

Donations received during the quarter:

Main Donors	
Shri Kunjalbhai Patel (Voltamp Transformers Ltd., Vadodara)	Rs. 6,50,000
Shri Hemantbhai Shah (Navin Group)	Rs. 3,75,000
Other Donors	
Shri Sunilbhai I. Patel	Rs. 3,000
Shri Bhupendra R. Shah	Rs. 2,901
Shri Shakti Singh	Rs. 3,000
Shri Prakash R. Jalgaonkar	Rs. 2,000
	
Ahmedabad	
Shri Rashmikantbhai Shah	Rs. 1,28,000
Vadodara	
Narayan Powertech	Rs. 55,000
Smt. Binduben D. Desai	Rs. 5,000
Surat	
Shri Paresh Gandhi	Rs. 11,000
Shri Subhash Chimanlal Nanavati	Rs. 10,000

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Quarterly Newsletter of India Renal Foundation

Issue 74 : July - September 2020

Dear Friends,

Greetings!

I am sure that you all have adjusted to your new routine with utmost care in this universally challenging times.

It goes without saying that eating healthy food and boosting immunity is the key to staying in the pink of health during these COVID times. There is an article by Dr. V.N. Shah, Director of Endocrinology, Zydus Hospital about COVID and Diabetes elsewhere in this issue.

We were prepared to handle the Covid-19 pandemic when the outbreak started in Gujarat, especially in the Sabarkantha district. There were lucid guidelines and precautionary measures for our staff members and patients visiting our center to adhere to. It was followed very strictly to safeguard our patients and our functionaries.

By god's grace and with the support and cooperation of everyone involved, all our patients are safe and have not faced any difficulties so far. Our dialysis facility was open all day in the last six months and all services were rendered relentlessly.

I would like to take special note of financial assistance provided to needy kidney patients under Mukhyamantri Amrutam Yojana (MA) by the state government. We have noticed that all patients from lower financial strata are also now taking regular dialysis as it has become absolutely free for them. The government is also paying them Rs. 300 per dialysis to commute to and fro to the dialysis center which is truly commendable.

Earlier we used to find many patients in critical conditions due to inadequate dialysis and not complying with the treatment. More than 73 dialysis centers have been established by the Government of Gujarat across the state and still counting.

I proudly share that we do more than 230 haemodialysis every month now at our center. Some of our patients, residing in the nearby area, who were earlier taking this treatment at renowned private hospitals in Gujarat are now coming to our center in Himmatnagar. They appreciate our services and the quality of dialysis. I congratulate our entire team who manage our dialysis center for their tireless efforts.

We are now contemplating to expand and installing one more dialysis machine in the coming month. We have received a donation of Rs. 6,50,000 for the same from Shri Kunjal Patel, MD, Voltamp Transformers Ltd., Vadodara.

We have also received a donation of Dialysers for our requirements for the next three months from our advisory board member, Shri Hemantbhai Shah, which amounts to Rs. 3,75,000.

I gratefully acknowledge their compassionate support and all other donors and well-wishers who have been relentlessly supporting our activities.

Best wishes,

Trilokbhai R. Parikh
Chairman

COVID-19 and DIABETES

WHO estimates that diabetes was the seventh leading cause of death in 2016. Latest estimates show a global prevalence of 382 million people with diabetes in 2013, expected to rise to 592 million by 2035. In general, countries in Europe and North America have either high or intermediate incidences. The incidence in Africa is generally intermediate and that in Asia is low, with the notable exception of Kuwait.

Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar), which leads over time to serious damage to the heart, blood vessels, eyes, kidneys and nerves. The most common is type 2 diabetes, usually in adults, which occurs when the body becomes resistant to insulin or doesn't make enough insulin. Insulin is a hormone that regulates blood sugar. Hyperglycaemia, or raised blood sugar, is a common effect of uncontrolled diabetes. Type 1 diabetes, once known as juvenile diabetes or insulin-dependent diabetes, is a chronic condition in which the pancreas produces little or no insulin by itself. For people living with diabetes, access to affordable treatment, including insulin, is critical to their survival. There is a globally agreed target to halt the rise in diabetes and obesity by 2025. About 422 million people worldwide have diabetes, the majority living in low-and middle-income countries, and 1.6 million deaths are directly attributed to diabetes each year. Both the number of cases and the prevalence of diabetes have been steadily increasing over the past few decades. Diabetes can be treated and its consequences avoided or delayed with diet, physical activity, medication and regular screening and treatment for complications.

Diabetes is often associated with CKD (Chronic Kidney Disease). Diabetes and Chronic Kidney Disease work group of the National Kidney Foundation Kidney Disease Outcomes Quality Initiative (KDOQI) suggested that a diagnosis of CKD presumed to be caused by diabetes should be referred to as "diabetic kidney disease (DKD)" and the term "diabetic nephropathy". CKD is a common condition that is estimated to affect > 50 million people worldwide. For patients with microalbuminuria, the risk of cardiovascular disease is twice that compared to patients with no albuminuria. Diabetes is the primary cause of their kidney failure and for 45% of patients who receive dialysis therapy.

Evidence of kidney damage may be demonstrated by abnormal imaging studies, urine sediment, urine chemistries, or, more commonly, proteinuria. Staging of CKD is classified into five levels grouped by kidney function as described by the estimated glomerular filtration rate (eGFR). Some people with kidney failure may be able to receive a kidney transplant.

KDOQI Classification of CKD		
Stage	Description	GFR (ml/min per 1.73 m ²)
1	Kidney damage with normal GFR	>90
2	Kidney damage with decreased GFR	60-89
3	Moderately decreased GFR	30-59
4	Severely decreased GFR	15-20
5	Kidney failure	< 15 (or dialysis)

Moreover, DM patients with DKD express a chronic systemic inflammation that contributes to the immunosuppressed state that accounts for infectious complications, which together determine the morbidity and the mortality that is associated with COVID patients. The vulnerability of diabetic patients to be infected with different viruses has been reported, the evidence includes studies from the 2009 influenza A (H1N1) pandemic, SARS-CoV, and Middle East respiratory syndrome corona virus (MERS-CoV). It is known that SARS-CoV-2 targets respiratory cells; however, other organs might be affected for the invasion of the virus (namely the kidneys, ileum, and heart).

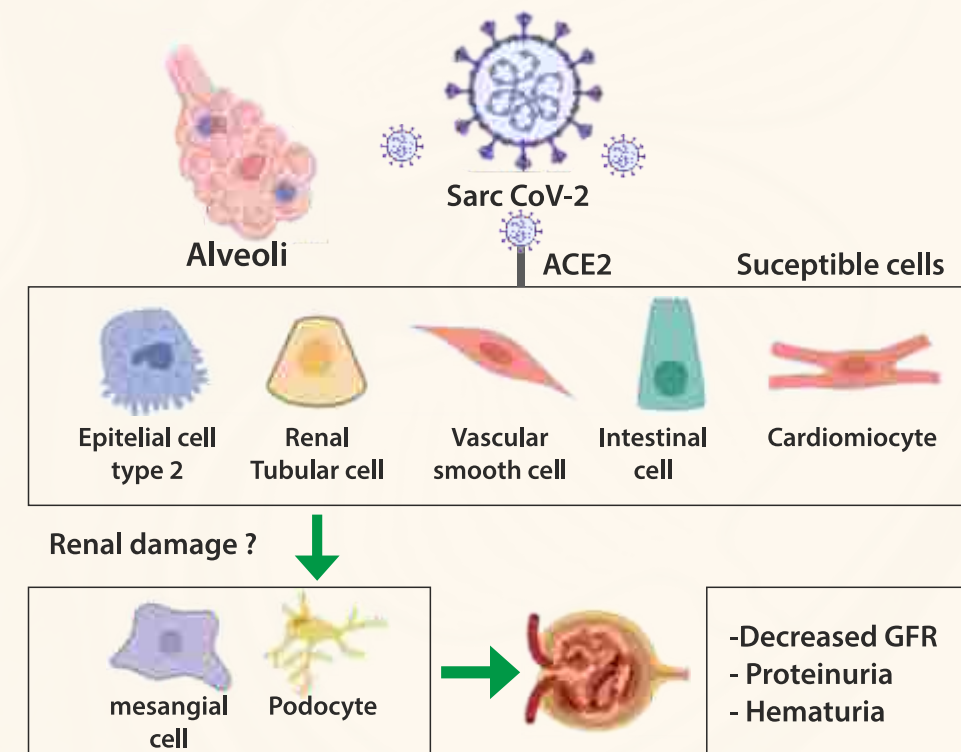
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A recent investigation identified that kidneys are organs with high a vulnerability to damage, according to angiotensin-converting enzyme 2 (ACE2) expression. Arterial smooth muscle and myocardial cells are also likely to be susceptible to SARS-CoV-2 damage. Moreover, although angiotensin II type 1 receptor blockers (ARB) are capable of upregulating ACE2 in experimental models, the evidence is not always consistent and differs among the diverse angiotensin II type 1 receptor blockers. Nevertheless, mechanisms including a cytokine storm syndrome through sepsis pathways or direct viral renal tubular cells injury occurs.

