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CHRONIC KIDNEY DISEASE AND CARDIOVASCULAR RISK
Policy options for tackling Europe's major health burdens

Strasbourg, 8th March 2011 --- The European Kidney Health Alliance (EKHA) and World Kidney Day (WKD) organisations today call for urgent European Union (EU) action to curb the increasing burden of chronic kidney disease (CKD) and associated diseases.

The Members of European Parliament (MEP) Group for Kidney Health met with some of Europe's top kidney experts at a lunch seminar in the European Parliament in Strasbourg held in honour of World Kidney Day, an annual global awareness raising campaign which this year falls on 10th March 2011.

Mrs Frieda Brepoels, MEP, stated "Unfortunately, the fact that we are still confronted with so many people on dialysis, or on the waiting list for a donor organ, proves to a certain extent the inherent failure of our public health system. Transplantation is the last resort for people with chronic kidney disease. The Parliament's recent work on quality and safety of transplantation and on the availability of donor organs has been important, but it is not enough. We should also focus on how we can prevent European citizens from needing transplantation in the first place."

Speaking at the seminar, Professor Andrew Rees, Chairman of the European Kidney Health Alliance, commented "We want to make policymakers aware of the importance of chronic kidney disease (CKD) to the health of Europe's citizens. It is common - affecting one in 10 of the population - and not only predisposes to kidney failure but greatly increases the risk of cardiovascular disease including heart attacks and strokes."

Premature cardiovascular disease is the biggest cause of morbidity and mortality worldwide, and the important role of the kidneys in cardiovascular disease was explained by Prof. Colin Baigent, Professor of Epidemiology and Honorary Consultant in Public Health at the University of Oxford.

"Some of the major causes of heart disease, particularly diabetes and high blood pressure, are also potent causes of kidney disease, so heart and kidney disease frequently occur together. As European populations get older, this deadly combination of diseases will become very common, so research into their prevention should be a public health priority".

In patients with CKD, cardiovascular disease may also be caused by a severe disorder of mineral and bone metabolism, which causes calcium release from bone and deposition in the blood vessels. This in turn may lead to an increased risk of heart attack and stroke. The majority of an estimated 324,000 CKD patients on dialysis in Europe suffer from some degree of disordered mineral and bone metabolism.

www.ekha.eu

www.worldkidneyday.org

As well as the ageing population, recent trends in European lifestyles greatly increase the risk of developing chronic diseases, including CKD, and action to reverse them needs to be taken now if the targets set out in the Europe 2020 strategy are to be met, including the goal of having 75% of the working age population employed and productive. Tobacco use, high alcohol consumption, poor nutrition, obesity and lack of physical activity all contribute to the rising prevalence of CKD and related diseases.

Professor Rees gave the example of a common healthy choice that everyone can make – drinking water instead of sugary carbonated drinks: “Many people don’t realise how many calories can be found in carbonated drinks which are typically sweetened with large amounts of fructose containing sugars that may contribute to CKD. People need to be aware that water rather than fizzy drinks is the healthy choice”

CKD patient Paul Jongen gave the audience an account of his experience with kidney disease and the effects it has had on his personal, professional and social life. Mr Jongen emphasized the key role of self-management in his dialysis treatment, explaining how Home Hemodialysis, especially at night, resulted in a better outcome for him.

Also illustrating the importance of self-management, and introducing e-health as a strand of technology which may aid self-management in CKD, Neil Turner, Professor of Nephrology at the Royal Infirmary, Edinburgh, presented Renal PatientView, a website designed to allow patients access to their diagnosis, test results and other information about kidney disease, from anywhere in the world.

"We introduced Renal PatientView cautiously, but the system has been enthusiastically received by not only patients, but also healthcare staff, and it is now available in the great majority of UK renal units, and has over 11,000 active users. It is inexpensive, and we have found that it has generated a group of patients who are much better educated about their condition."

EKHA called for increased recognition of CKD and related diseases in European policymaking, and for concrete action to tackle lifestyle factors that may increase the risk of developing chronic diseases. EKHA welcomes the recent Council conclusions on innovative approaches for chronic diseases in public health and healthcare systems and looks forward to the initiation of a reflection progress by the European Commission to identify options to optimize the response to the challenges of chronic diseases.

