My SPIN consultant role & working with the BAPN

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I set out to train as a nephrology SPIN paediatrician because it offered me the opportunity to maintain my general paediatric skills which are invaluable to my daily clinical practise, and interest in International child health. At the same time, it gave me an avenue to develop and practise within a subspecialty I am enthusiastic about. Having worked as a nephrology SPIN consultant in Gloucester for the last 5 years, the learning experience and extent of my contribution to the care and treatment pathways of children with kidney and bladder conditions has been immense and far more than I expected.

Like many in a similar position, my scope of work reflects the level of collaboration within the paediatric nephrology network. A lot of the care I am able to provide is made possible with the specialised support and structured governance processes my hospital is able tap into at the tertiary nephrology centre in Bristol. Hence, an array of multiple conditions in my single professional led renal clinics; including early stages CKD, hypertension, nephrotic syndrome, IgA vasculitis, and a few other glomerulonephritic diseases. I am able to oversee a service that offers separate antenatal, CAKUT and children’s continence clinics. A fixed number of joint renal and transition clinics take place each year, and are run alongside two committed and dedicated paediatric and adult nephrologists. These clinics provide a fantastic opportunity for my professional development and for the patient a guaranteed best possible outcome.

I am convinced there has never been a better time to develop renal SPIN practice. Few things in paediatric practice bring that expression of relief on a parent’s face, knowing their child is being attended to by a paediatrician who specialises in that area. Many will find it uplifting that the paediatrician is based at their local hospital and is easily accessible to them. From arranging a blood test or prescription for them to pick up, to facilitating their child’s definitive treatment by a nephrologist or urologist in a tertiary centre; the roles of SPIN and general paediatricians with renal interest have never been so important to many families who have children with kidney disease. Our contribution is potentially what is needed to ensure children receive the ‘best possible’ quality of care nearer to their homes.

With the challenges we face today as paediatricians and healthcare professionals in general, there is an obligation to strengthen the level of engagement with the multidisciplinary teams within our
paediatric renal networks. BAPN is an organisation working tirelessly to improve the quality and standard of care provided to children with kidney disease; and has done this successfully through membership of mostly paediatric nephrologists. It therefore offers the right platform to boost our participation and collaboration in future planning and development of paediatric renal services.

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