When COVID-19 first enters the body, it can trigger a generalized immune response that releases proteins called cytokines, which cause a storm of cell, organ and tissue damage. The virus can also directly force its way into the kidney by binding directly to kidney receptors COVID-19-related effects that are thought to contribute to AKI include kidney tubular injury (acute tubular necrosis) with septic shock, microinflammation, increased blood clotting, and probable direct infection of the kidney. Most patients with COVID-19-related AKI who recover continue to have low kidney function after discharge from the hospital. At present, the main expression of renal damage in COVID-19 patients appear to be acute; however, some cases of macroalbuminuria / proteinuria and or haematuria may be associated with the endothelial dysfunction observed in COVID patients.



Dr. V.N. Shah
Director, Endocrinology Dept., Zydus Hospital

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Haemodialysis Patient Care

After working for raising awareness and educating the society at large about renal diseases for nearly 17 years, we started our first state of the art dialysis center at Piplodi village in Himmatnagar in September 2018 with an intent to provide quality dialysis to needy patients from the nearby areas.

Though the foundation has been giving financial assistance to the needy under 'Save a Life' for their treatment since 2002 across the state, we have decided to set up a few dialysis centers in remote places where this facility is not available.

Initially 3 machines were installed and later by the end of 2018, 2 more machines were installed. This capacity is now being fully utilized and considering the new inquiries we receive, we are planning to install 5 more machines over a period of one year.

As we honor the second anniversary of serving the needy, here we share a glimpse of this facility and also the testimony of our patients.



Our Dialysis Centre at Himmatnagar

Our warriors ...their stories.....

Merabhai Bharwad, 40, lives in Vadradi, a small village in Prantij Taluka and he is into animal husbandry business. He is a father of four young children and lives in a joint family.

Suffering from kidney stones since his childhood in both kidneys, he required frequent medication. His condition got worsened in the year 2011 and his doctor advised him to undergo a surgery. He was operated twice in a month for removal of stone from both kidneys. His kidney function got gradually deteriorated due to stone and later he was diagnosed with Chronic Kidney Disease in early 2020.

Nearly nine years after the stone removal surgery, his kidneys completely failed and he was advised to start dialysis treatment.



Merabhai Bharwad

He says, "I got all support from the dialysis center run by India Renal Foundation here in Himmatnagar. Initially, I was helped with my AV fistula surgery and followed by my regular dialysis treatment in the dialysis center run by this organization. Going through dialysis, I see many people in a similar situation as mine. Many of them are not able to work and their lives have changed drastically. The facility provided by India Renal Foundation is indeed a boon for people like us.

