

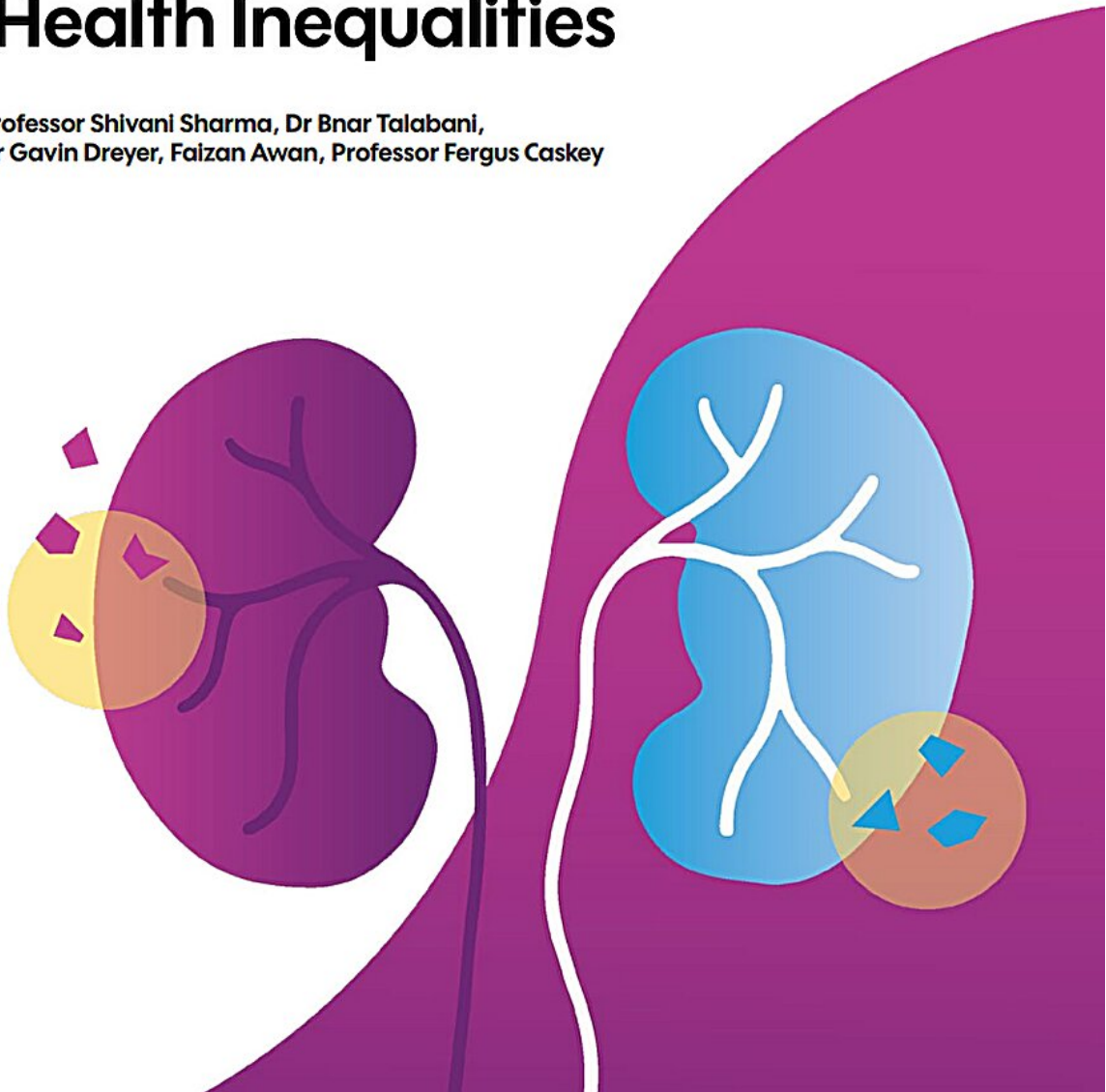
It's time to act on kidney health inequalities, report urges

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Time To Act:

A New Review of Kidney Health Inequalities

Professor Shivani Sharma, Dr Bnar Talabani,
Dr Gavin Dreyer, Faizan Awan, Professor Fergus Caskey



Credit: Kidney Research UK

Kidney health inequalities due to age, sex, education, location or lack of wealth persist, despite widespread awareness of the barriers some people face, a new report by Kidney Research UK has revealed.

