Costs of Hemodialysis and Kidney Transplantation in Sudan
A Single Center Experience

Mohamed Elhafiz Elsharif,¹ Elham Gariballa Elsharif,¹ Waheeb Hassan Gadour²

Introduction. End-stage renal disease is a serious illness with major consequences in both health and healthcare expenditures. The growing number of patients with end-stage renal disease in developing countries will consume a greater proportion of healthcare budget. We aimed to assess the costs of hemodialysis and kidney transplantation in a renal care center in Sudan.

Materials and Methods. We conducted a cross-sectional study to estimate the costs of kidney transplantation and compare those with the costs of hemodialysis per year. We enrolled 78 patients on regular hemodialysis for at least 2 years and 33 kidney transplant patients on regular follow-up at Gezira Hospital for Renal Diseases and Surgery in Sudan.

Results. The annual cost of hemodialysis was found to be US $6847.00. The total cost of the first year after transplantation was US $14,825.04 and the cost of kidney transplantation after the first year was US $10,651.00. The total hospitalization days and absence from work were less in the transplant group.

Conclusions. Hemodialysis in Sudan is less expensive than transplantation.

INTRODUCTION

End-stage renal disease (ESRD) is a serious illness with major consequence in both health and healthcare expenditures.¹ As seen worldwide, the prevalence of ESRD has significantly increased in developing countries.² The growing number of patients with ESRD will consume a greater proportion of healthcare budget. Consequently, the worldwide demand for and costs of renal replacement therapy is rapidly becoming a major burden for healthcare systems of the developing countries. For this reason, chronic kidney disease and ESRD are considered as emerging public health problems in developing countries, necessitating changes in healthcare policies.³,⁴ We aimed to estimate the costs of hemodialysis and kidney transplantation at our center, in Sudan.

MATERIALS AND METHODS

This cross-sectional study was conducted at Gezira Hospital for Renal Diseases and Surgery in August 2009. The objective of this study was to estimate the costs of kidney transplantation compared with hemodialysis. We recruited 78 patients with ESRD on regular hemodialysis and 33 kidney transplant recipients on regular follow-up at our center. Patients on hemodialysis were receiving in-center hemodialysis, 2 sessions per week. Patients who were on hemodialysis or had a kidney allograft for less than 2 years were excluded from this study.

Cost analysis was performed including the following: (a) the costs of medications administered by patients on dialysis, all the consumed solutions for dialysis, drugs utilized during the dialysis session, transplantation operation, all medications administered after transplantation, and other medical procedures; (b) costs of laboratory and radiological investigations; (c) costs related to the healthcare staff salaries; (d) nonmedical supply costs; (e) depreciation of installations and equip-
mments (eg, dialysis machines); and (f) depreciation of reverse osmosis machine. The following were not included our cost analysis: transportation costs of patients plus their attendant to the dialysis center, the cost of elapsed time, the expenses related to absence from work, costs of hemodialysis vascular access, dietary costs, and building rental costs.

The SPSS software (Statistical Package for the Social Sciences, version 14.0, SPSS Inc, Chicago, Ill, USA) was used for the analysis of the data. Depreciation value was calculated by using the straight-line method. Data were expressed as mean ± standard deviation.

RESULTS

The mean age of the patients in the hemodialysis group was 42.5 ± 11.4 years. They were 64 men (82.1%) and 14 women (17.9%). The mean duration of hospitalization per year was 8.56 ± 7.99 days. The mean of absence from work was 27.57 ± 12.34 days per year. The costs of hemodialysis are shown in Table 1.

The mean age of the patients in the transplant group was 40.3 ± 12.0 years. They were 21 men (65.6%) and 11 women (34.4%). The mean duration of hospitalization per year was 4.84 ± 7.62 days. The mean of absence from work was 10.23 ± 3.54 days per year. The costs of renal transplantation are shown in Tables 2 and 3.

