

Optimizing Kidney Disease Outcomes: The Role of Rehabilitation in Patient Care

Dr. Bryan Chong Men LEONG

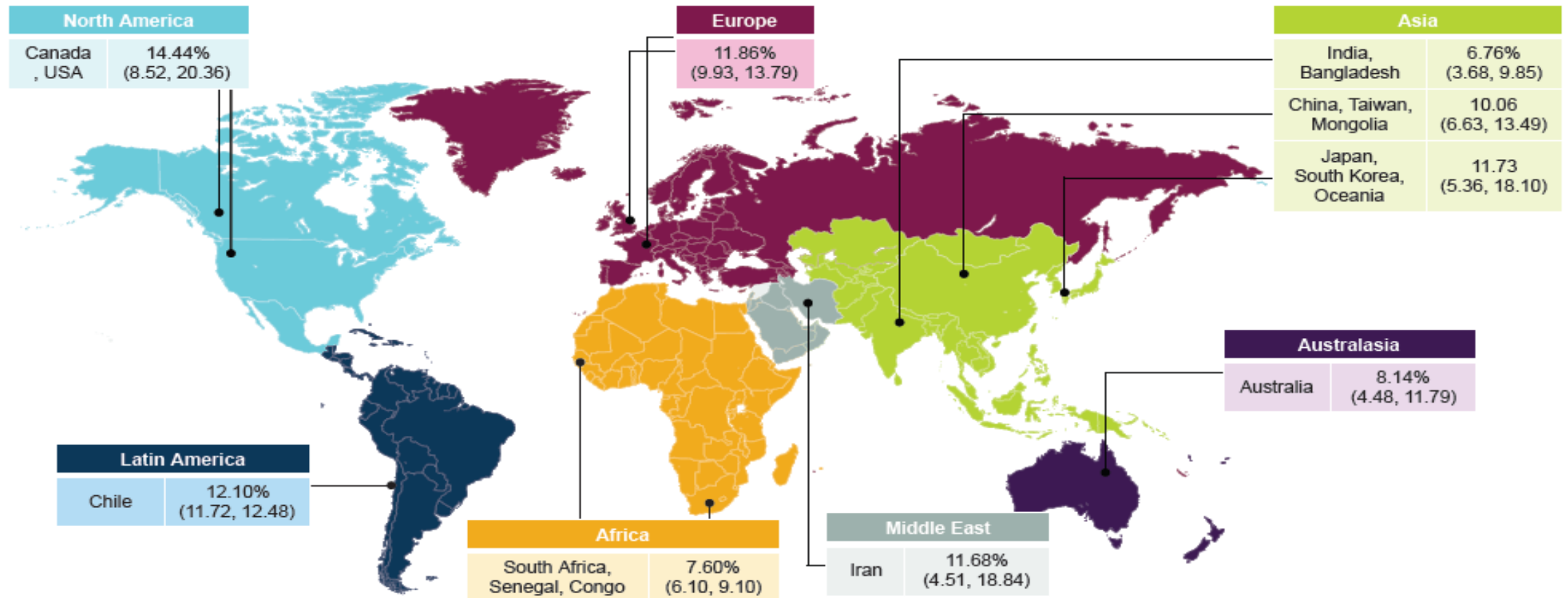
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CKD is a highly prevalent, global disease

The global prevalence of CKD is over 843 million¹

Meta-analysis estimating the global prevalence of CKD (stages 3–5)²



CKD = chronic kidney disease.

3 1. Jager KJ et al. *Nephrol Dial Transplant*. 2019;34:1803–1805; 2. Hill NR et al. *PLoS One*. 2016;11:e0158765.

