



Leading European Nephrology

NEWS

European Renal Association – European Dialysis and Transplant Association

First Guideline on Management of Patients with Diabetes and Chronic Kidney Disease (CKD)

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Diabetes mellitus is becoming increasingly prevalent and is considered a rapidly growing concern for healthcare systems. According to the WHO [1] there are currently more than 60 million patients with diabetes in Europe – and patients with diabetes are particularly at risk of developing chronic kidney disease. According to the latest annual report of the ERA-EDTA registry [2], 22.1% of all new dialysis patients are classified with diabetic nephropathy. Therefore it is to be feared that the global increase of diabetes will result in a higher prevalence of chronic kidney disease, too.

Despite the strong interplay between diabetes and CKD, the management of patients with diabetes and CKD stage 3b or higher (eGFR <45 mL/min) remains problematic. Many guidance-providing documents have been produced on the management of patients with diabetes to prevent or delay the progression to CKD, mostly defined as the presence of micro and macro-albuminuria. However, none of these documents specifically deal with the management of patients with CKD stage 3b or higher (eGFR <45 mL/min).

Now, the European Renal Best Practice (ERBP) group published the “Clinical Practice Guideline on management of patients with diabetes and chronic kidney disease stage 3b or higher (eGFR <45 mL/min)” online ahead of print in *Nephrology Dialysis Transplantation* (NDT), the leading nephrology journal in Europe.

“The guideline intends to provide an evidence-based rationale and, thus, to facilitate informed decision-making on the management of adult patients with diabetes mellitus and CKD”, explains Prof. Wim Van Biesen, chair of European Renal Best Practice. “A patient with diabetes and CKD has to be treated differently than a non-CKD patient with diabetes. Two things, especially, are important here: The adaptation of medication to renal function and, second, the consideration of the much higher risk for hypoglycemia in patients without chronic kidney disease. Therefore I believe, the guideline is very relevant and will have future impact.”



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Interested to read the guideline? Just send a copy of your press card to press@era-edta.org and ask for the pdf.

[1] <http://www.euro.who.int/en/health-topics/noncommunicable-diseases/diabetes/data-and-statistics>

[2] <http://www.era-edta-reg.org/files/annualreports/pdf/AnnRep2012.pdf>

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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