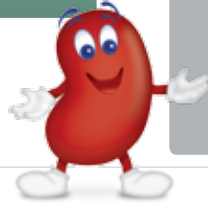


# KDF LINK



MICA (P) 099/04/2014

## APR - JUN 2014 IN THIS ISSUE

# THE UNTOLD STORY OF MR CHANG

BY SHAWN WONG

It was a hot and humid Thursday afternoon as I made my way down to the dialysis centre at Bishan. My interviewee, Mr Chang Ah Kau was already at his station receiving his dialysis treatment. He was wearing a black windbreaker and a corduroy cap in a similar colour. A floral blanket covered his legs to keep them warm from the cold air conditioning. Signs of aging were visibly seen on his face. Sporting a short haircut and black rimmed glasses, Mr Chang was affable and was ready to start the interview.

Originally, Mr Chang Ah Kau was supposed to be known as Mr Chang Ah Guang. During the 1940s, birth registrations were conducted in the police stations. The officer who was administering his registration wrote his name incorrectly as he did not share the same mother tongue as Mr Chang's parents. When I asked him why he did not change his name after all these years, he told me

that all his friends are used to calling him by this name.

Prior to being diagnosed with kidney failure, Mr Chang was a mechanic at a car factory and had worked in a shipyard doing sandblasting in his youth. When he was older, he opened an iron factory specialising in iron welding. I was in awe of Mr Chang as he was a man of many skills when he was young. With his bare hands and a never say die attitude, he was a hard worker that toiled his life for a place in the society. He used to have a noodle shop at Queensway hawker centre; however, due to a



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Editor-in-Chief:  
Watson Ong

Honorary Mandarin Section Editor:  
Prof Chris Y. H. Tan

Assistant Editor:  
James Ong

Contributors:  
Samantha Png  
Jemin Chua  
Shelley Lu  
Shawn Wong  
Patient Services Department

KDF Link is published by:  
**Kidney Dialysis Foundation Limited**  
Blk 333 Kreta Ayer Road,  
#03-33, Singapore 080333  
Tel: 6559 2630 Fax: 6225 0080  
Website: www.kdf.org.sg



stroke in 2006, he had no choice but to wind down his business.

When he was in his youth, he was a contributing pioneer that shaped the society. Together with the people from his generation, they helped mould Singapore into a prosperous nation. Now that he has fallen ill, he feels sad that he can no longer contribute to the society.

Mr Chang would consistently lament that due to his medical condition and old age; he cannot be employed and this resulted in him feeling unworthy. Numerous times during the interview, he would bemoan the fact that he does not make a good interviewee for my article.

At 67 years old, Mr Chang has just started his dialysis two years ago. A diabetic for 24 years, Mr Chang paid no attention to his chronic illness as he thinks that it is trivial and there was no reason to be alarmed. It was about a few years ago that he noticed both of his legs were swollen. Sensing something amiss, he went to a doctor to seek help with his conditions. Unfortunately, he had allergic reactions to the medications that were prescribed to him. One doctor even suggested that he go for a session of acupuncture to relieve his symptoms. Ironically, he was diagnosed with renal failure by a Chinese physician and was told to get a second opinion.

Mr Chang was reluctant to go for treatment at first as he felt that it was a chronic illness that would require him to go on dialysis for a long period of time with no possibility of his kidneys making a full recovery. However, he changed his mind after going through several counseling sessions with the nurses from the hospital.



After his wife succumbed to stomach cancer in 2004, Mr Chang now stays with his daughter in a 5 room flat that is being shared by his son in law and their two toddlers. Mr Chang also has two sons but they are not earning much and he feels that he should not ask them for money. Fortunately, his daughter and son in law have been exceptionally supportive of his dialysis treatment. He is grateful for their financial assistance even though he knew they have difficulty making ends meet even with their combined earnings. He was struggling to hold back his tears as he told me this.

When I was interviewing him, something struck a chord with

me. Our nation has been progressing rapidly, however, there are patients like Mr Chang who craves for the good old days when things like daily meals and medical bills were much more affordable during their generation. Our nation's inflation rate has increased steadily over the years and for Mr Chang who is unemployed, it is an uphill task to pay for his medical bills.

Mr Chang's financial burden was significantly reduced when he was referred to KDF through his doctor in 2012. With KDF's subsidised treatments, Mr Chang can now cope with the escalating cost of dialysis. He offers his gratitude

and appreciation to the KDF staff and nurses that have been easing him into his dialysis treatments.

KDF's primary vision is to ensure that no kidney patient will perish due to the lack of funds for dialysis. You can help elderly patients like Mr Chang overcome their financial difficulties by supporting our cause. If you would like to aid us, please make a donation via the enclosed business reply envelope. For more information, please visit our website at [www.kdf.org.sg](http://www.kdf.org.sg).

