

Working as a nephrologist



“I chose nephrology because I think it’s such an interesting field within which you get to see a huge variety of medical problems (not just renal but all kinds of pathology) in a complex cohort of patients. Also, the people I met in renal during my basic training happened to be extremely friendly, humble and supportive people, which is a really important aspect to consider when choosing a speciality. Renal transplant is a whole different field which offers a lot more scope to get involved with new and exciting research”.

Dr Samadhi Wimalasena, Renal Medicine
Auckland City Hospital

New Zealand nephrologists talk about the reality of working within this field

Why did you choose nephrology and what do you like most?

Nephrology treats patients with acute and chronic disease and offers effective treatment through therapeutic interventions that include dialysis and transplantation. It involves intellectual challenges in diagnosing and dealing with complex renal, fluid and electrolyte problems. Patients are managed in a multi-disciplinary environment and their care can continue for decades

What strengths and abilities make a good nephrologist?

Motivation is important - you should want to apply your skills and intelligence to understanding and managing renal problems. You should possess good diagnostic logic and you need to be able to handle a busy workload. The working environment is a collaborative one so you will require effective staff interaction and leadership skills.

As a specialist, can you describe a typical day?

The work is highly variable but a typical day for a hospital specialist might involve a combination of inpatient and outpatient work, consultations, interdisciplinary meetings, and leadership of treatment teams in dialysis and transplantation. A research component is desirable but not always possible

What do you think are the future challenges of nephrology?

There continues to be rapid growth in the number of patients presenting with end stage renal failure. New strategies need to be developed and established strategies implemented to screen for renal disease and delay chronic progressive renal failure. Newer approaches to providing more efficient dialysis need to become available, preferably administered in the home environment. New therapies for primary glomerulonephritis, diabetes and its complications are needed, and renal transplantation requires safer therapies to enable further expansion. There is exciting potential in the future for the application of DNA and proteomic methodologies in diagnosis and guidance of

therapy. The development of new agents, particularly monoclonal therapies will continue to expand therapeutic options. Epidemiological research and randomised controlled trials in nephrology are increasing and expertise in epidemiology and bio-statistics is highly sought after.

What advice would you give someone thinking about a career in nephrology?

Nephrology provides breadth of medical practice, intellectual challenges, satisfactory outcomes and considerable opportunities for clinical research.

What are future opportunities in nephrology?

There is currently an insufficient number of advanced trainees to meet growth in demand for the services of this specialty. Ample employment opportunities will continue to exist both in main and smaller centres in New Zealand, and research opportunities are substantial.

What is the work/life balance like?

It may be possible to take time out during training. Once you have qualified and gained employment as a specialist, your ability to take extended leave will be dependent on the availability of locum cover.

At junior level the specialty can be taxing on family life, although at senior level the role does not usually require excessively long hours. For consultants, on-call work can be demanding if a registrar service is not available.

What are the disadvantages of nephrology?

Even when you are a senior consultant there is often an ongoing on-call requirement. Sources of frustration can include funding constraints in health care in the public sector and the lack of knowledge and experience of some primary health care service providers with regard to care of renal patients.