THE GLOBAL KIDNEY HEALTH ATLAS



Overview

- Aim
- Methods
- Key Results
- Implications



Aim of the Global Kidney Health Atlas

To understand, compare and monitor how different countries around the world detect, treat, monitor and advocate for people with kidney disease (AKI or CKD)

Key focus on availability, accessibility, affordability and quality of ESKD care



Global Kidney Health Atlas survey



Design and scope

Desk research (across countries and regions)

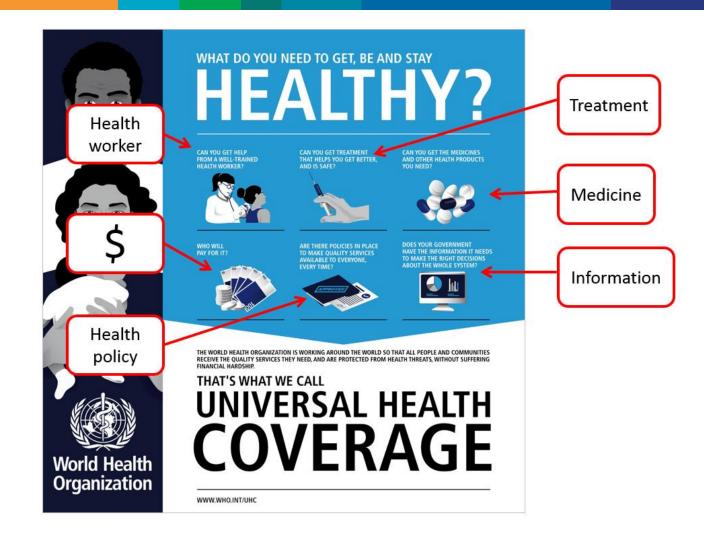
- Published and grey literature review
- Systematic review ESKD burden and outcomes
- Data extraction from major renal registries (USRDS, ERA-EDTA) and relevant national registries where available
- Scoping review of KRT cost estimates

Online questionnaire-based survey July – September 2018

- 3 languages (English, French, Spanish)
- Across 182 countries
- ≥3 stakeholders per country
 - National nephrology society leadership
 - Healthcare policymakers
 - Patients / patient advocacy groups
- Discrepancies resolved by follow-up conferences with regional and country nephrology leaders



Overall survey components



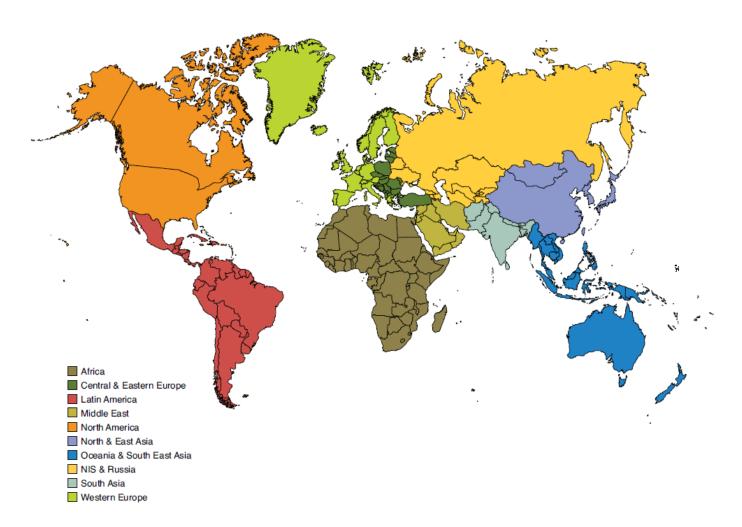
Overall GKHA response



160 countries (88%)99% world's population317 individuals (69%) response3 respondents/country (IQR 2-4)