Prevalence of CKD



Thailand: 17.5%



India: 17.2%



Singapore: 15.6%



China: 10.8%

RESEARCH ARTICLE

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Prevalence of chronic kidney disease and its associated factors in Malaysia; findings from a nationwide population-based cross-sectional study




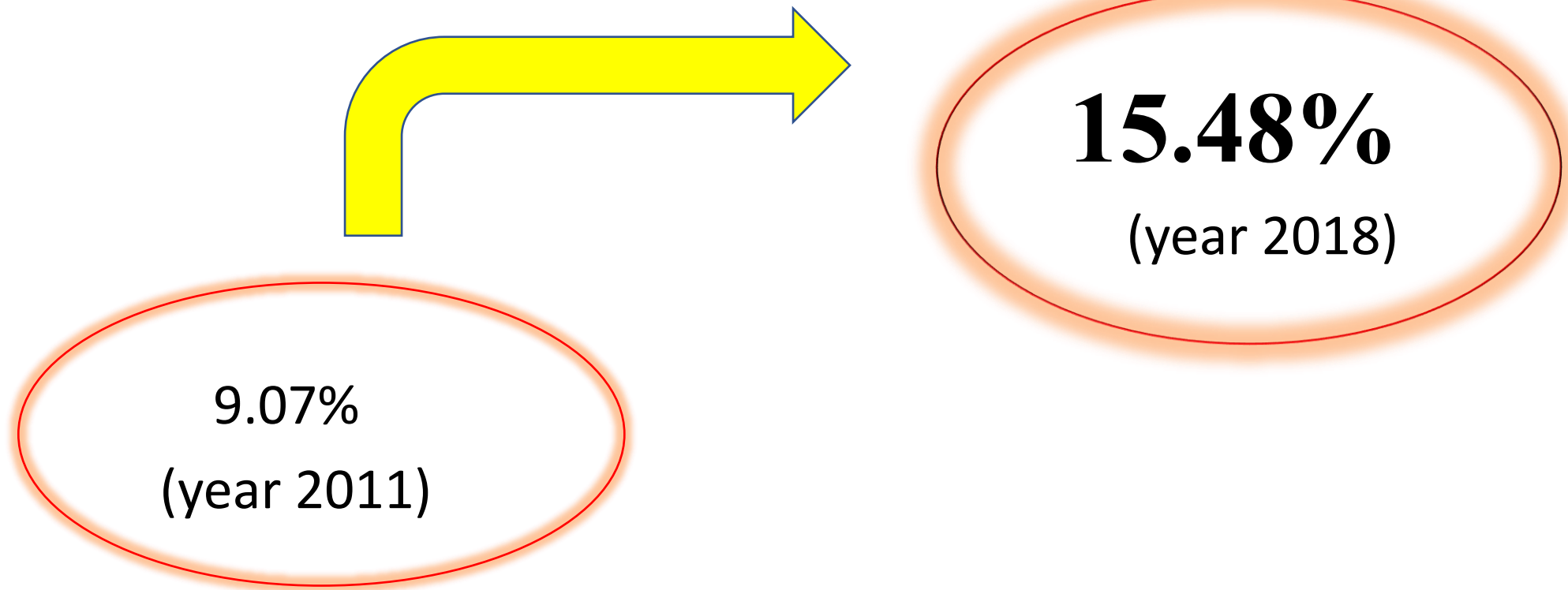
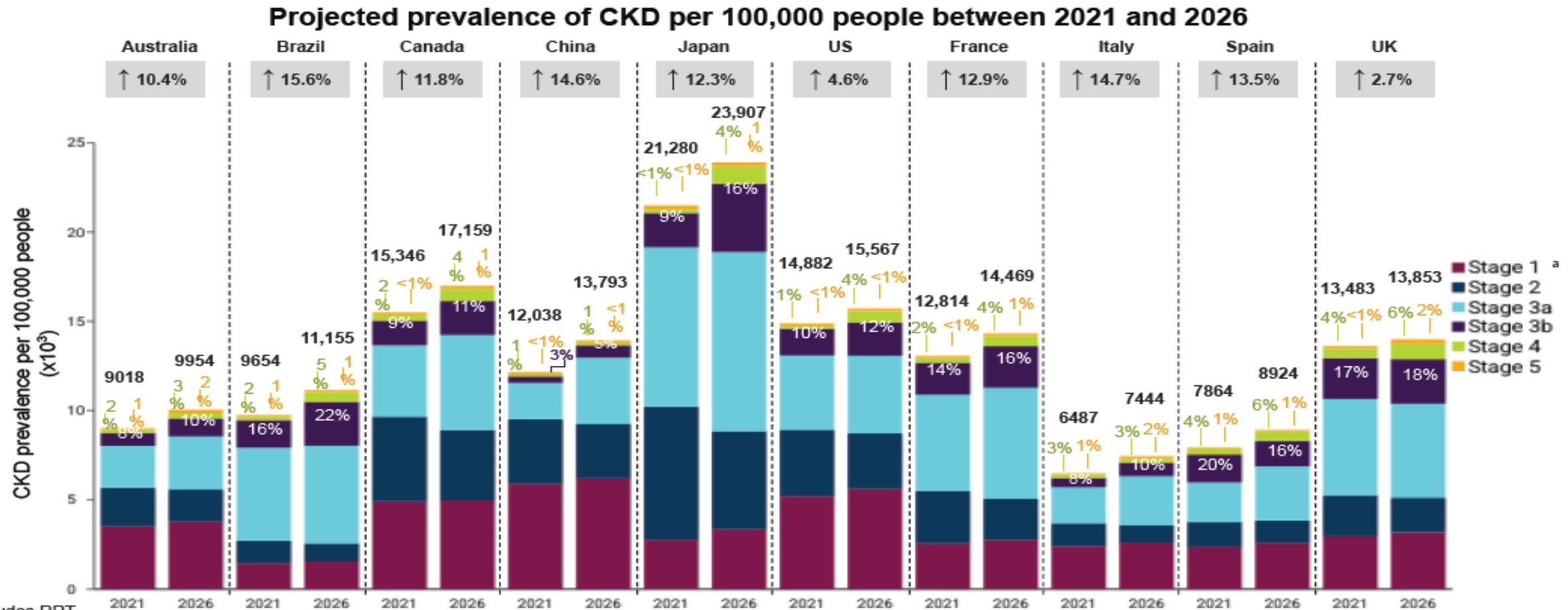
Thamil Arasu Saminathan^{1*} , Lai Seong Hooi², Muhammad Fadhli Mohd Yusoff¹, Loke Meng Ong³, Sunita Bavanandan⁴, Wan Shakira Rodzlan Hasani¹, Esther Zhao Zhi Tan⁵, Irene Wong⁶, Halizah Mat Rifin¹, Tania Gayle Robert¹, Hasimah Ismail¹, Norazizah Ibrahim Wong¹, Ghazali Ahmad⁴, Rashidah Ambak¹, Fatimah Othman¹, Hamizatul Akmal Abd Hamid¹ and Tahir Aris¹