# Renal Friends' Patient Education Seminar & Nature Walk 2013

TRANSLATED BY SHAWN WONG

For some kidney patients who are on dialysis thrice a week, Sunday is the only time that they can get together for social activities. With that in mind, Renal Friends, KDF's Patient Support Group, organised a patient education seminar on the 24<sup>th</sup> November 2013 at HortPark. Besides patients from both KDF Haemodialysis and Peritoneal Dialysis centres, patients from the Singapore General Hospital were invited to join the seminar as well.



The day started off with a health talk titled 'Exercise Made Easy' by Clinical Exercise Physiologist, Ms Janice Tay. The session was conducted in a multi-purpose hall surrounded with foliage and cultivars of plants, which helped to put the participants at ease.

Participants responded actively and affirmatively when asked if they thought exercise was important, however, there were only a few show of hands when Ms Tay asked if any of them exercised regularly.

Being on dialysis is not always comfortable, this is especially so for those undergoing Haemodialysis, as they have to sit through 4-hour dialysis sessions each time. During the seminar, Ms Tay explained the importance of regular exercise and how it is beneficial to the mind and body of a patient on dialysis.

With the use of a fitness ball, Ms Tay demonstrated simple exercises which patients could try during their dialysis treatment. She also proceeded to

show a few examples of some simple exercise routines that patients can perform at home with ease.

The practical and educational demonstration was entertaining and engaging. Everyone was participating; even patients on the wheelchair tried some simple exercises. A quiz was conducted at the end of the talk and tokens were given to patients who answered correctly. The light-hearted and fun educational seminar ended after two hours. After which, participants proceeded to the entrance for a sumptuous lunch spread.

After their appetites were satisfied, participants were encouraged to take a stroll around the various tranquil gardens. Some of our patients were seen commenting on the unique and innovative landscape design on display while others visited one of the main attractions of HortPark, the Fruits & Vegetable garden, where one could appreciate nature up close.

Amid the joyous environment and the crisp clean air, the event concluded at around 1pm. KDF would like to take the opportunity to extend their heartfelt thanks to the volunteers for their support and assistance for this event.

# The Gift of Time

BY JEMIN CHUA



It is a common misconception that giving money is the only way to help others in need.

To our young friends who are currently studying or just out of school, they may not necessarily have the means to contribute financially, nonetheless, there is something which is just as valuable which they can surely afford to give – time.

Last December, KDF launched a month-long campaign of season giving titled 'The Gift of Time', where we invited student volunteers to "give" their time to charity.

We called for smile ambassadors to man our roving photobooth, and also for volunteers to lend us their voices for our charity caroling performances across the island.

Being the first Christmas fundraising event organised by KDF, the team behind it gave a lot of thought to what could be done, and we finally settled with

the theme of giving - a concept unanimous with Christmas.

There was no better way to do so than to put up free caroling performances to share the festive cheer through song. We also gave out KDF wristbands and miniature candy canes to the audience, most of whom were delighted at the surprise gesture.

In the true spirit of giving, passersby and the audience also generously contributed to our brightly decorated donation box.

During the caroling performances, it was most heartening to see people coming forward to ask us why we were doing this, and simply just sharing some nice memories of the season with us.

It was also encouraging to find the various student groups from tertiary institutions readily responding to our call for volunteers, with some groups even offering to take up several

timeslots. It was with their support that the eight caroling performances which we put up were such a success.

It was truly a gift of time, as December was a busy period for our student volunteers, especially so for the choir groups who were fully booked with year-end performances.

KDF is also grateful towards the support rendered to us by our venue partners, JCube and nex, for providing us with the wonderful venues to conduct our caroling performances.



# The Giver

BY SAMANTHA PNG

It is commonplace to solicit for donations along the bustling streets of Orchard Road. However, just for that one specific day, it became my opened window on the entire act of "giving".

For two weeks in December, bubbly hard working undergraduates became the voice of KDF, lending their vocals to sing popular Christmas numbers, bringing smiles to the passers-by on the streets of Orchard. This busking activity was just one tiny way to spread the joy to everyone else, our patients included.

Donors came in the form of retirees, warm tourists, even suited up businessmen. Some emptied their coins from their purse, whilst others took out a wad of cash and gave out some notes.

Amidst these givers, what stuck with me most was this elderly man on his rickshaw. He must be a common face, riding his rickshaw with his wife in tow.

He came towards me, dropped his donation (one of the higher denominations, no less), and shook all of our hands with a chirpy Merry Christmas. As I stood frozen in my tracks, he walked away cheerfully and went about his routine of collecting empty drink cans from the bins nearby.

