

Interview with Dr. Bibi Areefa Alladin

When and why did you choose Pediatric Nephrology as your specialty?

During my residency in pediatrics, I was encouraged to join the Kidney Foundation of Guyana (KFG). I became an executive member of the KFG which enlightened me on the burden of kidney disease in Guyana, a country where dialysis and transplant are not readily available and accessible due to high costs. I met a Pediatric Nephrologist, Dr. Andrew Wade, who went to Guyana to teach pediatric nephrology to residents. I was intrigued by renal physiology and the complexity of nephrology and developed a passion for this field.

We do not have pediatric nephrology services in Guyana. During my time as a pediatric resident and pediatrician, I watched every child who needed renal replacement therapy die. It was heartbreaking to see that these kids did not have a fighting chance and it was accepted that conservative management was the only option. Being the secretary of the KFG and having these experiences in my practice pushed me to pursue pediatric nephrology so that I can make a positive impact on the lives of children with kidney disease.

Dr. Alladin's fellowship group at University of Calgary.



We know you will be the first Pediatric Nephrologist in Guyana. Are there records on nephrological diseases (incidence/prevalence) in Guyana?

There are no records of nephrological diseases in Guyana since we do not have the kidney biopsies and other immune studies necessary to make a formal diagnosis of various kidney diseases. There is no access to genetic testing or advance testing. Most cases are diagnosed as chronic kidney disease and end stage kidney failure without an underlying diagnosis.

When and where will you start practicing your new specialty (Pediatric Nephrology)?

Guyana is currently in the planning phase of designing a new specialty hospital for maternal and child health. This hospital is expected to be completed in 4 years' time. A nephrology unit with dialysis capacity will be built in this hospital. I am expected to be given a space in this new hospital for all nephrology services. I have written to my hospital with requests and this was acknowledged.



I am planning to return to Guyana this summer to streamline the nephrology clinic and provide other support in the interim. I am now the Chair of the Kidney Foundation of Guyana which gives me the opportunity to provide consults and other nephrology services remotely for Guyana while I complete my research fellowship. I have started my remote practice in October of 2021.

What are your expectations?

I expect that children who need dialysis, either in the acute or chronic setting, will have access to such services so that these children stand a chance of living. I would like to see the diagnostic capacity for kidney diseases improve, we need kidney biopsy capability and advanced testing for immune diseases such as complement levels. We also need access to genetic testing. I think that education of medical professionals on screening for kidney diseases and early referrals is important. To this end, through the KFG, I have been organizing medical education sessions monthly for Guyana on various kidney diseases. These sessions were all delivered by Pediatric Nephrologists through zoom over 2021 and will be continuing through 2022. I am also developing plain language brochures for sensitization of the population and guidelines for various kidney diseases.

Could you please provide a brief view on the available hospital/facilities where you will work, and how this fellowship will change the clinical practice at home.

I will be the first pediatric nephrologist in Guyana which will add specialist care for children with kidney diseases. Currently, these children are not given a fair chance as there is no option for renal replacement therapy or transplant for children. I hope that I will be given the facilities and resources necessary to deliver dialysis and that we can have transplants as an option.



The pediatric group in Guyana with Dr. Alladin on the right.

I also hope that diagnostic testing improves so that we can treat the underlying causes of chronic kidney disease which may delay or prevent kidney failure.

Diagnostic capacity will be a major factor in the delivery of care as underlying diseases cannot be treated currently, I have asked for support in this area.

There is no facility currently that can support pediatric nephrology services such as dialysis and transplant. I was assured that this will be catered for in the new specialty hospital that will be operational in 4 years' time. In the meantime, I will work on implementing screening and medical management, developing guidelines, and educating medical professionals. I will use my capacity as Chair of the Kidney Foundation for sensitization and for advocacy.

I am grateful to IPNA and ALENAPÉ for the training, access to resources and educational materials that I can use in my country, and for the network that I have become a part of. I was able to meet other pediatric nephrologists from similar backgrounds who gave me ideas and advice on how to build a pediatric nephrology practice in Guyana. I look forward to working with IPNA, Dr. Bonilla, and the team on building Guyana's capacity for pediatric nephrology.