113 countries participated in both GKHA surveys

Results presented by ISN regions

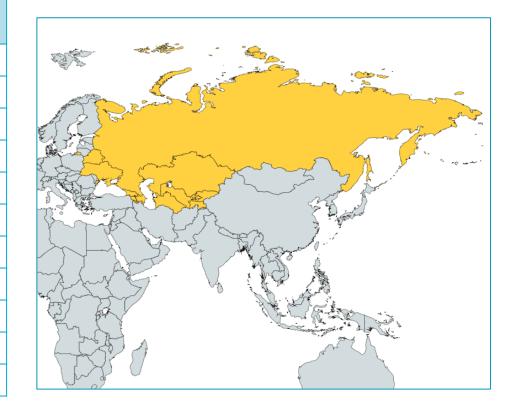


ISN Region: NIS & Russia



Demographics

Country	World bank ranking	Area (sq km)	Total population (2018)	GDP (PPP) (\$ billion)	Total health expenditures (% of GDP)
Armenia	Upper middle income	29,743	3,038,217	28.34	9.9
Azerbaijan	Upper middle income	86,600	10,046,516	172.2	6.9
Belarus	Upper middle income	207,600	9,527,543	179.4	6.3
Georgia	Upper middle income	69,700	4,926,087	39.85	7.9
Kazakhstan	Upper middle income	2,724,900	18,744,548	478.6	3.9
Kyrgyz Republic	Lower middle income	199,951	5,849,296	23.15	6.6
Russian Federation	High income	17,098,242	142,122,776	4016	5.6
Tajikistan	Low income	144,100	8,604,882	28.43	6.9
Turkmenistan	Upper middle income	783,562	81,257,239	2186	4.1
Ukraine	Lower middle income	603,550	43,952,299	369.6	6.1
Uzbekistan	Lower middle income	447,400	30,023,709	223	6.2





^{&#}x27;-': data not reported/unavailable

CKD and its risk factors burden

Country	CKD Prevalence % (95% CI)	Death attributed to CKD % (95% CI)	DALYS attributed to CKD % (95% CI)	Obesity % (95% CI)	Increased BP % (95% CI)	Smoking % (95% CI)
Armenia	14.89 (13.82 - 16.08)	1.52 (1.45 - 1.59)	1.29 (1.2 - 1.38)	20.9 (16.3 - 25.7)	25.5 (18.7 - 32.8)	21.9 (19.9 - 23.9)
Azerbaijan	11.26 (10.37 - 12.14)	1.55 (1.33 - 1.68)	1.32 (1.19 - 1.45)	19.9 (15.3 - 24.9)	24.5 (18.1 - 32.0)	22.0 (19.7 - 24.2)
Belarus	17.13 (15.82 - 18.65)	0.4 (0.38 - 0.42)	0.48 (0.44 - 0.53)	26.6 (21.2 - 32.4)	27.1 (20.3 - 34.2)	27.6 (25.2 - 30.0)
Georgia	12.55 (11.65 - 13.56)	1.55 (1.46 - 1.64)	1.49 (1.4 - 1.59)	23.3 (18.4 - 28.5)	26.3 (20.0 - 33.5)	21.3 (19.1 - 23.5)
Kazakhstan	10.42 (9.65 - 11.24)	1.1 (1.05 - 1.16)	0.98 (0.91 - 1.04)	21.3 (17.1 - 25.7)	27.1 (20.1 - 34.6)	21.0 (19.1 - 22.8)
Kyrgyz Republic	7.91 (7.33 - 8.55)	1.33 (1.25 - 1.41)	1.24 (1.14 - 1.34)	15.4 (11.5 - 19.9)	26.7 (20.3 - 33.6)	17.4 (15.5 - 19.5)
Russian Federation	19.23 (17.82 - 20.89)	0.62 (0.61 - 0.63)	0.67 (0.63 - 0.71)	25.7 (21.7 - 30.1)	27.2 (21.2 - 33.6)	25.3 (23.3 - 27.2)
Tajikistan	7.4 (6.86 - 8.0)	1.34 (1.21 - 1.44)	1.04 (0.94 - 1.14)	12.6 (9.2 - 16.6)	26.1 (18.9 - 34.2)	9.9 (8.2 - 11.6)
Turkmenistan	10.04 (9.29 - 10.84)	1.92 (1.82 - 2.02)	1.62 (1.5 - 1.75)	17.5 (13.3 - 22.3)	25.4 (19.3 - 32.4)	7.2 (6.0 - 8.6)
Ukraine	18.18 (16.81 - 19.64)	0.42 (0.41 - 0.44)	0.49 (0.46 - 0.53)	26.1 (20.2 - 32.3)	27.1 (20.7 - 34.2)	25.4 (22.9 - 27.7)
Uzbekistan	9.37 (8.68 - 10.12)	1.75 (1.65 - 1.84)	1.61 (1.48 - 1.74)	15.3 (11.5 - 19.8)	25.6 (19.3 - 32.4)	8.8 (7.4 - 10.3)