I'm not sure how many cans he would have to collect to earn that amount he donated, or how many meals he could have fed both him and his wife. I think I would never know. I probably will never know his story either. But

one thing I do know, it's not really about the gift. It's the Giver.

Thank you Uncle, for your act of kindness. You have shown me what true giving is all about.



## Special Thanks To:





# 96 HOURS

BY JEMIN CHUA

PHOTOGRAPHY BY CLIFFORD LEE & SABRINA WON

Do you know how it feels like to cycle more than 10 hours a day, with less than four hours of sleep every night for four days straight? The group of cyclists who completed the 1000km round trip to Malaysia would tell you that it is definitely not for the weak-willed.

Aside from sleep deprivation, long hours on the road and muscle aches, the cyclists also had to endure 4-Hs: Heat, Haze, Hills and Harsh night conditions. Even the best of them were exhausted pedaling under these trying circumstances.

From February 25th to 28th, the KDF Millennium Ride 2014 saw 45 cyclists whisking through various states in Malaysia, stopping over at Malacca, Kuantan and Mersing. Pedaling at an average speed of 30km/hr, covering distances of more than 200km daily, and pausing only for meals and water breaks every 30-40km or so, the 1000km ride was successfully completed in four days.

## UNFORGIVING HEAT

At temperatures above 33°C and the scorching sun above their heads, it was searing just being

out in the open, what more physically exerting themselves with the constant pedaling. Faces blushed and in their sweat-soaked jerseys, cyclists downed gulp after gulp of chilled isotonic drinks and mineral water to cool down. The heat was quite truly the only constant in the four days and most definitely one of the most arduous conditions of the trip.

## A HARSH NIGHT

The second day brought about the most harrowing experience of the trip for the cyclists. Not only was the distance to be covered the longest of four days, it was also littered with countless slopes, while the road conditions were less than optimal. Due to the distance and difficulty of the route, the group was grossly behind schedule. At 4.30pm, they were still a good 100km away from the destination for the day.

Even by sunset, the group was no closer to their destination. With the cyclists' safety in mind, it was intended for the safety vehicles to ferry cyclists into the city area where there were streetlights. However, convinced by the cyclists' strong desire



Like a cosmic prank of sorts, it started drizzling sheer minutes after they exited the haze-enveloped stretch. Even as the drizzle quickly turned to showers, the peloton continued pedaling cautiously on the slippery roads, cooling off their bodies in this timely act of Mother Nature.

### HILLS AND MORE HILLS

The last leg of the journey presented the most arduous challenge, in the form of the hilly roads of Mersing. Being the last day of the odyssey, cyclists were already stretched to their limits with the intensity and fatigue accumulated over the past three days.

At any rate, the endless rolling hills in Mersing were a challenge not to be belittled. Whether in a group or at their own pace, cyclists stretched their individual limits to push through this daunting test of the mind and body.

to carry on, it was eventually decided that they would continue cycling, but in a convoy.

Safety vehicles illuminated the pitch dark rural road with their headlights and guarded the cyclists fiercely from other vehicles on the road. Paced at 20-25km/hr, the group made it safely through the rural roads disquietedly; looks of relief were evident as they entered the brightly lit city road. By the time they had reached their destination for the night, they had already spent 15 hours on the road.

### THICK CHOKING HAZE

Haze and local bush fires also added to their woes. Although the group passed several post-fire stretches where the haze and burning smell was significantly felt, none was as intense as the long stretch of haze shrouded road they passed through on the morning of the third day, en route out of Kuantan headed towards Rompin.

Unlike previous encounters, this was thick choking haze that stretched on for several kilometers causing visibility to be extremely low with acrid smoke in the air. As a safety measure, the group was immediately halted and masks were distributed, whilst safety drivers checked the conditions of the road ahead.

Having heard from the lead safety driver that the haze would clear some distance ahead, the cyclists were determined to carry on. Unfazed by the less-than-favourable conditions, the cyclists recommenced the journey with their masks on, pedaling at constant speed as a peloton for several kilometers into the clearing.



Whilst the recurring climbs and descents tested their skills and tenacity, those who overcame their physical and mental limits were awarded with breathtaking sights to behold. One can only imagine the sense of accomplishment upon successfully conquering the terrain and to hold this incredible 1000km distance as a personal accolade.

**Look out for the continuation of this article and more photos in our next issue.**

# Glomerulonephritis Part 2

**In the last issue we covered basic information about glomerulonephritis and the signs to look out for, today we will continue with the outlook and treatment options.**

## What is the long term outlook for patients with glomerulonephritis?

It depends on various individuals with different types of glomerulonephritis and different signs and symptoms. Those patients who have only blood in urine with no significant protein leakage from the kidneys may resolve and get well.

However, those with large amount of protein in the urine or if the renal biopsy shows damage of kidney filters, are likely to develop kidney failure with time. So far, there are no means to prevent glomerulonephritis.