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8. Shri Dr. Raju Krishnani
9. Shri Tejas Pandya
10. Shri Arunkumar Sharma



"The first few weeks were really difficult. I felt stressful about the sudden change in my lifestyle and could not imagine being in a bed three days a week for dialysis. After initially being treated at a reputed private hospital of the state, I was very nervous when I was referred for treatment at Himmatnagar but the staff of India Renal Foundation relieved me." - **Shri Jayant Chaudhary**



"The staff here really care about us and we can feel it. They give us suggestions on how to take good care of ourselves. What happens in our personal lives and our hobbies are also often discussed. They also encourage us to develop hobbies that we enjoy. Even our doctor, Dr. Hasitbhai Patel gives us enough time and talk and joke at times. I don't think we can find such care anywhere else. The good news is that we all started out as strangers and today we are like a family." - **Shri Girishbhai Patel**



"Everyone is so friendly and the entire staff really cares about the health of every patient. The staff of the organization spends time with each and every patient, and they really pay attention to every small thing. The planned work of the organization is really commendable." - **Mrs. Jagruti Brahmhatt**

"I visited my doctor with complaints of Swelling, Breathlessness, and Itching in early 2020", says Rakeshbhai Vaghari, a 28-year-old farmer from Bolundra, a small village in Idar Taluka of Sabarkantha district.

"I was not aware of the terminology when my doctor diagnosed me with Kidney Failure. I was instructed to visit Kidney Hospital in Ahmedabad and start dialysis as early as possible. The process was very painful both physically and mentally and above all my financial position was very poor."

Rakeshbhai was given the first haemodialysis in February 2020. India Renal Foundation is helping him with all expenses of AV fistula surgery, medicines and all laboratory tests as and when needed. He is undergoing dialysis at our dialysis center twice a week since then.



Rakeshbhai Vaghari



"I have been giving my services as a dialysis technician since November 2018. I am very passionate about my profession. Working with renal patients is always challenging. Indeed, the last six months have been mentally and physically challenging as we have to be constantly attentive. Despite the long working hours, our sacrifice is worth it as it is for our patients and they are at the heart of what we do..." - **Mr. Vishal Khant, Dialysis Technician**



"Since I joined India Renal Foundation in September 2018, after completing my MSW, it's been an exciting journey. Working in my home town, Himmatnagar, and in entire Sabarkantha is indeed very fulfilling, be it raising awareness about renal diseases or helping dialysis patients. Especially in the last six months has been a truly rewarding journey. Feel blessed to having been chosen for this mammoth task..." - **Mr. Sumit Prajapati, Programme Officer**



There are many young patients like Merabhai Bharwad and Rakeshbhai Vaghari, who are suffering from such dreadful terminal illness and working hard to make their both ends meet.

We at, India Renal Foundation get an opportunity to make such people/community aware and serve them with your support which helps them live a better life. Our team is truly committed to this cause. There is no 'us' without 'you'. Give, volunteer, or advocate to help win the fight against kidney disease.

The only thing you can take with you when you are gone is what you leave behind...John Alston

Cadaver Organ Transplantation

Cadaveric Transplant involves removal of organs from a Brain Dead Donor (BDD) with a functional circulation, or from patients with sudden cardiac death

In India, 13th August is celebrated as Organ Donation Day. The motive is to promote Organ Donation in our country and help patients with organ failure live a better life.

India Renal Foundation works to raise awareness about Organ Donation under the programme called 'Jivandaan' since 2005.

When can one donate ?

1. Living Person – related or unrelated to the patient

2. After Natural death

3. After Brian Death

First kidney transplant in the world was carried out by Dr. Joseph Murray, a plastic surgeon and his colleagues at Bringham Hospital in Boston in 1954 from one twin to another. The donor and recipient were Ronald and Richard Herrick were identical twins. Dr. Murray was given Nobel Prize in Physiology or Medicine in 1990 for his work in human organ transplantation.