Abbreviations:

CKD (Chronic Kidney Disease), DALYS (disability-adjusted life years), BP (blood pressure), CI (confidence interval)

Data sources:

GBD study database

(http://www.healthdata.org/gbd),

WHO data observatory

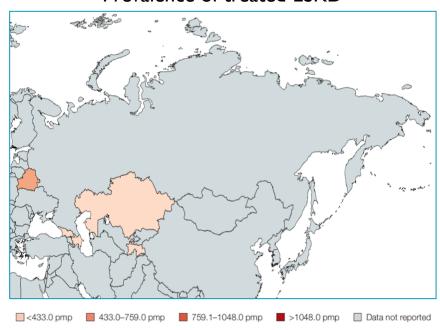
(https://www.who.int/gho/en/)

'-': data not reported/unavailable



Burden of ESKD

Prevalence of treated ESKD



Treated ESKD: all dialysis + transplant

Data source: ERA-EDTA Registry Annual Report 2016/2017, Jain et al. (JASN) 2012, 2017/2018 USRDS Annual Data Report

Country	Treated ESKD		Chronic dialysis (HD+PD)		Chro	nic HD	Chronic PD	
Country	Incidence	Prevalence	Incidence	Prevalence	Incidence	Prevalence	Incidence	Prevalence
Armenia	-	-	-	-	-	-	-	0
Azerbaijan	-	-	-	-	-	-	-	0
Belarus	62	289	-	221.3	-	194.4	-	26.9
Georgia	203	713	-	179.3	-	162	-	17.3
Kazakhstan	-	211	-	186	-	-	-	-
Kyrgyz Republic	-	-	-	-	-	-	-	-
Russian Federation	67	333	-	245	-	113.2	-	11.7
Tajikistan	-	-	-	-	-	-	-	-
Turkmenistan	-	-	-	-	-	-	-	-
Ukraine	37	210	-	161	-	66.4	-	10.8
Uzbekistan	-		-	-	-	-	-	0



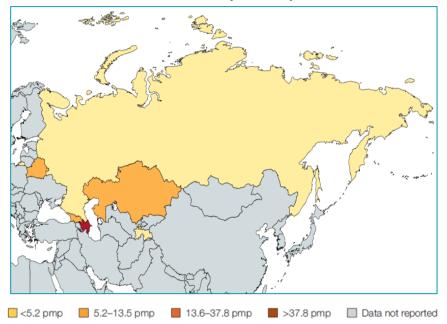
^{*} pmp (per million population)

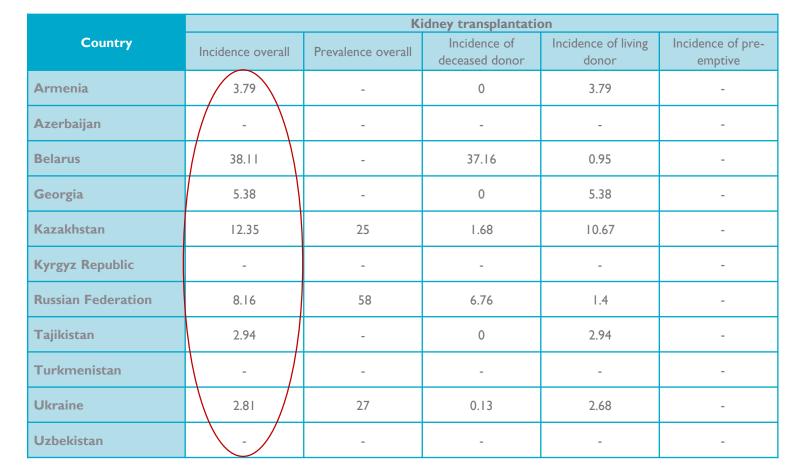
Data source: ERA-EDTA Registry Annual Report 2016

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Burden of ESKD (cont'd)

Incidence of kidney transplantation





Data sources: GODT database

(http://www.transplant-observatory.org/data-charts-and-tables/)



^{*} pmp (per million population)