The U.K.'s leading kidney research charity is calling on the research community to take [urgent action](#) to address the social and [economic inequalities](#) that put some people at greater risk of [kidney disease](#), and can prevent patients from accessing appropriate care and treatment.

The new [report](#), "Time to act: a new review of kidney health inequalities," is authored by an academic, clinical and patient team, including Professor Fergus Caskey and Dr. Mohammed Al-Talib from the University of Bristol.

It comes five years after the charity's previous report of kidney health inequalities outlined 27 recommendations for change in clinical and research practice. The new review exposes the limited progress since 2018, impacting people's health and risk of disease.

The updated evidence confirms some communities are still impacted more by kidney disease than others, and disease progresses faster in some people. The report concludes that quality of care can vary and that a lack of focus on some groups of people in research studies means that their needs and experiences are overlooked.

Often, inequalities overlap, and many people experience inequalities in multiple ways, which increases their risk of poor kidney health. The report shows how easy it is for this to happen, for example, people of

Black, Asian or mixed heritage are more likely to experience kidney failure and need dialysis or a transplant to stay alive, than white people.

Black people are more likely to live in deprived areas and kidney failure is twice as likely in under 70s living in deprived areas. In addition, many people struggle with their [mental health](#) as a result of their kidney disease and it can have a cyclical effect, people with mental health conditions being at greater risk of kidney disease progression and worse outcomes.

The charity has identified vital gaps in research including opportunities to use knowledge of genetic and societal risk factors to design interventions to improve kidney health, provide more evidence about how differentiated public health communication can help patients understand their diagnosis and care and to show how optimizing digital health innovations can reduce kidney health inequalities.

Meaningful engagement from patients with diverse personal demographics and life experiences must underpin all research, the charity says.

Liz Lightstone, Professor of Renal Medicine at Imperial College London, and trustee at Kidney Research UK, said, "Kidney Research UK will continue to work tirelessly for patients by providing focused research investment. Wherever possible we will seek to fund research that tackles these issues, starting with the grants round we have opening at the end of this month.

"Eradicating unjust kidney health inequalities is an urgent priority and must become everyone's responsibility, so that we can increase engagement and trust and deliver true change. We look forward to working with other funders, organizations, health decision makers and the new government so that together, we can ensure everyone has their

fair chance at good kidney health."

Fergus Caskey, Professor of Renal Medicine at the University of Bristol, and one of the lead authors of the report, added, "'More than 10% of the U.K. population has chronic kidney disease. That's 7.25 million people. And we are not all affected equally.

"Five years ago, Dr. Gavin Dreyer at Barts Health NHS Trust and I led a review of unequal kidney health in the U.K., highlighting higher risk of kidney disease developing and progressing in some groups of people. Most notably, people from South Asian and Black backgrounds are three to five times more likely to develop [kidney failure](#) and start dialysis than people from white backgrounds.

"The review, commissioned by Kidney Research UK, set out 27 recommendations that we hoped would lead to more equitable kidney health and outcomes. Now, five years on, with two new co-leads—Shivani Sharma and Bnar Talabani—we review the progress made.

"The COVID-19 pandemic created new inequalities and highlighted existing ones, but it also changed the way the health and care sector worked in ways that could not have been imagined five years ago.

"This review takes stock of these lessons and changes and updates recommendations for everyone in the community to work towards as part of their day job. By raising awareness of these inequalities and making small changes to the way we work, we all could have an equal chance of kidney health."

The report was compiled by experts in kidney health from across the U.K. and across the kidney community, including kidney patients and primary and secondary care professionals.

More information: Time To Act: A New Review of Kidney Health Inequalities: [www.kidneyresearchuk.org/wp-co ...
_Report_V7-23R02.pdf](http://www.kidneyresearchuk.org/wp-content/uploads/2024/07/Report_V7-23R02.pdf)

Lay report: [www.kidneyresearchuk.org/wp-co ... y-
Summary_V11-07.pdf](http://www.kidneyresearchuk.org/wp-content/uploads/2024/07/Summary_V11-07.pdf)

Provided by University of Bristol

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