Table 5 Prevalence of CKD by stages (*N* = 890)

CKD Stages	n	Estimated population	Prevalence (%)	95% CI
Total CKD	158	2,607,448	15.48	12.30, 19.31
Stage 1	42	649,069	3.85	2.51, 5.87
Stage 2	51	811,853	4.82	3.14, 7.32
Stage 3	59	1,091,582	6.48	4.41, 9.43
Stage 4–5	6	54, 944	0.33	0.14, 0.78



The prevalence of CKD is projected to increase through 2026, driven by more advanced stages of disease

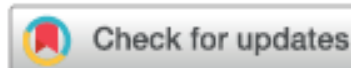


^aIncludes RRT.

CKD = chronic kidney disease; RRT = renal replacement therapy; UK = United Kingdom; US = United States.

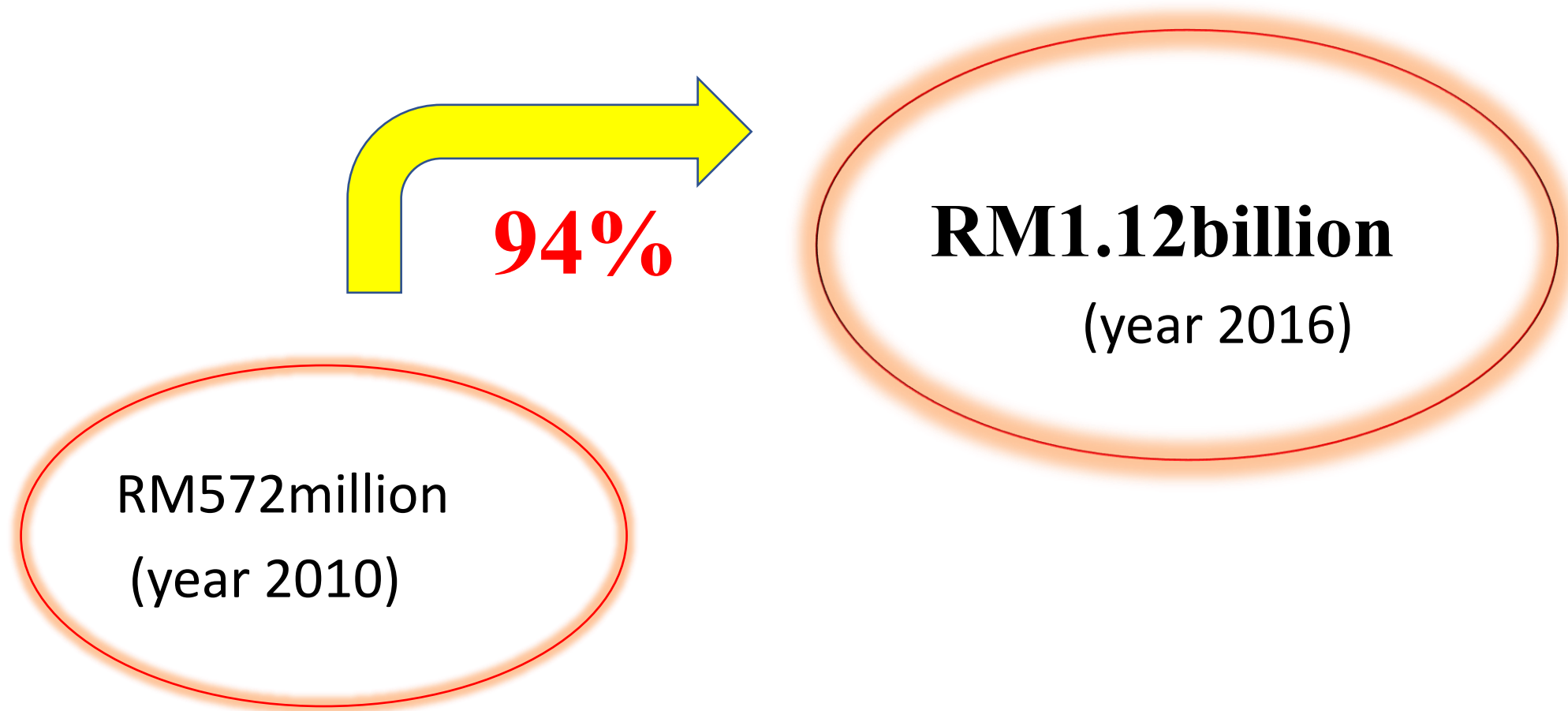
1. Tangri N et al. Poster presented at: WCN; April 16-19, 2021; Virtual. Poster #0668; 2. Power A et al. Poster presented at: WCN; April 16-19, 2021; Virtual. Poster #0657.