^{&#}x27;-': data not reported/unavailable

Annual cost of kidney replacement therapy components

Country	Hemodialysis	Peritoneal dialysis	Kidney Transplant (First year)	Kidney Transplant (later years)	HD/PD cost ratio
Armenia	-	-	-	-	-
Azerbaijan	-	-	-	-	-
Belarus	5,070	6,789	-	-	0.75
Georgia	5,876	10,064	-	-	0.58
Kazakhstan	-	-	-	-	-
Kyrgyz Republic	-	-	-	-	-
Russian Federation	14,882	23,640	-	-	0.63
Tajikistan	-	-	-	-	-
Turkmenistan	-	-	-	-	-
Ukraine	-	-	-	-	-
Uzbekistan	-	-	-	-	-

*Cost is in \$US 2016

Abbreviations:

HD (hemodialysis), PD (peritoneal dialysis)

Data source: van der Tol et al. (2019)

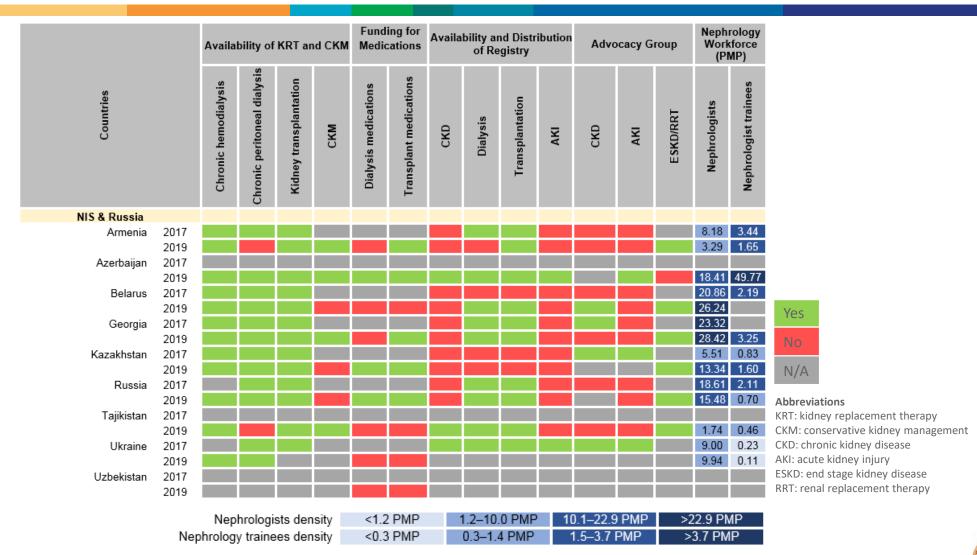
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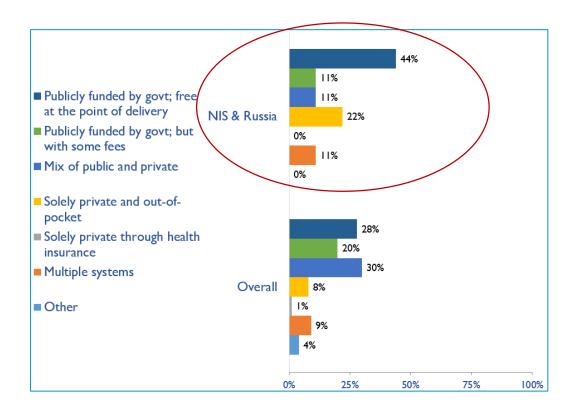
Survey response

- 9 of 11 countries (82%) in NIS & Russia responded to the 2018 survey
- This represents 96% of the region's population

Country level scorecard



Funding for non-dialysis CKD

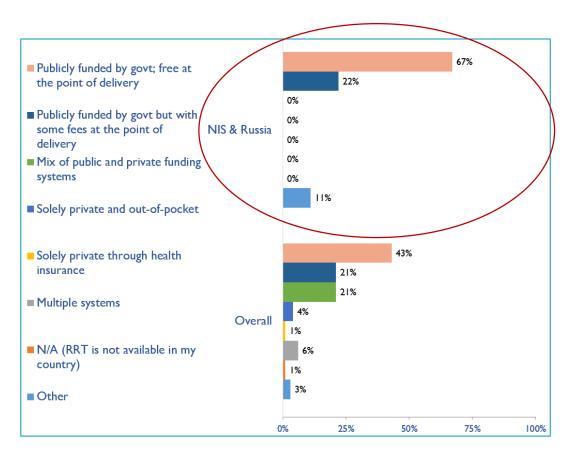


Country	Publicly funded by govt; free at the point of delivery	Publicly funded by govt but with some fees at the point of delivery	Mix of public and private funding systems	Solely private and out-of- pocket	Solely private through health insurance	Multiple systems	Other
Armenia				X			
Azerbaijan	X						
Belarus	X						
Georgia				X			
Kazakhstan	X						
Russian Federation			Χ				
Tajikistan						X	
Ukraine		X					
Uzbekistan	Χ						

