

Social and Economic Impact of Chronic Kidney Disease of Unknown Aetiology in Sri Lanka

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CKDu has made its biggest impact in farming populations in North Central, Uva and North Western Provinces. The social epidemiology of the disease in respect of gender, age, ethnic and social class differences in the prevalence of disease is yet to be fully understood. To the extent the disease is widespread in newly developed areas with heavy agrochemical use, this may be seen as a development-induced disease. The social impact of the disease includes sudden disruption of livelihoods following the onset of disease in typically the chief breadwinner of the household, moral panic concerning what causes the epidemic, disruption of children's education, stigma encountered by the patients and their families, and lack of support mechanisms for the families affected. In coping with the high cost of medical treatment, sudden disruption of their livelihoods and increased loss of renal functions, the affected families resort to multiple coping strategies such as mortgaging and selling of assets, soliciting of funds and kidney donations from the public as renal failures reach a crisis point. In order to minimize the adverse impact of the disease, effective interventions are needed for prevention of the disease including early diagnosis, raising public awareness, promoting patient activism and legal measures against aggressive marketing of and inappropriate use of agrochemicals.