DISCUSSION

The annual costs of hemodialysis in Sudan are less than those in the United States, Italy, Spain, France, Japan, Turkey, Iran, Mexico, United Kingdom, and Brazil; however, its more expensive than those in India. This can be due to both lower costs of hemodialysis sessions and smaller total number of hemodialysis sessions per year. The costs of hemodialysis in this study were calculated based on 2 sessions of hemodialysis per week, which are not adequate according to the National Kidney Foundation Dialysis Outcomes Quality Initiative recommendations and the National Cooperative Dialysis Study.

Transplantation costs in our series were found to be higher than those in Iran, India, and Mexico, but lower than the costs in the United state, Iceland, Denmark, or Finland. In our study, we found that the costs of hemodialysis for 1 year were less than the costs of transplantation for both the first year and the following years, while in Canada, New Zealand, Mexico, Hungary, Serbia, and Australia, transplantation was found to be less costly than dialysis. Erek and colleagues reported from Turkey and Salonen and associates from Finland that the costs of the first year after transplantation were higher than dialysis and less in following years. Another difference is that the total hospitalization days and absence from work

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Table 1. Costs of Hemodialysis

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost per Hemodialysis Session</th>
<th>Cost per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment instruments</td>
<td>96.34 SDG 41.89 US $</td>
<td>10019.36 SDG 4356.24 US $</td>
</tr>
<tr>
<td>Drugs</td>
<td>23.41 SDG 10.18 US $</td>
<td>2434.64 SDG 1058.54 US $</td>
</tr>
<tr>
<td>Staff</td>
<td>16.87 SDG 7.33 US $</td>
<td>1754.48 SDG 762.82 US $</td>
</tr>
<tr>
<td>Nonmedical supplies</td>
<td>6.21 SDG 2.70 US $</td>
<td>645.84 SDG 280.80 US $</td>
</tr>
<tr>
<td>Investigations</td>
<td>3.75 SDG 1.63 US $</td>
<td>390.00 SDG 169.56 US $</td>
</tr>
<tr>
<td>Depreciation of dialysis machines</td>
<td>4.63 SDG 2.01 US $</td>
<td>481.52 SDG 209.36 US $</td>
</tr>
<tr>
<td>Depreciation of reverse osmosis machine</td>
<td>0.21 SDG 0.09 US $</td>
<td>21.84 SDG 9.49 US $</td>
</tr>
<tr>
<td>Total</td>
<td>146.58 SDG 65.83 US $</td>
<td>15747.68 SDG 6846.82 US $</td>
</tr>
</tbody>
</table>

*SDG indicates Sudanese Pound.

Table 2. Costs of the First Year After Kidney Transplantation*

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preoperative and operative</td>
<td>18 000.00 SDG 7626.09 US $</td>
</tr>
<tr>
<td>Medications</td>
<td>15 437.85 SDG 6712.00 US $</td>
</tr>
<tr>
<td>Investigations</td>
<td>660.00 SDG 286.96 US $</td>
</tr>
<tr>
<td>Total</td>
<td>34 097.85 SDG 14 825.04 US $</td>
</tr>
</tbody>
</table>

*SDG indicates Sudanese Pound.

Table 3. Annual Costs of Kidney Transplantation After the First Year*

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medications</td>
<td>24 019.00 SDG 10 443.04 US $</td>
</tr>
<tr>
<td>Investigations</td>
<td>480.00 SDG 208.70 US $</td>
</tr>
<tr>
<td>Total</td>
<td>24 499.00 SDG 10 651.74 US $</td>
</tr>
</tbody>
</table>

*SDG indicates Sudanese Pound.
could be much less in the transplant group.

CONCLUSIONS
Hemodialysis in Sudan is not adequate, but less expensive than kidney transplantation. Hemodialysis costs in Sudan compared with other countries and with kidney are low.

CONFLICT OF INTEREST
None declared.

REFERENCES

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