X:Yes



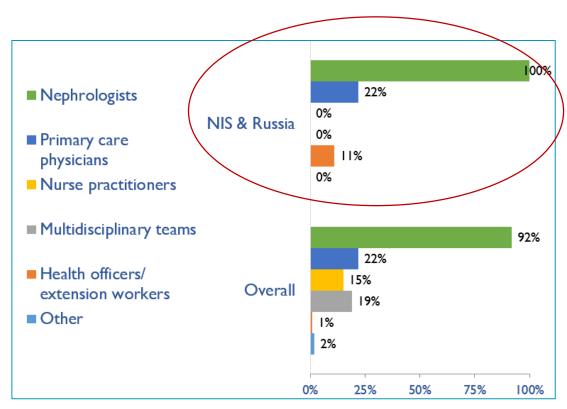
Funding for kidney replacement therapy (KRT)



Country	Publicly funded by govt; free at the point of delivery	Publicly funded by govt but with some fees at the point of delivery	Mix of public and private funding systems	Solely private and out-of-pocket	Solely private through health insurance	Multiple systems	N/A (RRT is not available in my country)	Other
Armenia		X						
Azerbaijan	X							
Belarus	X							
Georgia	X							
Kazakhstan	X							
Russian Federation	×							
Tajikistan								Х
Ukraine		X						
Uzbekistan	X							

X : Yes

Providers primarily responsible for ESKD care



Country	Nephrologists	Primary care physicians	Nurse practitioners or specialized nurses	Multidisciplinary teams	Health officers/ extension workers	Other
Armenia	X					
Azerbaijan	X					
Belarus	X					
Georgia	X	X				
Kazakhstan	X					
Russian Federation	Х					
Tajikistan	X	X			X	
Ukraine	X					
Uzbekistan	Χ					

X:Yes



Shortage of ESKD care providers

Country	Nephrologists	Transplant surgeons	Surgeons (HD access)	Surgeons (PD access)	Interventional radiologists (HD access)	Interventional radiologists (PD access)	Laboratory technicians	Dietitians	Radiologists (ultrasound)	Vascular access coordinators	Counsellors/ psychologists	Transplant coordinators	Dialysis nurses	Dialysis technicians
Armenia														
Azerbaijan														
Belarus														
Georgia														
Kazakhstan														
Russian Federation														
Tajikistan														
Ukraine														
Uzbekistan														

No shortage

Shortage

No

response

Prevalence of nephrologists and trainees





Nephrology trainees



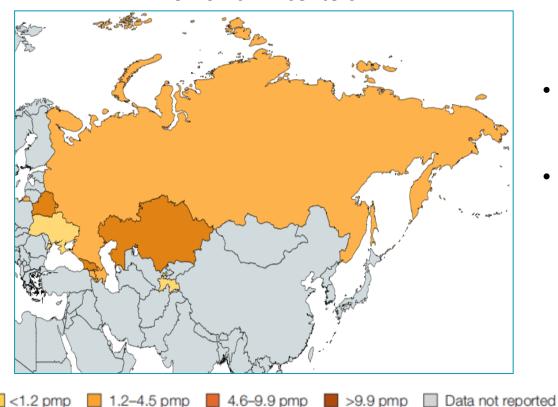
Country	Nephrologists PMP	Nephrology trainees PMP
Armenia	3.29	1.65
Azerbaijan	18.41	49.77
Belarus	26.24	-
Georgia	28.42	3.25
Kazakhstan	13.34	1.60
Russian Federation	15.48	0.70
Tajikistan	1.74	0.46
Ukraine	9.94	0.11
Uzbekistan	-	-

^{&#}x27;-': data not reported/unavailable



Capacity for chronic dialysis (HD)

Chronic HD centers



- Chronic HD services are available in all countries of the region
- The NIS & Russia average of HD treatment centers is 3.72 pmp

Country	Chronic HD Centres PMP
Armenia	3.95
Azerbaijan	3.48
Belarus	5.56
Georgia	5.68
Kazakhstan	5.33
Russian Federation	3.28
Tajikistan	0.23
Ukraine	1.05
Uzbekistan	-