## If the person has been diagnosed with glomerulonephritis, what can be done?

Often there is no cure for chronic glomerulonephritis. However, the inflammation can be controlled and progression of damage to the kidneys can be slowed down.

What are the types of treatment available to slow down the progression of damage to the kidneys? In a very mild case, no treatment is necessary. Your doctor will let you know what stage of glomerulonephritis you have.

For moderate and advanced cases treatment includes:

### Drug Therapy

- Treatment of high blood pressure with antihypertensive reduces stress to the kidney filters.
- If there is fluid retention, diuretics will help to get rid of the excess water and salt. The drug causes a lot of urine to be passed out.
- Reduce the leakage of protein with certain classes of anti - hypertensive called ACE inhibitors or Angiotensin II receptor blockers. These drugs reduce the leakage of protein into urine.
- Anti-platelets (dipyridamole) and anti-coagulant (warfarin) have been shown to be effective in IgA Nephropathy.

### Dietary Measures

- Control salt and water intake to prevent fluid retention.
- Control potassium intake to prevent abnormal heart rhythm.

- Control protein intake to reduce stress to the kidneys. There is a very fine balance between too much protein, which can stress the kidney, and taking too little, which can lead to malnutrition. It is very important that you see the dietician so that she can assess and advise you on the correct amount to take.

## When will a patient with glomerulonephritis have kidney failure?

The time it takes for a glomerulonephritis to cause kidney failure is usually many years. Because there are often no symptoms, many people do not know they have glomerulonephritis. Even when tested positive for urinary abnormalities this is ignored as there is often no pain or swelling seen. A mild case in which no treatment is required can progress to a more serious stage requiring treatment. Those on treatment may default because the patient feels well. The opportunity to control the illness is then missed because when symptoms surface the patient may already have kidney failure.

## What are some points to remember if one is diagnosed with glomerulonephritis?

It is therefore important to remember the following points:

### a) Mild cases

Even if there is no treatment, monitoring on a yearly basis is necessary with your family doctor. If the urine protein becomes excessively high, you should come back to the hospital for further assessment.

### b) Moderate to advanced cases

Medication would usually have been started. Follow up should continue and monitoring of the degree of protein leakage, kidney function and complication of the drug treatment should be done periodically.

Prevention of kidney failure is the goal, as treatment of advanced kidney failure is time consuming and very expensive.

Remember, the whole process occurs over a long period of time, thus follow up and compliance to treatment is essential in preventing kidney failure.

For more information, visit these websites:  
[www.kdf.org.sg](http://www.kdf.org.sg); [www.davita.com](http://www.davita.com);  
[www.uptodate.com/home](http://www.uptodate.com/home)



# Fun with Health!

“Who says health cannot be fun?”

**Your kidneys are your vital organs but how well do you know about its functions? Arm yourself with the necessary knowledge by participating in this quiz! Engage your family and friends and learn something new today.**

(Clue: Most of the answers can be found on our website: [www.kdf.org.sg](http://www.kdf.org.sg))

- \_\_\_\_\_ is a hormone that regulates the amount of sugar in the blood.  
a) Melatonin   b) Insulin   c) Testosterone
- Which of the following is not a form of dialysis?  
a) Haemodialysis   b) Rhabdomyolysis   c) Peritoneal Dialysis
- At KDF, how many times does a patient need to go for dialysis per week?  
a) two   b) three   c) six
- Proteinuria is a condition when more than \_\_\_\_\_ of protein is detected in urine per day.  
a) 100mg   b) 150mg   c) 200mg
- \_\_\_\_\_ and \_\_\_\_\_ are the two leading causes of kidney failure.  
a) Scoliosis and Urinary Tract Infection   b) Diabetes and Chronic Glomerulonephritis  
c) Gout and Hernia
- Identify which is not a correct description of the kidney's function?  
a) Removal of waste products   b) Regulation of chemical & water balance  
c) Reduce sweat output
- The tiny units responsible for filtering waste products in the kidneys are \_\_\_\_\_.  
a) Electrons   b) Neutrophil   c) Glomeruli
- Fluid gain should not be more than \_\_\_\_\_ of body weight between dialysis.  
a) 10%   b) 5%   c) 15%

## Do You Like Our New Look?

Your feedback is important to us. Please share your thoughts with us.

