

European Kidney Health Alliance

# Kidney Manifesto

– An EU strategy to improve  
kidney care during the 2024-2029 mandate

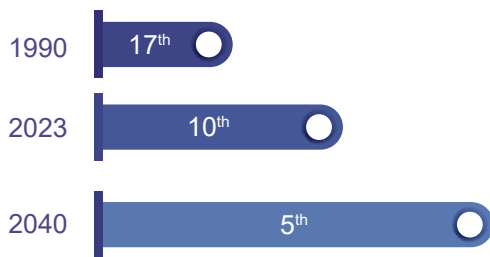
# Kidney Manifesto

– An EU strategy to improve kidney care during the 2024-2029 mandate

The 2024 European elections will set the new EU legislature and its priorities for 2024-2029, raising a unique opportunity to give kidney health the attention it requires.

## Chronic kidney disease (CKD) is one of the highest-burden non-communicable diseases (NCDs).

CKD is currently the 10th leading cause of death globally, up from 17th in 1990<sup>1,2</sup>.

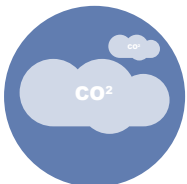


**IF WE DON'T ACT NOW CHRONIC KIDNEY DISEASE WILL BECOME THE 5<sup>TH</sup> LEADING CAUSE OF DEATH BY 2040<sup>4</sup>.**

**CKD is expensive to treat.**

Annual healthcare costs reach

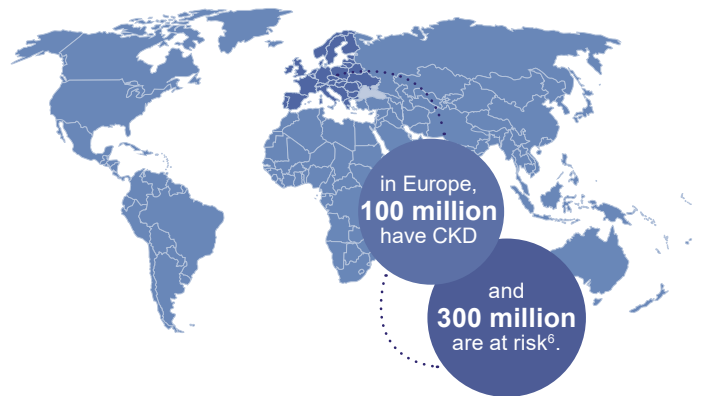
**140 billion€**  
in Europe<sup>9</sup>.



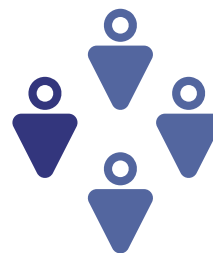
**CKD is associated with a substantial environmental burden.**

Dialysis consumes enormous amounts of water<sup>10</sup>, generates lots of plastic waste<sup>11,12</sup>, and is responsible for up to half of healthcare greenhouse gases emissions<sup>13</sup>.

Worldwide more than **850 million** individuals have kidney diseases<sup>5</sup>.



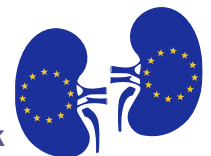
**Patients suffer from poor quality of life due to the many side-effects of treatments.**



This results in significant productivity losses, with unemployment rates in patients with CKD reaching up to

**75%**<sup>7,8</sup>.

**CKD suffers from a blatant lack of recognition in European health policies and initiatives.**



This results in a lack of awareness and absent prevention measures, late diagnosis, gaps in funding for research and innovation and poor patient outcomes.

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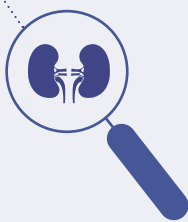
Ahead of the 2024 European elections, the European Kidney Health Alliance identified 3 key priorities to improve kidney health and tackle the longstanding challenges of CKD patients everywhere in Europe.

## 01 Improve the primary and secondary prevention of kidney disease

CKD's main risk factors are hypertension, cardiovascular diseases (CVDs), diabetes, obesity, environmental pollution, dehydration, cancer therapies, infections (e.g., covid-19) and acute kidney injury. Many of these risk factors are gaining in importance in our societies, leading to a continuous increase in CKD prevalence and burden across EU Member States<sup>14</sup>. Now already, the share of global healthcare expenditure of kidney daily care is proportionally 10–20 times higher than the proportion of patients treated<sup>15</sup>, and this figure will only worsen if the current model is maintained. The EU should play a key role in improving and harmonizing CKD prevention measures across Member States to reverse this worrying trend. If CKD is diagnosed and treated early, kidney failure, cardiovascular complications and death can be postponed by 15-25 years<sup>16,17</sup>. In addition, CKD early detection and treatment align with that of hypertension, diabetes and CVDs, and integrating CKD into these disease programmes is a low hanging fruit for improving NCD prevention. Considering the significant environmental impact of dialysis, reducing CKD prevalence will also help improve the sustainability of healthcare systems.