'-': data not reported/unavailable

Capacity for chronic dialysis (PD)

Chronic PD centers



- Chronic PD services are available in 6 (75%) countries of the region
- The NIS & Russia average of PD treatment centers is 0.41 pmp

Country	Chronic PD Centres PMP
Armenia	-
Azerbaijan	0.10
Belarus	1.89
Georgia	0.41
Kazakhstan	0.21
Russian Federation	0.78
Tajikistan	-
Ukraine	-
Uzbekistan	-
'-': data not	

reported/unavailable

☐ Chronic PD not provided ☐ <0.4 pmp ☐ 0.4–1.3 pmp ☐ 1.4–2.5 pmp ☐ >2.5 pmp ☐ Data not reported



Capacity for kidney transplantation

Kidney transplantation centers



Data not reported

- Kidney transplantation services are available in all countries of the region
- The NIS & Russia average of Kidney transplantation centers is 0.33 pmp

Country	Kidney Transplantation availability	Transplant centers PMP
Armenia	Χ	0.33
Azerbaijan	Χ	0.30
Belarus	Χ	0.73
Georgia	Χ	0.51
Kazakhstan	Χ	0.43
Russian Federation	×	0.26
Tajikistan	Χ	0.23
Ukraine		-
Uzbekistan	t reported/upaya	-

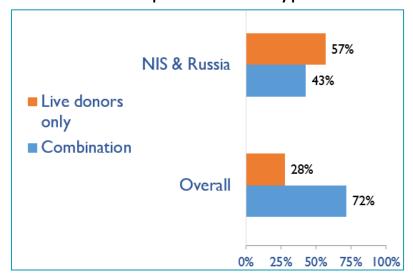
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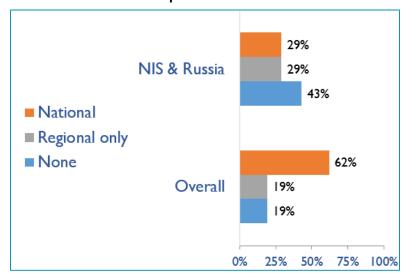


Capacity for kidney transplantation (cont'd)

Transplant donor type

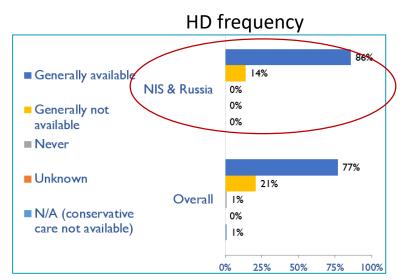


Transplant waitlist

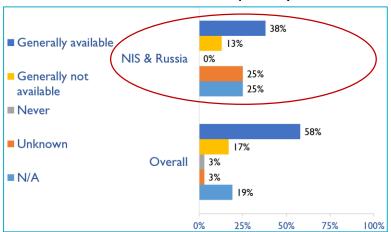


	Donor	type	Transplant waitlist			
Country	Live donors only	Combinati on	National	Regional only	None	
Armenia	X				Х	
Azerbaijan	X		X			
Belarus		X	X			
Georgia	X				Х	
Kazakhstan		X		X		
Russian Federation		X		X		
Tajikistan	X				X	
Ukraine						
Uzbekistan X: Yes						

Availability of services within dialysis care



PD frequency

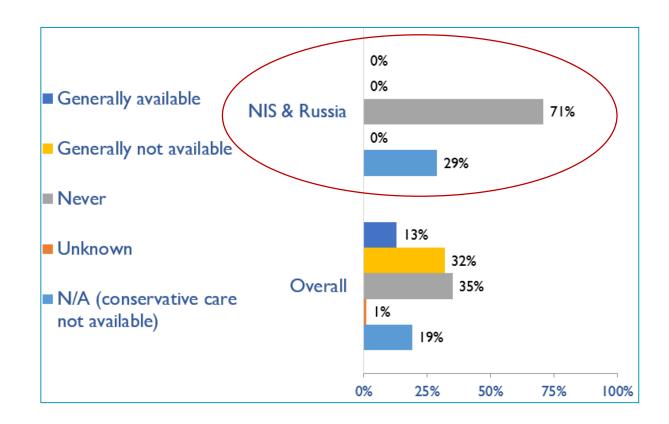


	HD frequency a center-based service that involves treatment 3x week/3-4x hours					PD frequency ability to do adequate exchanges 3-4x day (or equivalent cycles on automated PD)				
Country	Generally available	Generally not available	Never	Unknown	N/A (dialysis not provided)	Generally available	Generally not available	Never	Unknown	N/A (dialysis not provided)
Armenia	Χ									Χ
Azerbaijan	Χ								Х	
Belarus	Χ					Χ				
Georgia	Х					X				
Kazakhstan	Х						Х			
Russian Federation	X					X				
Tajikistan		Χ								X
Ukraine										
Uzbekistan										