### What do you think of our new look?

- I love the new look!  
 Neutral  
 I prefer the previous version

### What do you like about our new look? (You may choose more than one option).

- The vibrant colours  
 The clean and uncluttered look  
 The increase in photographs  
 The layout and design of articles

### What do you think can be improved on? (\*Please circle).

- The fonts can be **bigger/smaller**
- I would like to see **more/less** pictures
- I would like to see **more/less** of the KDF bean mascot
- I hope the newsletter can be **more/less** colourful

### Do you have any additional comments for us?

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Name: \_\_\_\_\_

Age: \_\_\_\_\_

Email: \_\_\_\_\_

### Thank you for your feedback!

Please fax this section to 6225 0080 or mail it back to Resource Development & Communications Department at Blk 333 Kreta Ayer Road, #03-33, Singapore 080333. Alternatively, you could mail it back to us together with your donation in the Business Reply Envelope provided.

# 肾小球性肾炎

上一期《肾析简报》我们介绍了肾小球性肾炎和其症状，这一期让我们继续探讨患者的病程发展和治疗方案。

## 肾小球性肾炎患者的病程发展。

这需视病人肾炎的种类和临床症状而定。如果病发初期病人的尿液中只有血细胞而没有蛋白质，通常比较容易康复。当病人尿液中含有大量的蛋白质或者肾活组织检验呈现肾小球有受损的现象时，则较容易发展成肾功能衰竭。到目前为止，肾小球肾炎还没有特殊的预防方法。

## 倘若病人被诊断患上肾小球性肾炎，需要如何治疗？

慢性肾小球性肾炎往往是无法痊愈的。不过，疾病发展的情况可受控于人，从而能够延缓肾脏受损的进度。

## 哪些治疗可以延缓肾脏受损的进度？

病情轻微或在早期时，需要十分注意休息并无需特殊的治疗。您的医生也会根据病情让您知道您所患的肾小球性肾炎是属于哪一期。

中期性和末期性的治疗包括：

## 药物治疗

- 以抗高血压药物控制血压来减轻肾血管的压力。
- 若有水肿，利尿剂(Diuretics)可助消除多余的水份和盐份。这类药可使排尿量增加。
- 以某类抗高血压药物ACEinhibitors或Angiotensin II receptor blockers来减低蛋白渗漏，这类药物能减低尿液中蛋白的含量。
- 抗血小板剂(Dipyridamole)和抗凝剂(warfarin)已证实对免疫球蛋白A抗体肾病(IgA Nephropathy)有效。

## 饮食控制

- 控制盐份和水份的摄取以减低水肿。
- 控制钾的摄取以预防心律不齐。
- 控制蛋白质的摄取以减轻肾脏的压力，蛋白质的平衡是很微妙的，过量会增加肾脏的压力；不足则会造成营养不良。因此，请教营养师可协助您调整您的蛋白质摄取量。

## 肾小球性肾炎患者何时会发展为肾衰竭？

通常，肾小球性肾炎需要好几年才会发展成肾功能衰竭。因为发病初期一般都没有征状，所以病人并不知道自己患上该病。当病人被验出尿液不正常时，通常也因身体没有疼痛，肿胀而忽略就医。虽然轻微的病情无需治疗，但极有可能发展至需要治疗。因此，病人必须定期复诊。否则，可能会错失控制病情的机会而导致肾衰竭。

## 如果被诊断患有肾小球性肾炎，病人要谨记以下两点：

### a) 发病初期：

即使无需治疗，记得到您的家庭医生处进行基本的常年例行检查。如果尿蛋白有呈现过多的现象，您就必须回到医院作进一步的检验。

### b) 中期性至末期性：

通常必须服用药物，病人需要定期复诊，并且检验蛋白渗漏的程度、肾脏的功能和所服药物的并发症等。

预防肾衰竭是极重要的目标，因为治疗肾衰竭不但消耗很多时间，而且费用高昂。

切记，整个治疗过程需要病人长时间的配合，因此，准时复诊与遵守疗程是预防肾衰竭的最实际方法。

预知更多，可参阅以下网站：

[www.kdf.org.sg](http://www.kdf.org.sg)

[www.davita.com](http://www.davita.com)

[www.uptodate.com/home](http://www.uptodate.com/home)

# 保健乐区

## 谁说健康很无趣?

肾脏是人体内至关重要的器官，但您对肾脏功能的认识有多少呢？与您的家人和朋友一起加入我们的小测验，用这些新知识来武装自己吧！

(小贴士：大部分的答案都可以在KDF网站www.kdf.org.sg找到哦)

