

NEW GLOBAL KIDNEY HEALTH REPORT SHEDS LIGHT ON CURRENT CAPACITY AROUND THE WORLD TO DELIVER KIDNEY CARE

Bangkok, March 30, 2023, 10 a.m. ICT – Today (March 30, 2023), at the Professor Donal O’Donoghue Global Kidney Policy Forum at the World Congress of Nephrology (WCN 2023) in Bangkok, Thailand, the International Society of Nephrology (ISN) presented the highlights from its third, 2023 edition of the ISN-Global Kidney Health Atlas (ISN-GKHA). A multinational study surveying the burden of kidney disease, the 2023 ISN-GKHA shows that, from the approximately 850 million people affected by chronic kidney disease (CKD) worldwide, people of every age and race are affected, and people from disadvantaged populations are at higher risk.

The 2023 ISN-GKHA also reveals that the global burden of kidney failure remains significant due to high treatment costs and extensive impacts on the health and well-being of people living with kidney disease. Identifying gaps in key aspects of kidney care across the world, the 2023 ISN-GKHA shows that these gaps are particularly prevalent in low- and middle-income countries, although a comparison to the previous (2019) edition reveals some important positive changes in worldwide capacity to deliver kidney care, this particularly via a notable growth in dialysis facilities around the world.

New features of the 2023 ISN-GKHA include:

1. Direct involvement in the survey of people living with kidney disease: their perspectives on the barriers they face in accessing kidney care, and the impacts of kidney failure on their quality of life.
2. A record number of participating countries: 167 countries representing 97.4% of the world’s population.
3. Granular data collation on the non-dialytic management of kidney failure (Conservative Kidney Management).
4. Inclusion of information on chronic kidney disease of unknown origin (CKDu).
5. A new section assessing the workforce involved in pediatric kidney care.
6. Comparative data analysis and trends over time since the first ISN-GKHA published in 2017.
7. Scorecards on changes in capacity for kidney care across world regions and countries.

KEY RECOMMENDATIONS

Overall, the 2023 ISN-GKHA results reveal significant inequities related to essential components of high-quality kidney care. Key recommendations for closing these gaps are as follows:

- Increase health care financing for kidney disease prevention and management.
- Address workforce shortages by developing effective multidisciplinary teams, task shifting (e.g., allowing primary care practitioners to play a greater role in treatment), and harnessing the potential of telemedicine.
- Develop and implement context-specific surveillance systems based on available capacity and resources.
- Promote kidney disease prevention and treatment by implementing policies, incorporating CKD into global noncommunicable disease strategies, supporting advocacy groups, and mitigating barriers to care.
- Support the development of innovative, cost-effective dialysis delivery technologies.
- Develop appropriate legislative and policy frameworks to support kidney transplantation in all countries.
- Increase access to conservative kidney management where appropriate.

By sharing these findings and recommendations, the report aims to guide policy and advocacy efforts to promote optimal and universal kidney failure care and to provide benchmarks that will help countries track their progress over time.

- ENDS -

For media contacts:

If you are interested in organizing face-to-face meetings, please contact, David Johnson and Aminu Bello at globalatlas@theisn.org the day before the launch of the third edition of the ISN-GKHA, **Wednesday, March 29, 2023**.

Professor David Johnson, co-chair of the ISN-GKHA and professor of Medicine and Population Health at the University of Queensland, Brisbane, and Director of Queensland Renal Transplant Services, Australia. Tel.+61 7 3176 5080. Please email David.Johnson2@health.qld.gov.au to arrange an interview.

Professor Aminu Bello, co-chair of the ISN-GKHA and professor of Medicine at the Division of Nephrology and Immunology, University of Alberta, Edmonton, AB, Canada. Tel. (cell) +1 780 729 2871; (office) +1 780 492 2817. Please email aminu1@ualberta.ca to arrange an interview.

After embargo, the downloadable version of the 2023 ISN-GKHA will be available to all via this link: www.theisn.org/global-atlas.

PREVIOUS EDITIONS OF THE ISN-GKHA

The two previous editions of the ISN–Global Kidney Health Atlas (ISN–GKHA), published in 2017 and 2019, uncovered wide variations in access to treatment and characteristics of treatment delivery (e.g., quality indicators and funding mechanisms) across ISN regions and World Bank income groups. Findings also highlighted gaps in the scope of kidney-specific health information systems (i.e., registries and electronic health records) and workforce shortages that limit the delivery of optimal kidney care worldwide.

Discover the previous editions [here](#).

THE BURDEN OF CKD

CKD is an immense public health problem. Today, it is estimated that 850 million people worldwide suffer from CKD, far higher than those living with diabetes mellitus or human immunodeficiency virus (HIV). The high burden of CKD is increasing relentlessly worldwide, and the cost of providing adequate care for all people living with kidney disease is overwhelming in many countries.

Approximately 10% of the world’s population lives with CKD; however, CKD incidence and prevalence differ significantly across countries and world regions. Although people of every age and race are affected by CKD, people from disadvantaged populations may be at higher risk of the condition (and associated morbidity and mortality) due to socio-economic factors and limited access to care. Previously known as chronic renal failure, CKD is characterized by a gradual loss of kidney function. Because the kidneys play a critical role in filtering waste and excess fluid from the body, decreased kidney function can have detrimental effects on health and often. This can also lead to the development of other conditions, such as heart failure or other cardiovascular problems.

PREVENTION MEASURES AND TREATMENT

Key preventive measures have been defined and proven successful in those with early stages of CKD, to help slow disease progression and protect against cardiovascular disease:

- Reducing high blood pressure - the lower the blood pressure (within the normal range), the slower the decline in glomerular filtration rate
- Administering specific medications to reduce proteinuria and lower blood pressure – such as angiotensin-converting enzyme inhibitors or angiotensin receptor blockers.
- Reducing salt intake to lower blood pressure
- Controlling glucose, blood lipids and anemia
- Giving up smoking
- Increasing physical activity
- Controlling body weight

Notes to editors:

[The International Society of Nephrology \(ISN\)](#)

The ISN is a global professional association dedicated to advancing kidney health worldwide since 1960.

We do this for all our stakeholders by bridging the gaps of available care through advocacy and collaborations with our global partners; building capacity in healthcare professionals via granting programs, education, and research; connecting our community to develop a stronger understanding of the management of kidney disease.

Through its members and in collaboration with national and regional societies, the ISN engages 30,000 health professionals from across the globe to reduce the burden of kidney diseases and provide optimal health care for patients. Advancing kidney health worldwide. Together. <https://www.theisn.org/>