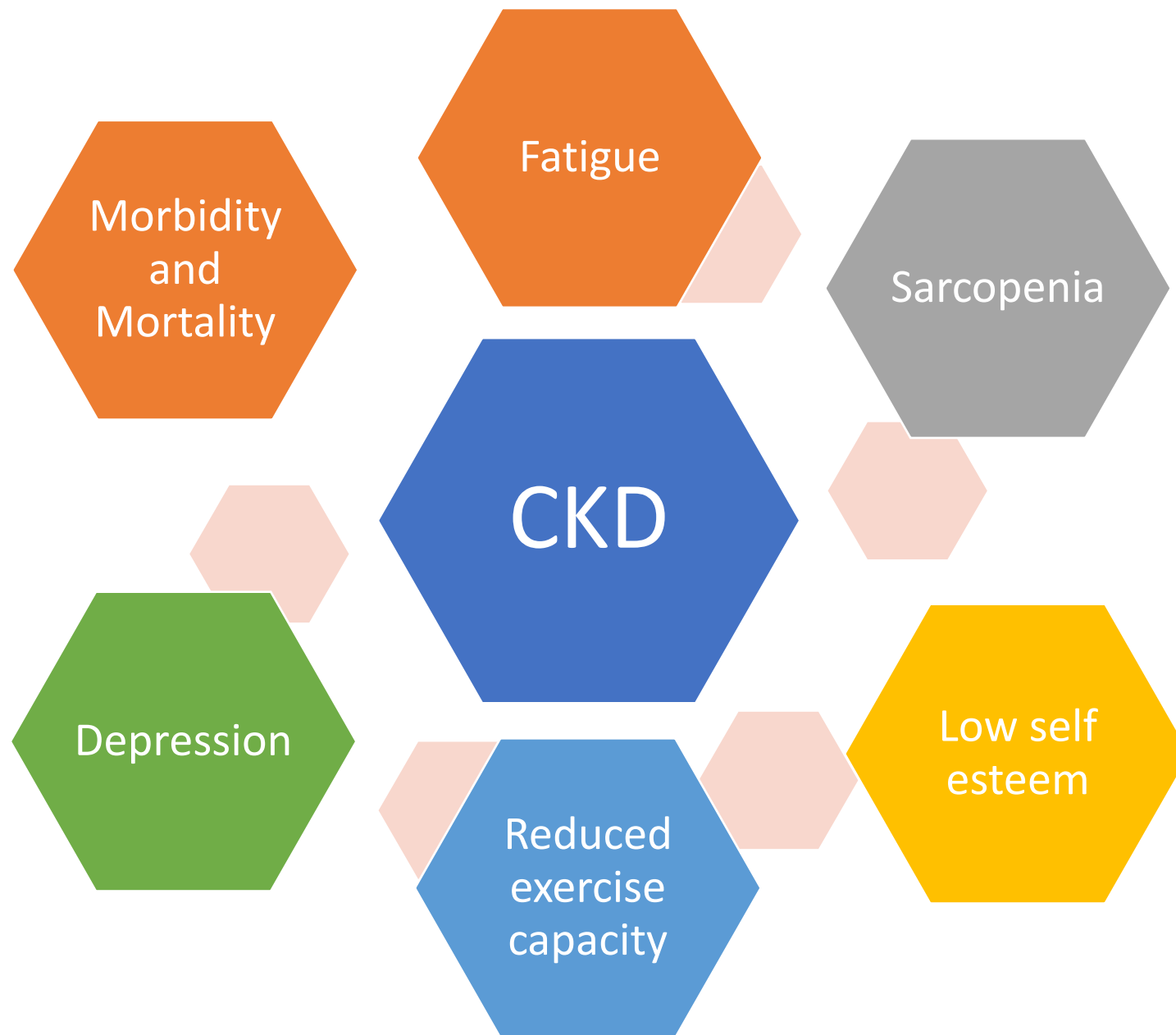
Economic Burden of ESRD to the Malaysian Health Care System