- \_\_\_\_\_是一种调节血液中糖份的激素。  
a) 褪黑素    b) 胰岛素    c) 睾酮
- 以下哪一种不是肾脏透析方式？  
a) 血液透析    b) 横纹肌溶解    c) 腹膜透析
- 在KDF血液透析中心治疗的病患，每星期需要进行几次透析治疗？  
a) 两次    b) 三次    c) 六次
- 当人体自尿液每日排出的蛋白质含量超过\_\_\_\_\_时，被称为蛋白尿。  
a) 100mg    b) 150mg    c) 200mg
- \_\_\_\_\_及\_\_\_\_\_是导致肾衰竭的两大主因。  
a) 脊椎侧弯及尿道感染    b) 糖尿病及慢性肾小球肾炎    c) 痛风及疝气
- 以下哪一种对肾脏功能的描述是错误的？  
a) 排除体内废弃物    b) 调节体内化学物质和水平衡    c) 减少汗液排出
- 肾脏里负责过滤人体内废弃物的微小单元是\_\_\_\_\_。  
a) 电子粒    b) 中性粒细胞    c) 肾小球
- 在透析治疗期间，人体摄入液体量应控制在体重的\_\_\_\_\_以内。  
a) 10%    b) 5%    c) 15%

答案：1.b 2.b 3.b 4.b 5.b 6.c 7.c 8.b

## 您喜欢《肾析简报》的崭新面貌吗？

您的意见对我们很重要，请与我们分享您的看法。

您对《肾析简报》的新面貌看法如何？

- 非常喜欢  
 不喜欢也不反感  
 更喜欢之前的样子

您喜欢新面貌的哪一方面？（可多选）

- 色彩鲜艳的页面  
 简洁干净的页面  
 照片数量  
 页面的排版设计

哪些方面有待加强？（请用圈作答）

- 文章字体应该更大/更小
- 照片应该更多/更少
- 吉祥物的出现次数应该更多/更少
- 页面的色彩应用应该更丰富/更低调

其他意见

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姓名：\_\_\_\_\_

年龄：\_\_\_\_\_

电邮：\_\_\_\_\_

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# 96小时

译蔡永馨

摄影CLIFFORD LEE & SABRINA WON

您是否想过，连续4天，每天在脚踏车骑行10个小时以上，每晚睡眠不超过4个小时，这样的条件是何等严峻？成功征服此次一千公里远征的爱心骑士会斩钉截铁地告诉你，这绝对不是意志力薄弱的人所能轻易完成的壮举。

除了睡眠不足，路程漫长和肌肉酸痛之外，参与此趟旅程的骑士也经历了：酷暑、雾霾、山峦、夜骑等境遇。面对这般严峻的条件，连当中的资深脚车好手也稍有吃不消。

今年2月25至28日，《KDF 2014 慈善单车马拉松》带着45名爱心骑士穿梭于马来西亚各州，并分别在马六甲、关丹、丰盛港各留宿一宵。大队以平均每小时30公里的时速前进，每日骑行200公里以上，并仅在用餐时间和休息站作短暂停留，这一千公里路程才得以在4天内圆满达成。



### 炎炎酷暑 烈日当空

在超过33摄氏度的高温之下，顶着烈日，单单站在户外就已令人酷热难耐，更何况是在这种条件之下不停地踩着踏板。骑士们个个脸颊赤红、大汗淋漓，一有机会便大口大口地灌下冰凉的矿泉水和运动饮料，防暑降温。而这高温烈日全程跟着大队，可说是此趟旅程唯一一成不变的苛刻条件。

### 夜骑小路 步步惊心

四天的旅程当中就属第二天的行程最为惊险难熬。那天不仅是骑行里程最长的一天，沿路还得经历各大小山坡及颠簸的乡间小路。也正因为环境的因素和长时间的骑行，那一天的进度一直非常落后。到了下午4时30分，大队还离当晚的目的地100公里之远。

即便到了夕阳西下，队伍的进度依然没有大幅度的进展。心系骑士们的安危，我们本打算让随行的小巴士载着骑士进入城市，但在他们的强烈要求之下，最终我们决定利用保障车保驾护航，让队伍夜骑进城。

夜骑大队的最前方，由一辆保障车开路并提供照明，其他随行的保障车则在骑士的前后保驾，严防其他车辆插入夜骑队伍，竭力保障骑士的安全。队伍以每小时20-25公里的速度移动，好不容易安全进入街灯通明的城市街道，骑士们忐忑的心情才霎时松了下来。而历尽千辛万苦终于抵达当晚的目的地时，骑士们当日的骑行总时已有15个小时之久。

### 雾霾笼罩 风雨侵袭

这趟旅程的另一个困难之处是当地丛林野火所导致的浓浓雾霾。爱心大队一路上虽然经过多处被烟雾笼罩的路段，却远远不及第三天的所见所‘闻’。大队在离开关丹前往云冰的路上，烟雾弥漫，能见度非常低，阵阵刺鼻的烧焦味扑鼻而来，情况维持好几公里。



由于烟雾的严重程度与之前所经历的截然不同，考虑到骑士的安危，我们立即下令暂停骑行，并分发口罩。随行的保障车则往前探察前方的烟雾情况。在确认烟雾会在前方有所好转之后，骑士们也表示希望能继续前进，队伍便以大部队(peloton)的形式一同骑行。

