Chronic Kidney Disease – a Challenge for European Healthcare Systems

10% of the population is affected by chronic kidney disease (CKD). About 70 million Europeans have lost some of their kidney function and are at high risk of becoming dependent on renal replacement therapies (dialysis or transplantation). This is due, on the one hand, to demographic trends – people are becoming older, and loss of renal function is a symptom of old age. Yet demographic trends alone do not explain the steep upward trend in chronic kidney disease (CKD). Several other conditions are linked to increased incidence of CKD, e.g. diabetes mellitus, hypertension, smoking, ageing, and obesity. All subjects having these characteristics should not only be adequately treated for their primary condition, but should also be regularly screened and treated specifically for their kidney disease.

Yet CKD is still frequently neglected as a health hazard, despite being epidemiologically and economically important. The increasing prevalence of chronic kidney disease is also a growing problem for the healthcare economy. The annual costs incurred for a dialysis patient in Europe are estimated at approx. EUR 80,000.

One reason for the neglect of CKD might well be that the ‘alarm signals’ for CKD are few, unless it has progressed to an advanced stage, when preventive measures have no further impact. An even more important problem is the lack of awareness among the general population and even among the medical community of the risks of kidney disease. A frequent misconception is that the CKD population is identical to those on dialysis. However, dialysis patients represent only 1 to 2% of the population with CKD. Greater educational efforts should be directed not only at the general population, but also at all medical and paramedical professionals who are not specialised in kidney disease.

The only options for reducing the dialysis population, or at least for keeping it stable over the long term, are to improve the early detection of chronic kidney disease and to promote kidney transplantation. ‘We see enormous potential in the field of early detection, especially, because it can stop the disease from advancing, or slow its progress at least’, explains Prof. Andrzej Więcek, President of the European Renal Association - European Dialysis and Transplantation Association (ERA-EDTA).

The ERA-EDTA, the European society for nephrologists, devotes itself not only to the education and training of nephrologists, but also supports
several initiatives for European interdisciplinary networking, including large research projects, fellowship exchanges, continuing medical education initiatives and workgroups. In addition, the ERA-EDTA has invested for many years in a European nephrology registry containing a host of data from many countries; however, not all European countries avail of the registry as yet (Germany, for example, does not operate such a registry). The ERA-EDTA also works towards sensitising the population and policymakers to the problem of CKD. In joint efforts with the European Kidney Health Alliance (EKHA), it approached European health policymakers with a set of Recommendations for Sustainable Kidney Care (see attachment). 'It is important that CKD is perceived more strongly as a problem for individual health and for healthcare economies, and that preventive measures are taken quickly and across the board. Because what we are now seeing in terms of CKD prevalence may only be the tip of the iceberg’, says Prof. Andrzej Więcek. ‘There is an urgent need to take action!’

About ERA-EDTA

With more than 7,000 members, the ERA-EDTA (“European Renal Association – European Dialysis and Transplant Association”) is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. The ERA-EDTA supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all activities of the ERA-EDTA the Council decided to create a Young Nephrologists’ Platform (YNP). Besides, it has established various research networks and different working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board has been established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association’s journals, NDT (Nephrology, Dialysis, Transplantation) and ckj (Clinical Kidney Journal), are currently the leading nephrology journals in Europe. The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. Finally, ERA-EDTA is member of the European Kidney Health Alliance (EKHA), a consortium of renal societies that actively interacts with the European Parliament. For more information please visit www.era-edta.org

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