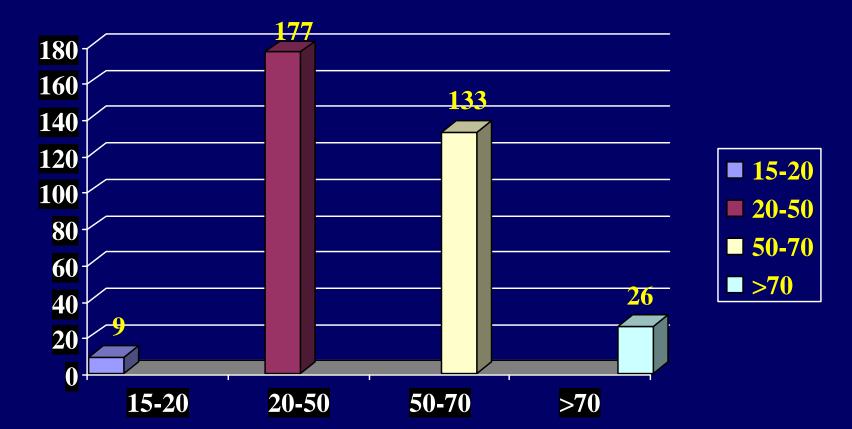
- Started in Vietnam since 2000
- Total number in Vietnam: Approx: 1100
- Not all provinces have CAPD center
- Country total : 22 center for CAPD
- Mostly located in cities and big hospital:
- Hanoi : 300, Hochiminh City: 600 patients
- Come to see doctor : Monthly
- Patients choices:
 - 1. On working
 - 2. Far from hemodialysis center.

CAPD IN DEPARTMENT OF NEPHROLOGY The number of patients on years



N= 345

AGE OF CAPD PATIENT n = 345



Oldest: 81

youngest: 15

CAPD TREATMENT



CAPD TREATMENT IN OUR HOSPITAL

CAPD started 2004

- Total numbers CAPD : 345
- Present: 230
- •Mortality after 6 years: 74 (21,4%)
- Turn to HD and Kidney Transplantation : 41 (11,9%)
- •Cost: 400 USD/ month

•Payments: Insurance company for health insurance card holders

Conlusion

Avenues for improvements in our country include:

- Increasing awareness of renal disease amongst the population and general practitioners
- 2. Early diagnosis of CKD, making preventive strategies to delay the onset of ESRD
- 3. Greater government involvement to better fund units, enhance the quality of services and the wider availability of transplantation.



Mekong Delta

Saigon