X :



Availability of home hemodialysis



	Availability of Home hemodialysis								
Country	Generally available	Generally not available	Never	Unknown	N/A (dialysis not provided)				
Armenia				Х					
Azerbaijan			X						
Belarus			X						
Georgia			X						
Kazakhstan			X						
Russian Federation			X						
Tajikistan				X					
Ukraine									
Uzbekistan									

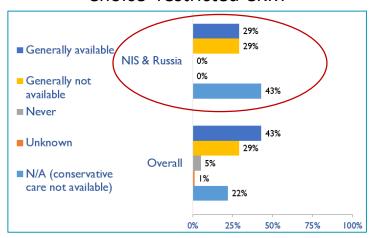
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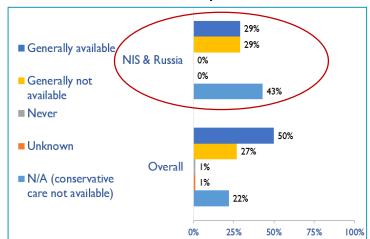


Capacity for conservative kidney management (CKM)

Choice-restricted CKM



Chosen or medically advised CKM

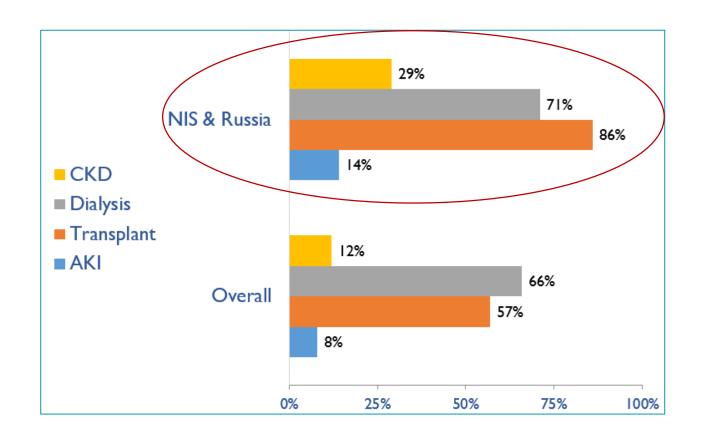


	Established choice-restricted conservative care					Established conservative care that is chosen or medically advised				
Country	Generally available	Generally not available	Never	Unknown	N/A (conservative care not available)	Generally available	Generally not available	Never	Unknown	N/A (conservative care not available)
Armenia		X					X			
Azerbaijan	X					Х				
Belarus					Х					Х
Georgia	X					Х				
Kazakhstan					Х					Х
Russian Federation					×					×
Tajikistan		X					X			
Ukraine										
Uzbekistan										

X : Yes



Availability of official registry



Country	CKD	Dialysis	Transplant	AKI
Armenia			X	
Azerbaijan	X	X	X	X
Belarus		X	X	
Georgia		X	X	
Kazakhstan				
Russian Federation		X	X	
Tajikistan	X	X	X	
Ukraine				
Uzbekistan				

X :

Yes

Summary of 2019 GKHA findings

- KRT availability, access, and quality is high
- Conservative kidney management is limited
- Government funding for kidney care is low
- Few registries for non-dialysis CKD and AKI, overall higher than global average
- Moderate workforce limitations, high densities of nephrologists and trainees
- Little advocacy for kidney disease in NIS & Russia, particularly for CKD and AKI



Implications

- Increase health care financing for ESKD prevention and management
- Address workforce shortages through multidisciplinary teams and telemedicine
- Incorporate the collection and reporting of quality indicators in ESKD care
- Expand health information systems to prevent and manage ESKD
- Promote ESKD prevention and treatment by implementing policies, strategies, and advocacy, and mitigating barriers



To access the Atlas report:

www.theisn.org/global-atlas