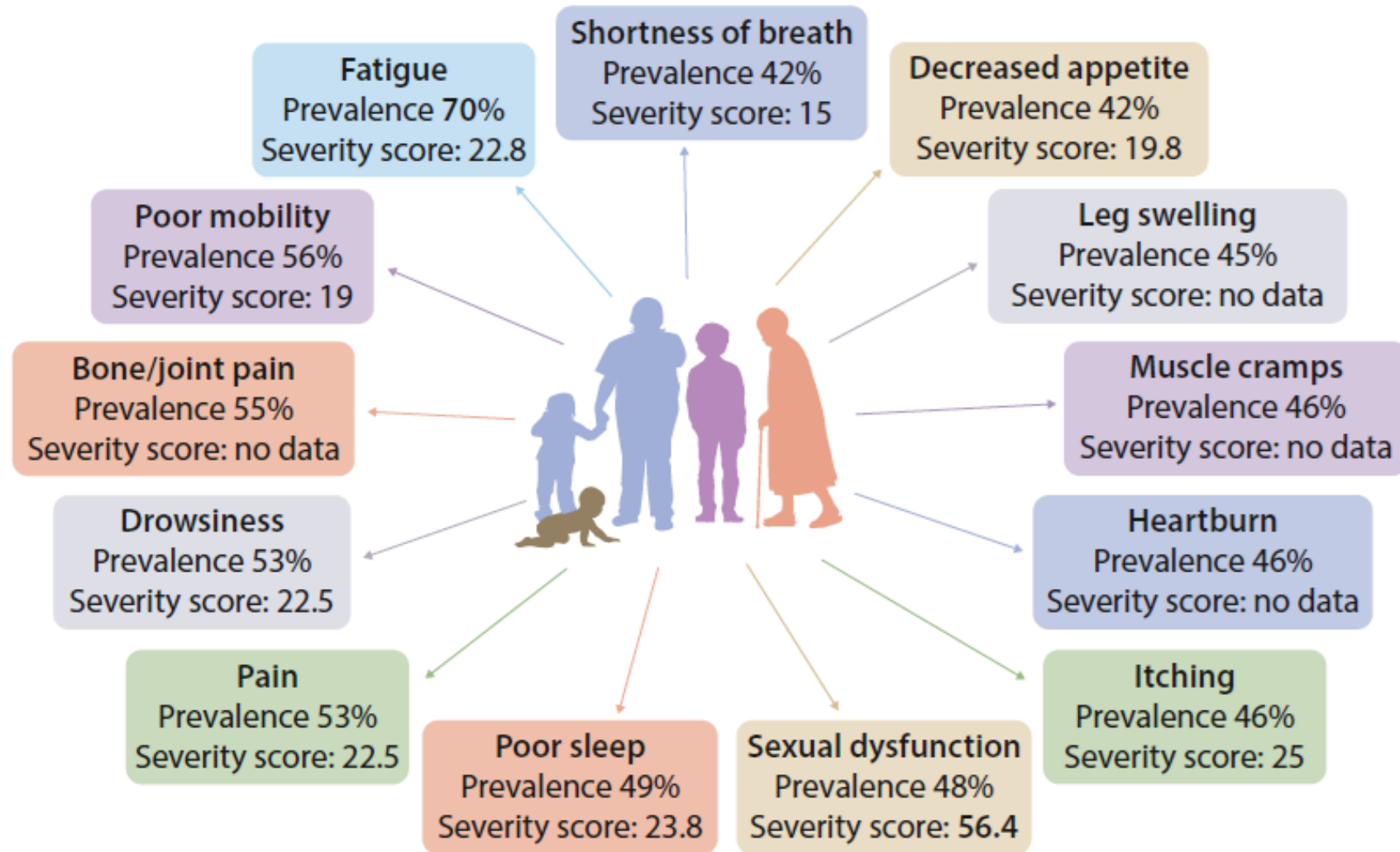


Hirman Ismail^{1,2}, Mohd Rizal Abdul Manaf², Abdul Halim Abdul Gafor³,
Zaki Morad Mohamad Zaher⁴ and Adriana Irawati Nur Ibrahim⁵

