

Research Findings in IJKD, July 2010

IJKD 2010;4:272
www.ijkd.org

Important Note for Readers. The findings in medical papers are usually not directly applicable and patients should consult their physicians before any utilization of the results of medical studies.

DEPENDENT ON DIALYSIS MACHINE: DEPRESSED? ANXIOUS?

Being on dialysis for a long time means you have to schedule your life based on your dialysis sessions, three times a week, not eating everything you like, being dependent on your family and friends, etc. All these are obviously a source of depression. And of course, your life being dependent on a machine can make you anxious. Psychological problems of dialysis patients are addressed in many medical articles, but still some patients do not receive a good psychiatric care. Anxiety, in particular, is sometimes completely neglected. That is why editors of the *Iranian Journal of Kidney Diseases* asked a group of experts in California to write an updated review on these issues for the readers. This review emphasizes those aspects of depression and anxiety that have not been investigated extensively. So, once again physicians responsible for dialysis programs have the opportunity to revise their care protocol and focus more on the psychological needs of their patients.

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STEM CELLS REPAIR KIDNEYS

Stem cell research is not only a fashionable field for researchers! Day by day, we hear promising news, and now Dr Nafar and his colleagues report their results in rat models. Previously, it had been shown that injured kidneys can be repaired by stem cells. These cells can substitute the impaired cells in the kidneys that are affected by an acute period of poor blood supply that occurs in distressing situations like surgery, accidents, etc. However, using stem cells in practice faces a big problem; it is

not financially practical. Dr Nafar and his colleagues compared using these cells with a hormone that can encourage mobilization of the patient's own stem cells to the injured site. They found that this hormone has the same effect as injecting stem cells. So, injecting such hormones can be an affordable method with comparable efficiency with using stem cells. Although such a study needs to be supported by further painstaking research, let's hope that in just a few years, patients will enjoy these new treatment options.

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ORAL HYGIENE IN PATIENTS WITH KIDNEY FAILURE AND TRANSPLANT RECIPIENTS

Those who lose their kidneys and also those who receive a new kidney are in a condition of susceptibility to all kinds of infections, and any trivial infectious disease can be a real threat to their health and kidney. Even oral infections can make a big trouble in these patients. We published two articles in this issue: one showed that in patients on dialysis, some potentially infectious germs can be found more abundantly than in healthy persons. This situation gets better after transplantation, but still some infectious germs are living in the oral cavity. One of them is a kind of fungus that causes candidiasis. Another article supports the former and showed that indeed candidiasis in kidney transplant patients is common. So, even dental care can be crucial in patients on dialysis and in kidney recipients, and they should ask their physicians and dentist about their oral care.

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