Alarmingly High Incidence of Renal Replacement Therapy in Belgium, Greece and Portugal

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The latest report of the ERA-EDTA Registry [1, 2] give cause for concern: The incidence rate of renal replacement therapy (RRT) – dialysis or kidney transplantation – is much higher in Belgium (201-174 pmp), Greece (188 pmp) and Portugal (220 pmp) than in other European countries (e.g. 122 in The Netherlands).

As the registry shows, there are big differences between European countries concerning the incidence of RRT.

But why is that? “Of course, we can only speculate about the reasons, the registry collects the data, but does not gather any background information or interpretations”, explains Prof. Alberto Ortiz, ckj’s editor-in-chief and author of a recently published article [3], in which the 2012 ERA-EDTA Registry Annual Report was analysed.

Obviously, a low incidence of RRT in lower income countries may represent a lack of access to needed healthcare (e.g. Montenegro 26 pmp), but against this background it is even more astonishing that countries which are known to be economically rather weak, as Greece or Portugal, have such a high number of patients who start RRT.
There is a broad range of possible reasons:
- Citizens of high incidence countries might have access to RRT techniques that are denied to citizens in other high income countries (e.g. adjusted incidence of RRT is 100 pmp in Scotland and 77 pmp in Finland)
- The healthcare systems of the high incidence countries might fail to prevent progression of CKD.
- There might be local genetic or environmental factors that favor progression of CKD and have not been tackled by public health authorities.
- There might be perverse incentives or forces that favor CKD progression or initiation of RRT.
- It might just be a matter of reporting methods or of a different practice of initiating RRT among the different countries.

“To find out the underlying reasons for the observed inequalities is an urgent research need: only when the causes are known can corrective measures be applied”, comments Prof. Ortiz.


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NEWS

European Renal Association – European Dialysis and Transplant Association

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