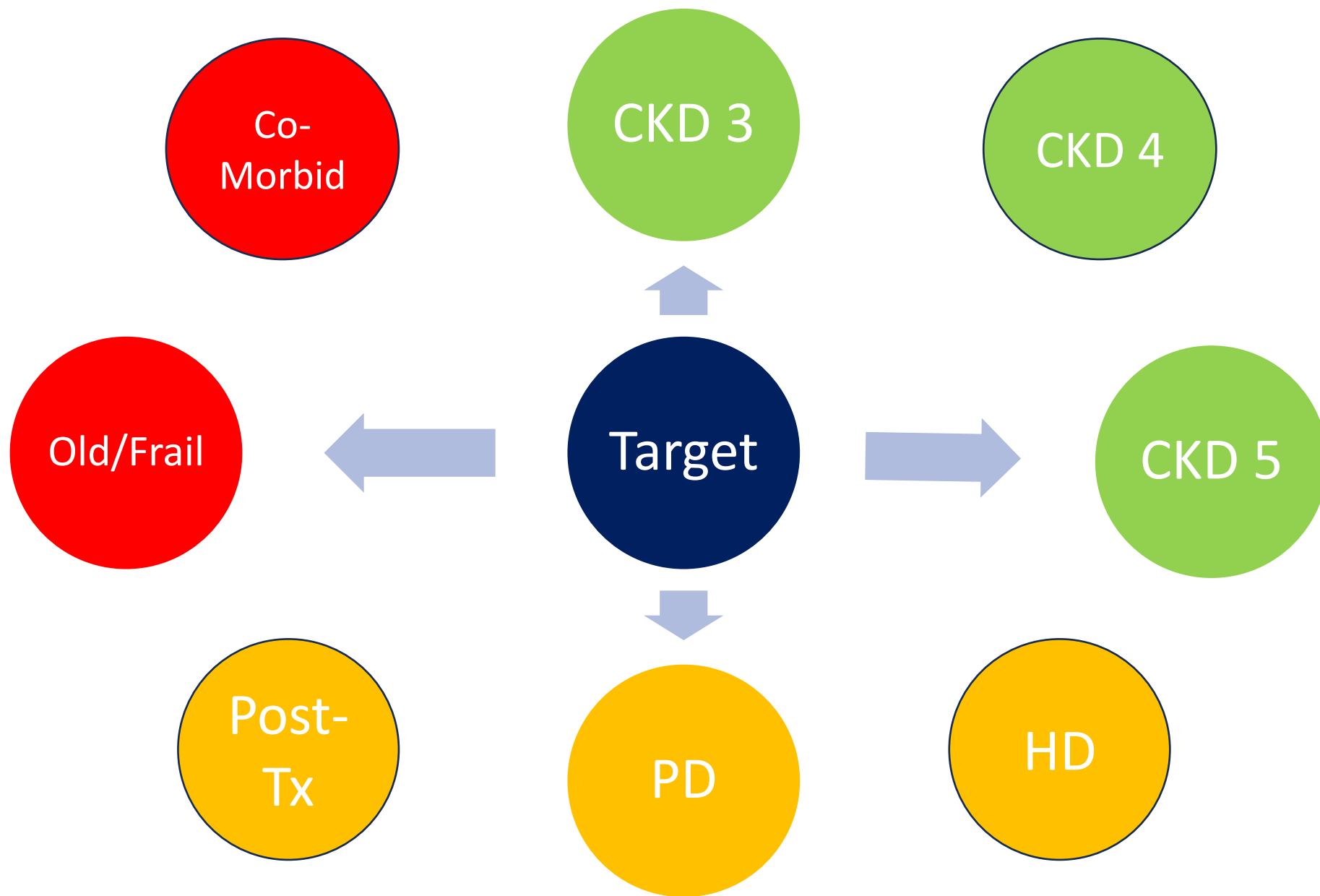
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Fletcher BR, Damery S, Aiyegbusi OL, et al. Symptom burden and healthrelated quality of life in chronic kidney disease: a global systematic review and meta-analysis. PLoS Med. 2022;19:e1003954



