

Dialysis and travel: benefits and drawbacks Antonio Tombas – ADER President May 2sd

#### ADER - 45 Years Old



- Catalan Kidney Diseases Association
- Is one of the representatives of people with Chronic Renal Insufficiency in Catalonia
  - Around 10,500 people in Catalonia (+/- 55% transplanted)
- It is a private entity, of a charitable nature and a social initiative
- Founded on October 13, 1976 and declared a public utility in 1987
- Dietary, Psychological and Legal Advice Labour (Agreement with Inserta)
- Physical Rehabilitation, Yoga, Massage, Psychotherapists, and so on
- Organization of Annual Scientific Working Day, talks, conferences, activities, trips and others.
  - Transplant Run Race Organization
- Annual 1 Week Dialysis Trip at Diaverum Clinics
- Biannual Magazine & Bimonthly Bulletin // Many other activities



#### Antonio Tombas – Medical CV

- Married // 1 Son
- 60 Years old
- CKD since 1.979 (17 years old)
- Since 1.981 Clinic Hospital Patient from BCN (One of WW KH Leaders specially live transplant & HMD suppliers)
- 5 years and a half of hemodialysis (in 2 stages (1980 1984 and 1998 2,000))
- 3 transplants (2 corpse and 1 alive) (1.984 2.000 and 2.009)
- First CKD patient to take Ciclosporina (Sandimun) in Spain in March 84
- 4 heart attacks with some bras
- 1 ictus
- Others (4 fistulas, pneumonia, pericardites, A Flu, trauma operations, etc ..)

# Important Information: Sp. Health



- Spanish Healthcare is manage by each community
  - Spain has 17 communities
- Cataluña does around 4.000 HD Treatments & 500 DP
  - +/- 2.000 at concerted centres
  - +/- 2.000 at hospitals
- Spanish Government Authorise & Each Community decides to apply or not – Per example
  - Catalunya has not approved home dialysis out side DP
  - Catalunya has highest percentage of Vascular Access in Spain by far
- Catalunya does more Kidney Transplant than any other community from live and corpse.

  - Bellvitge Hospital is No 1 in Corpse Adult since a few years ago
- First Kidney Transplant in Spain was made in 1.965 at Clinic Hospital

## Dialysis & Travel - Benefits



- Travel is necessary for CKD if he is allow by medical professionals
- Travel means better health in front other HD patients
- Travel means CKD is ready to leave it's natural environment
- Travel breaks day a day routine
- Travel improves CKD and it's family humour and attitude
- Travel means to change inputs and to learn new things
- Travel is one of the first things a NEW CKD at HD thinks and miss
- Many times a CKD at HD thinks his place is not good enough.
  - This is a way to see & compare with other locations. All are good
- Movement means freedom at a HD patient
- If possible, for social & economical reasons TRAVEL is ONE of the BEST to do at HD
- We must promote as much as possible

### Dialysis & Travel - Drawbacks



- 1st Statement: If you can travel, it means probably you are at Transplant List
- 1st BD: CKD goes to an unknown place
  - How it will be ? Sofa bed
  - Do I need pijama or casual clothing?
  - In case they do take me to the place, who can do it?
  - Will they talk my language? SP people does not speak English
  - How will they prick?
  - Will it be my same HD Machine? And so on
- 2sd BD: Transplant List
  - I want to continue at TL
  - Do I need to inform I am travelling? If yes to whom?
  - How much time kidney can remain perfect before a transplant?
  - Will they call me if I am lucky?

# Dialysis & Travel – Drawbacks / 2 ader

- How long will the Hospital wait me?
- How much time do I have to be at it?
- Will I be able to fly at the first flight?
- Who will pay for it?
- Do I have a contact point to be supported?
- It is important and necessary to have this questions with as many clear answers as possible
- I propose a document at local language with these and other CKD subjects clarify.
- Diaverum Travel Guide Book is more than great but I propose to include some extra information related the place.

### Summary



- Travel is necessary: vacation and / or business or for both
- Travel means good health and good psychological situation
- Travel at HD is good always as around CKD to normal live more than anything else.
- We must share a protocol to make things easier with HD patients special for summer holidays.
- We must take note & find solutions from all the important barriers
- CKD manages to be at Transplant List from a different perspective at every country.
- I propose to launch a Diaverum Trip Advisor Application for HD Centres
- Nothing is better and improves HD health than a good trip at HD period