才离开被烟雾包裹的路段没多久，爱心骑士便遭遇豪雨。他们一边小心翼翼地骑行，一边感受着这来自大自然的礼物/愚弄。

### 山峦连绵 高低重迭

最后一天，骑士们迎来此趟旅程最大的挑战：丰盛港的绵延山峦。历经3天的翻山越岭，骑士们早已疲惫不堪，身体也近乎极限。但是丰盛港的山峦又岂能被小视？

三三两两一组也好，单独奋战也罢，爱心骑士突破了身心的极限，迎战这项艰巨的任务。高高低低的山路、上下坡的骑行，考验了骑士的技术和意志的坚韧。一旦克服了这些身心灵的挑战，大自然便立即呈上一片震撼美景作为奖励。



成功克服地缘的劣势，并顺利完成这趟一千公里的艰巨的旅程，那种莫大的成就感是旁人所无从想象的。但45名爱心骑士却做到了，也感受到了。

敬请期待下一期的后续报道及更多的照片！

# 走近运动，亲近园林 -肾友教育讲座及郊游2013

文鲁旭

对于一星期需要洗肾三次的肾脏病友来说，只有星期天才是他们真正空闲聚会的日子。在肾脏透析基金(KDF)肾友会的精心安排下，一场以休闲与教育相结合的肾友知识讲座与郊游活动于2013年11月24日星期天的早晨在新加坡园艺园林(HortPark)悄然展开。除了KDF的血液透析和腹膜透析的肾脏病友之外，新加坡中央医院的病人也受邀参与此次讲座。

早上的节目是聆听一场由临床运动生理学专家Ms Janice Tay主讲的有关“运动简单化”的主题讲座。在绿荫围绕的开放式多功能厅中讨论有关运动的话题，病友们无不感到轻松自在。虽然每一位在场的听众都认为运动是很有必要的，但被 Ms Tay 问到“你是否经常运动呢？”，却没有几人敢举手了。

每次长达四个小时不能移动的透析治疗，对于洗肾病友特别是血液透析病友，是非常辛苦的过程。所以此次讲座中，Ms Tay 特别为大家讲解进行适当地运动对洗肾病友的身心好处，并用健身球现场示范在洗肾过程中，用没有插瘻管的手和下肢可进行的简单运动，还有在日常生活中可在家里作的锻炼。

这些实用又好记的运动方法和活泼生动的现场练习，使得在场听众兴趣大增，一个个兴致勃勃地参与其中，甚至有坐轮椅的病友也坚持练习，这些简单化的运动让他们精神焕发。在节目结束前，病人们参与了测试题，答对的病人还得到了丰富的奖品。

近两个小时的教育讲座在轻松的气氛中不知不觉地快乐度过。而多功能厅外美味的午餐早已摆放精致，只等着经由刚才的运动练习已是饥肠辘辘的病友们前来大快朵颐。



在蓝天绿地间享受丰富午餐是件美妙的事，而在午餐后还可在各式绿色园艺间闲庭漫步，更是再惬意不过了。午餐后，病友们三三两两或手牵手或肩并肩行走在园林小径上，偶尔驻足对造型奇特的盆栽花草评头论足一番，偶尔像孩童般玩起游乐区的各种娱乐设施。园林中的绿色菜园最是吸引大家的注意力，一些平时吃的瓜果蔬菜终于在这里见到了它们的“真身”，众人细细欣赏生怕错过每一株果木。

带着愉悦的心情和清新的空气，大家在下午1时结束此次教学旅程。KDF非常感谢所有义工们对此次活动给予的支持和帮助。

便到诊所求医，却对医生所开的药物过敏。一名医生甚至建议他去针灸来减轻他的症状。最后竟是一名中医师诊断出他患有肾衰竭。

曾先生两年前开始洗肾，起初他并不愿意接受治疗，因为他觉得肾衰竭是一种慢性疾病，即使长期洗肾也不能使肾功能痊愈。不过经医院护士的耐心辅导，逐渐让他打消不肯洗肾的念头。

自从曾先生的妻子在2004年患胃癌过世后，他便和女儿一家四口居住在一间5房式组屋。曾先生虽还有两个儿子，但由于他们的收入微薄所以曾先生也不忍心向他们开口要钱。值得庆幸的是，他的女儿及女婿都非常支持曾先生接受透析治疗。夫妻俩的收入维持日常生活开支都很困难，他们却仍支付曾



先生的医疗费，这让他由衷感激一回。回忆到这，他已强忍着泪水。

在采访过程中，我感触良多。我们国家的发展突飞猛进，然而有很多像曾

先生这样的病人；他们怀念新加坡的旧时光。那个时代，不论是三餐或是医疗费都是负担得起的。随着我国的通货膨胀率与日俱增，要无业的曾先生来应付医疗费用，是一项艰巨的挑战。