Service to the society is the rent we pay for living on this planet...Dr. Joseph Murray

In India, first successful live kidney transplant was performed at CMC, Vellore in February, 1971.

Brain dead donors are victims of sudden illness or accident. The medical and nursing teams who have cared for the patient and also NGOs like us play a major role in obtaining permission for organ donation from the family members.

Notifying the transplant centre as soon as possible helps ensure the best possible donor maintenance and permits more time for the identification of suitable recipients. Early notification allows the transplant Centre to determine the suitability of the potential donor. It also helps in mobilizing the retrieval team and possible recipients in good time.

The criteria for a Deceased Organ Donor are

1. Normal Renal Function
2. No Hypertension requiring Treatment
3. No Diabetes Mellitus
4. No Malignancy other than a primary brain tumor or treated superficial skin cancer
5. No generalized viral or bacterial infection
6. Acceptable urine analysis
7. Negative assays for syphilis, hepatitis, HIV, & human T Lympho proliferative virus.

Longest survival case after kidney transplant

We feel honored to share an email received from a gentleman in Rajasthan. Shri Kishna Ram Sharma, 67, got his kidney transplant in the year 1977 at the age of 24. It's been a wonderful journey of more than 43 years after the transplant and both recipient and donor are healthy and enjoying life. Indeed a truly inspiring story for the community !!!

Hello Everyone,

Greetings of the day. I am Kishna Ram Sharma, a Rtd. Assistant Engineer and a proud grandfather living a **healthy and normal life with a transplanted kidney**. Let me take you back in March 1973, when I finished my Diploma in Engineering and later on I joined Irrigation Dept. Rajasthan State Govt in March 1976. Before that, I got married in **March 1975** and blessed with a baby girl in July 1976. I was really cherishing my good time. Then in March 1977, I was diagnosed with the renal failure. It was really a **tough time** for me as well as my family but it was my **courageous** elder brother Shri. Om Prakash Sharma ji who helped me to come out of this situation. I think in this so much advanced **technological era** most people couldn't imagine the time period I am talking about as the communication only was very **difficult** (forget the mobile even landline phones were rare).



Shri Kishna Ram Sharma

So, with the initial symptoms of vomiting and facial swelling as well as the local treatment without any relief we visited a physician, Dr Paras Jain, who actually suspected it to be the case of renal failure and suggested us to go to SMS Hospital, Jaipur, where they did the peritoneal dialysis but all in vain. There we had been advised either to go home or to CMC, Vellore, as they were not having the renal transplant facility at that time.

Being from a small town of Rajasthan, it was really strenuous to go to southern part of India but it was my brother's commitment and the lead of my father-in-law Sh. B. Paiwal Ji, all three of us reached there. After all the required diagnostic tests, **I received a kidney** from my **brother** and both of us are living a **normal and healthy life** since then. We stayed there for a year for follow-up. Then after all this I was blessed with two sons in the year 1980 and 1982.



Shri Om Prakash Sharma

“In the year 1983, I participated in 2nd All India Kidney Transplant Sports Meet held at PGI, Chandigarh and secured 1st position in Long Jump while 3rd in 100 meter race category...” Shri Kishna Ram Sharma

I would like to thank my parents, sister and younger brother who stood by me all the time. My special thanks to my wife. It was all her sacrifices which helped me to fight the situation. She even became the backbone for the family.

My gratitude to Dr. Chakko Jacob, member of operating team who guides me even today. I would also like to thank Dr. Harish Pathak for his valuable inputs whenever required.

I also want to extend my thanks to **India Renal foundation** for not only giving me an opportunity to introduce myself but also to get a chance to **Motivate** and **Inspire** others for the organ donation as it is said "**Ang Daan, Maha Daan**".

Last but not the least I thank **Almighty God** for all the **strength** he gave me and all the **help** he extended to me.

Er. K R Sharma
Hanumangrah, Rajasthan

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