

Summary and Conclusion

This study included fifty patients suffering from end stage renal disease (ESRD), they were 20 patients received conservative management and 30 patients received regular hemodialysis .

Screening for viral infections using Qualitative PCR for hepatitis C virus(HCV), hepatitis G virus (HGV) and cytomegalovirus (CMV) was performed.. Screening for hepatitis C virus (HCV), hepatitis B virus (HBV), human immunodeficiency virus (HIV) by ELISA was also done.

It was found that all cases with positive HCV antibodies had positive PCR but not all positive PCR cases had positive antibody. This means that PCR is more accurate than ELISA and both tests are required to maximize HCV diagnostic sensitivity.

It was also found that HBV infection is less prevalent than HCV in Hemodialyzed patients. HCV infection is the commonest viral infection in patients with ESRD whether on conservative management or on regular hemodialysis. The more the duration of dialysis the more risk to acquire viral infections.

Serum creatinine is more important laboratory data than urea regarding comparison between patients on conservative management and those on hemodialysis.

We recommend to introduce HBV vaccination, isolation of HBV positive patients and the use of dedicated machines in patients receiving regular HD therapy in order to eradicate HBV infection. Also, performing both PCR testing in and ELISA to diagnose HCV infection.

We recommend the identification of HD patients who are susceptible to CMV by anti-CMV IgG and IgM .

Another recommendation is to include medical staff as physicians, nurses, workers in HD units in screening for viral infections as they could be the source of infection. All of them should be vaccinated and should be screened every month.