2012年，一名医生建议曾先生到KDF洗肾中心接受治疗，让他的经济负担有所改善。在KDF所提供的资助下，曾先生再无须应付庞大的医药费。他衷心地想感谢KDF的工作人员和护士，感谢他们的照顾，让他慢慢适应了洗肾的过程。

KDF的首要宗旨是确保所有肾脏病患者不会因为缺少洗肾经费而丧失性命。您可以帮助像曾先生一样的年迈病人度过经济难关，如果您愿意帮助他们，您可以将您的捐款通过随附的商业回邮信封寄交给我们。欲知更多有关信息，请浏览我们的网站[www.kdf.org.sg](http://www.kdf.org.sg)。

## 活动

# 赐予者

译 蔡永馨

在人来人往的乌节路上遇到募款活动是大家早已司空见惯的事，但在12月中旬的某一天，我却在那里重新认识‘赐予’这个词。

肾脏透析基金于去年12月进行为期两周的圣诞街头表演筹款行动。我们邀请了活泼的大专学府学生为慈善献声，唱出首首耳熟能详的圣诞歌曲，把祝福传递给每一个人。

上前慷慨解囊的人形形色色，有退休人士、外国游客和西装笔挺的上班族，但这其中最让我印象深刻的是一位骑着人力车的老翁。载着老翁和妻子的人力车缓慢地向我们驶来，停下。

老翁下了车，徐徐走到我们的面前。他伸出手，将一张十元大钞投入我们的募款箱，并一一与我们握手，祝贺圣诞快乐。在我还未回过神来时，他早已踏着轻快的步伐



走远了。我看着他的背影渐渐向垃圾桶靠近，弯腰，伸手，一个接一个地捡起了垃圾桶里的空罐子放上三轮车。

我不知道他要捡多少个空罐子才能赚到他所捐的金额，更不知道那笔钱可以供他们夫妻俩吃几顿饭，我大概永远无从得知吧。不过，这让我确切领悟到，重要的并非礼物本身，而是送礼者的真心。

谢谢您的爱心和慷慨，您教会了我什么是真正的赐予。

# 肾析简报



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## 曾先生不为人知的故事

译黄子洋

在一个非常炎热的星期四下午，我来到了KDF位于碧山的洗肾中心。当日的采访对象，曾亚九先生已在他的坐位接受透析治疗。他身穿一件黑色风衣，头顶戴了同色系条绒帽子。因为不能适应冷气的温度，所以双脚盖上了印有花纹的被子。可能是历经沧桑，岁月的痕迹已布满他的脸颊。理了一头整齐的短发又加上一副黑边框的眼镜让曾先生看起来非常平易近人。

曾亚九的原名本该是曾亚光，但1940年代期间，出生登记手续要到警察局办理，负责警官因为听不懂曾先生家人的母语，而把他的名字给写错了。我好奇地问曾先生，为什么经过了这么多年，他始终没有更改他的名字。曾先生说道：“反正都这么久了，我的朋友都已经叫惯了。”

曾先生曾在汽车厂当过一名机械人员，也在船厂负责喷沙的工作。步入中年时，他开了一家铁工厂专提供焊铁服务。曾先生年纪轻轻就拥有这么多技能，让我对他深感佩服。他仅靠他的双手和一股不屈不挠的精神，埋头苦干就是为了能在社会上立足。十多年前，他还在女皇镇熟食中心经营一家摊位，却因为

在2006年中风而导致曾先生不得不结束营业。

年轻时，曾先生是个为社会贡献的建国先锋。他与那一代持着相同理念的先驱者，把新加坡塑造成为一个繁荣的国家。如今曾先生的健康已亮起红灯，使他不能继续为社会尽力，这让他感到非常惋惜。

鉴于自己的病情和高龄，曾先生的求职道路布满荆棘，也间接让他觉得自己一无是处。在我访问曾先生时，他多次向我提出他自己并不是最好的采访对象。

现年67岁的曾先生患糖尿病已有24年却不当它是一回事，因为他觉得这种慢性疾病对人体没有大碍，因此也无需大惊小怪。几年前他发现自己的双脚肿胀，



02  
赐予者



03  
肾友教育讲座  
及郊游 2013



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96小时

主编：  
Watson Ong

特邀华文编辑：  
Prof Chris Y. H. Tan

助理编辑：  
Jemin Chua  
Shelley Lu

文章提供：  
Shawn Wong  
Patient Services Department

肾析简报出版方：  
肾脏透析基金  
Blk 333 Kreta Ayer Road,  
#03-33, Singapore 080333  
Tel: 6559 2630 Fax: 6225 0080  
网址: www.kdf.org.sg