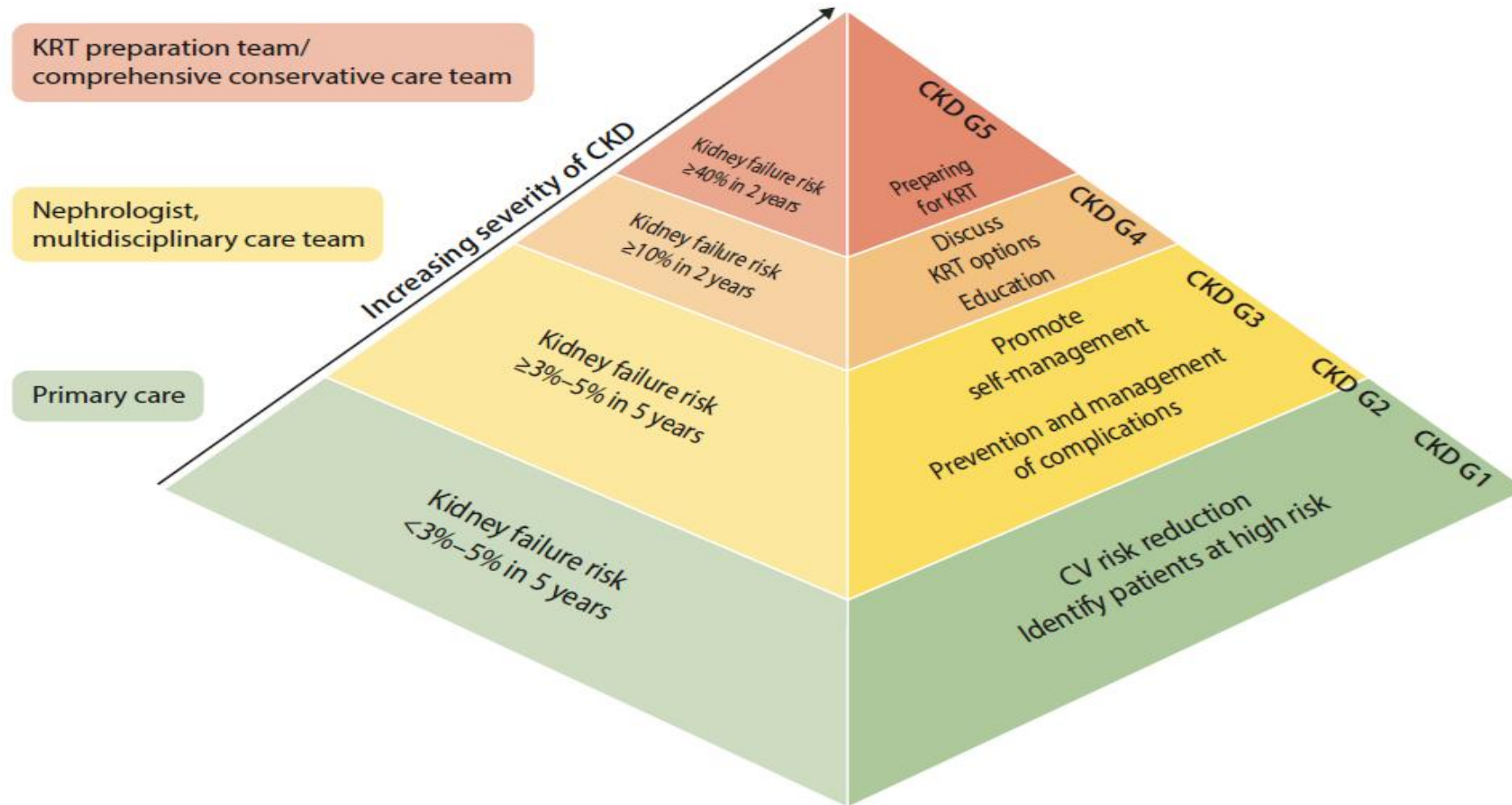


Figure 50 | Optimal care model by increasing severity of chronic kidney disease (CKD). CV, cardiovascular; KRT, kidney replacement therapy.

Renal Rehabilitation

Multi-Disciplinary Approach

- Doctor
- Nurse
- Pharmacist
- Dietitian
- Physiotherapist
- Occupational therapist
- Psychologist/ psychiatrist
- Social welfare officer
- Peers support group

Aspects of Rehabilitation

- Physical wellbeing
- Laboratory parameters
- Nutritional status
- Physical fitness
- Self-care
- Mental health
- Self-esteem
- Vocational
- Social life

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DEATH AND SURVIVAL ON DIALYSIS

31st Report of the
Malaysian Dialysis and Transplant Registry 2023

Factors	n	Hazard ratio	95% CI	P-value
Modality				
HD (ref*)	117,324	1.00		
PD	19,304	0.79	(0.764, 0.818)	<0.001
BMI				
BMI <18.5	5,148	1.34	(1.278, 1.41)	<0.001
BMI 18.5-25 (ref*)	55,620	1.00		
BMI 25-30	56,544	1.07	(1.053, 1.097)	<0.001
BMI ≥30	19,316	0.94	(0.917, 0.971)	<0.001
Albumin (g/L)				
<25	4,010	7.04	(6.639, 7.463)	<0.001
25-<30	8,960	4.12	(3.943, 4.301)	<0.001
30-<35	25,580	2.42	(2.353, 2.499)	<0.001
35-<40	62,590	1.55	(1.514, 1.59)	<0.001
≥40 (ref*)	35,488	1.00		

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Practice Point 5.2.3.3:
Enable availability of appropriate medical nutrition therapy for people with signs of malnutrition, ideally under the supervision of renal dietitians or accredited nutrition providers if not available.





Recommendation 3.2.2.1: We recommend that people with CKD be advised to undertake moderate-intensity physical activity for a cumulative duration of at least 150 minutes per week, or to a level compatible with their cardiovascular and physical tolerance (1D).





