The event in the European Parliament was supported by Amgen, Danone Research and Roche.



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Notes to editors:

About The European Kidney Health Alliance

The European Kidney Health Alliance (EKHA) is an Alliance of not-for-profit organisations who represent the key stakeholders in kidney health issues in Europe.

EKHA takes a multidisciplinary approach involving patients and their families, doctors and nurses, researchers and other healthcare professionals who work cooperatively for a European health environment in which there is a sustained decrease in kidney disease and its consequences.

About World Kidney Day

World Kidney Day (WKD) is a global health awareness campaign focusing on the importance of our kidneys and reducing the frequency and impact of kidney disease and its associated health problems worldwide. The campaign is celebrated every year on the second Thursday of March in more than 100 countries on 6 continents.

About Amgen

Amgen discovers, develops, manufactures, and delivers innovative human therapeutics. A biotechnology pioneer since 1980, Amgen was one of the first companies to realize the new science's promise by bringing safe, effective medicines from lab to manufacturing plant to patient. Amgen therapeutics have changed the practice of medicine, helping millions of people around the world in the fight against cancer, kidney disease, rheumatoid arthritis, bone disease, and other serious illnesses. With a deep and broad pipeline of potential new medicines, Amgen remains committed to advancing science to dramatically improve people's lives. To learn more about our pioneering science and vital medicines, visit www.amgen.com.

About Danone Research

Danone Research, a subsidiary of Danone group is at the core of the group's mission : bringing health through food to as many people as possible. The Hydration and Health department aims at demonstrating the benefits of healthy hydration choices. Among others, hydration has a strong relationship with kidneys' physiology and we believe that drinking enough water is a simple healthy habit everyone can take to sustain kidney health. www.danone.com

About Roche

Roche plays a pioneering role in healthcare. As an innovator of products and services for the early detection, prevention, diagnosis and treatment of diseases, Roche contributes on a broad range of fronts to improving people's health and quality of life. Roche is providing the first products that are tailored to the needs of specific patient groups. Roche's mission today and tomorrow is to create added value in healthcare by focusing on our expertise in diagnostics and pharmaceuticals. Roche is the world leader in *in-vitro* diagnostics and drugs for cancer, transplantation, and active in other major therapeutic areas with a high medical need such as autoimmune diseases, inflammatory diseases, virology, metabolic disorders and diseases of the central nervous system.

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About CKD and its Symptoms

Chronic Kidney Disease is the general name for persistent irreversible damage to the kidney. In its earliest stages, the kidneys may only have minor structural damage. Often such damage tends to progress if undetected and untreated. One of the signs of early CKD is the presence of small amounts of protein in the urine.¹ More advanced CKD is characterised by progressively greater abnormalities in the chemical composition of the blood, anaemia - a cause of tiredness and shortness of breath, and bone abnormalities. The most advanced form of CKD occurs when the kidney has been nearly completely destroyed and treatment with dialysis or kidney transplantation is required for survival. Many individuals with CKD do not progress to kidney failure and treatment has the twin objectives of correcting the abnormalities resulting from the kidney damage and of preventing progression to more advanced stages.

The most common causes of CKD are diabetes, hypertension, and glomerulonephritis² and many factors contribute to its progression. Loss of albumin into the urine is one of these key factors and when this occurs, renal disease usually progresses to the end stage unless reversed by treatment. The growing prevalence of obesity-related type 2 diabetes coupled with the ageing population has increased the number of people with CKD or at risk of it.³

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References

¹ de Jong PE, van der Velde M, Gansevoort, RT, Zoccali, Z. Screening for Chronic Kidney Disease: Where Does Europe Go? *Clin J Am Soc Nephrol* 2008 3:616-623

² National Kidney Foundation, 2009, How Your Kidneys Work, <http://www.kidney.org/kidneyDisease/howkidneyswrk.cfm#what>

³ King H, Aubert RE, Herman WH. Global burden of diabetes, 1995-2025: prevalence, numerical estimates, and projections. *Diabetes Care* 1998; 21: 1414-1431.