

Caribbean Renal Registry Data

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Introduction: There is an increasing number of persons with End Stage Renal Disease (ESRD) in the Caribbean. It is important to have a Caribbean renal registry in order to perform (inter)national comparisons in renal epidemiology. The registry will monitor the incidence and prevalence of Chronic Kidney Disease (CKD), its causes and emerging trend. It will help with the determination of the burden of kidney disease in the region and inform healthcare planners and policy formulators.

Methods: Questionnaires were sent out to different Caribbean countries, to be distributed to the dialysis units. Data were obtained for patients with ESRD who were on long term renal replacement therapy in 2006. The demographic data, type of renal replacement therapy, laboratory data and causes of ESRD were obtained from the questionnaire. Data were analyzed using SPSS 11.0

Results: Data were reported from six English-speaking Caribbean countries: Bahamas (n = 211), Barbados (n = 185), British Virgin Islands (n=27), Cayman Islands (n = 41), Jamaica (n = 366) and Trinidad and Tobago (n = 436). Haemodialysis was reported in all the countries. Only Bahamas, Jamaica and Trinidad and Tobago reported peritoneal dialysis. The Cayman Islands did not report transplantation. In Jamaica, male to female ratio was 1.5:1. The three commonest causes of end stage renal failure were hypertension (65.5%), diabetes mellitus (27.6%) and primary chronic glomerulonephritis (GN) (12.5%). The age range was 11–94 years (mean 47.7 years). Barbados had male to female ratio of 1.8:1, age range of 19–81 years (mean age: 52.3 years). Hypertension (55.7%) and diabetes mellitus (27.0%) were the commonest causes. Trinidad and Tobago had a male to female ratio 1.3:1. Age range was 8–84 years (mean age 52.5 years). The three commonest causes were diabetes mellitus (28.9%), hypertension (25.3%) and autosomal dominant polycystic kidney disease (3.9%) and chronic glomerulonephritis (3.9%). The British Virgin Islands, Tortola, had male to female ratio 1.7:1.0, age range was 26–86 years (mean, 57 years). Hypertension (67.9%) and diabetes mellitus (46.4%) were also the commonest causes. Bahamas had male to fe-

male ratio of 1:1.1 unlike the other countries. Hypertension (25.6%), diabetes mellitus (28.0%) and chronic glomerulonephritis (13.3%) were the commonest cause of ESRD. The Cayman Islands reported a male to female ratio of 1.2:1, with a mean age of 54.3. Hypertension (n = 27), diabetes mellitus (n = 12) and autosomal dominant polycystic kidney disease (n = 3) were the commonest causes of ESRD.

Conclusion: Hypertension, chronic GN and diabetes mellitus were the commonest causes of ESRD across most of the English-speaking Caribbean countries. Peritoneal dialysis was only offered in some of the islands and kidney transplantation was rarely reported. More males than females were on long term renal replacement therapy in most of the islands.