# Letter To The Editor

# What Is in Store for Us at World Kidney Day 2016? The Malaysian Experience

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Dear Editor,

Chronic kidney disease (CKD) is one of the life-threatening conditions that demand more attention from healthcare industry (1, 2). Annual reports of 2015 World Kidney Day (WKD) predict an increase in CKD by 2030 among the African and Asian population (2). However, the main focus of WKD 2015 is to educate public in preventing CKD among underprivileged community. The ISN (International Society of Nephrology) co-founder of WKD maintains record of the progress of the previous year wherein 90 countries participated and published the respective scientific information in 50 journals reflecting a great success of the organization. Meanwhile the interventions of forthcoming event aim to produce a healthier generation by eliminating the root-causes of CKD in children.

Official figures of CKD project that about adults above 18 years of age succumb to diabetes because of unhealthy eating habits (3). Under such impression, how are we prepared for WKD 2016 that is going to focus the pediatric community? Malaysia known for its diverse food culture is equally under threat, due to the after-effects of food habit like obesity, diabetes and hypertension among children. These factors are the causes for deterioration of renal activity which is alarming. Though prevalence rate is less among younger generation, the increased risk to cardiovascular diseases and infection has influenced WKD foundation to divert attention towards pediatric population. The Malaysian protocol of diagnosing CKD considers creatinine and albumin levels as baselines, whereas the recent research mentions their traces to be missed in diabetics (3). Therefore, it is recommended to estimate glomerular filtration rate in the early stages of diabetes to diagnose CKD among Malaysian population, especially children. Upcoming WKD event has proposed the similar objective in detecting the grievous disease at an early age and to educate the parents and caregivers, who have a natural bond with the infants and children to treat the CKD.

National Kidney Foundation (NKF) has been seriously working on the betterment of CKD candidates since 1970s (4). Other major co-partners actively involved in the life-long management of CKD include Ministry of Health Malaysia (MOH), Malaysian Society of Nephrology and Academy of Medicine Malaysia. Medically, the asymptomatic nature of CKD favours the delayed diagnosis and eventually accelerates the new admissions. If at all the public is cornered for the consequences attributed to their negligence, the current reports mutually express the need to ameliorate the diagnosing methods practiced in a multiethnic population (3). Being on a positive side, multiple dialysis centers (28-NKF; 326-MOH) are effectively functioning and an inauguration of few more clinics is expected (4, 5). Regular monitoring of these units is performed by MOH to ensure the quality of care; MOH freezes clinics in case of poor standards.

Our honourable Prime Minister Dato' Sri Najib Razak has sanctioned RM72 million in 2016 budget for hemodialysis services denoting 60% increase from previous allocation (6). It is an appreciated act, but the involved expenses proportionally decline nation's economy. Irrespective of the honest efforts rendered from MOH, mutual cooperation from the community, public-private sectors, and professionals in treating or preventing CKD will yield positive remarks in Malaysian pediatric circle in the awaited 2016 WKD.

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