

Elective – Renal medicine at the Royal London Hospital

Objective 1. Understand the presentation and management of common renal disease in an east London teaching hospital?

As I did my elective in a local hospital I was already aware of the typical patient population and the main causes of renal disease in the local population. During my time I did see patients who had developed end stage renal disease due to common causes such as diabetes. Although it was interesting to see that many patients had more unusual causes of their renal disease for example I clerked two patients with Alport's syndrome during time in the renal assessment unit. Although Alport's is a rare condition I found it interesting to learn more about this disease. It also signified to me how any condition that leads to end stage renal disease has a common management, namely dialysis and the hopefully renal transplantation.

It was evident that patients with renal disease were looked after well in the royal London and there seemed to be a sense of ownership of patients by the renal team and in turn many patients felt that they knew who was caring for them and what was happening with their care. Seeing patients who were post-transplant was also new to me as the various immunosuppressive drugs that patients were taking meant that there was often a lower threshold to investigate and manage patients who could have infection.

In terms of the nephrologist and their role it was evident to me that a good nephrologist needs a strong understanding of general medicine in order to fully and satisfactorily treat her patients. Many patients had diabetes, very high cardiovascular risk profiles, difficult to control high blood pressure, anaemia, secondary hyperparathyroidism, unusual infections etcetera. Although these are all causes or consequences of failing kidneys they still require a deep understanding of general and acute medicine in order to treat competently. This highlighted to me the importance of a general foundational knowledge irrespective of specialisation and sub specialisation.

Objective 2. Explore reasons for the high prevalence of chronic kidney disease in east London.

With a high South East Asian (mainly Bangladeshi) population the London borough of Tower Hamlets has a very significant diabetes mellitus type 2 prevalence, this in turn results in a high prevalence of chronic kidney disease requiring renal replacement therapy.

All in all I enjoyed my time learning about renal medicine and talking to patients who often had serious conditions were often smiling and never refused to speak to me or let me examine them. In terms of whether I would consider trying to become a nephrologist in the future, I think it is far too early to say. I still believe that the best way to know whether a specialty is right for you is to do that job as a doctor day in day out for 4-6 months. Time spent as a student is like a whistle stop tour

enough to whet the appetite but not enough to get your feet under the table and really understand what a specialty is all about.

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