Accurate screening followed by protective measures administered at an early stage can reduce CKD prevalence by

**28%**<sup>18</sup>



### ► Facilitate the implementation of an EU code for CKD prevention

An EU code for CKD prevention, focusing on both modifiable risk factors and early detection, could tremendously help avoid or slow down the onset of disease and delay the need for kidney replacement therapy (KRT). The EU CKD code must contain measures to improve general population's awareness, access and participation in screening programmes as well as joint health checks for co-occurring diseases such as CVDs and diabetes. The EU4Health project 'PreventCKD', which aims to define the best preventive interventions to tackle CKD, could serve as a basis for this code.



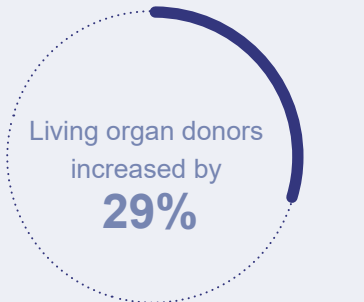
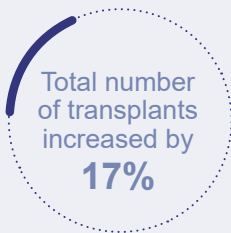
### Recommended targets

- Decrease CKD incidence by 10% by 2029.
- Systematically include CKD into EU NCD prevention programmes 2024-2029.
- Develop and implement an EU code for CKD prevention by 2029.

## 02 Improve organ donation and transplantation in the EU

A substantial number of NCD patients evolve to organ failure, for which transplantation is often the only life-saving option<sup>19</sup>. Even for CKD patients, where dialysis exists as an alternative, kidney transplantation is considered as the best and most cost-effective therapy<sup>20</sup>. Between 2009 and 2015, the EU action plan on organ donation and transplantation achieved considerable success by augmenting organ availability, enhancing efficiency and accessibility of transplant systems and improving quality and safety across Europe<sup>21</sup>. However, improvements have stalled since then, while the need of transplanted organs has continued to rise<sup>22</sup>.

Over the period of the EU action plan on organ donation and transplantation:



### ► Implement a second EU Action Plan on Organ Donation and Transplantation

A new EU action plan on organ donation and transplantation would help harmonise different approaches among countries, facilitate coordination and monitor progress<sup>23</sup>. The action plan would also be a good lever to stimulate research and innovation to increase the effectiveness of transplantation, thereby improving long-term transplant survival, and reducing waiting times in the EU<sup>24</sup>. The call for a second EU action plan benefits from a large support and has a strong scientific basis:

- A European Commission’s impact study assessed the success of the first EU action plan and reaffirmed the need and added value of a new, adapted plan<sup>25</sup>.
- Member States noted that the first action plan helped them improve national approaches and set a shared agenda<sup>26</sup>.
- More than 91 stakeholders, including civil society, national competent authorities and MEPs called on the EU institutions at several instances to realise a second EU action plan<sup>27,28</sup>.



### Recommended targets

- Develop and implement a second EU Action Plan on Organ Donation and Transplantation by 2026.
- Increase the total number of kidney transplants by 15% by 2029.
- Increase the total number of organ donors by 20% by 2029.

## 03

### Foster innovation in kidney therapies

In 2023, a European Commission study defined kidney disease as a “high-burden under-researched medical condition”, meaning that it receives insufficient research funding relative to its burden<sup>29</sup>. Indeed, the basic concept of dialysis has barely changed since the 1940s, and all other KRTs and pharmacological approaches to delay progression of kidney failure have progressed at an incredibly slow pace<sup>30</sup>. This inertia does not only affect patients, who suffer from poor quality of life, but also healthcare systems, which must bear the elevated costs of current KRTs. The substantial carbon footprint of dialysis is just another reason why new treatments are urgently needed. Despite this blatant gap, kidney diseases are missing from the key research areas list of the European Commission<sup>31</sup>.

#### ► *Stimulate public-private partnerships for innovative kidney therapies*

The cost and burden of CKD should be equally matched with research and innovation investments. The EU should facilitate public-private partnerships to stimulate the development of innovative drugs and devices development for kidney care. This would also restore EU’s position as a global leader in medical innovation and avoid dependency on other countries when it comes to new therapies<sup>32</sup>. The Innovative Health Initiative (IHI) could play an essential role by including innovation in kidney therapies among IHI call topics. Similarly, Horizon Europe ‘Health’ cluster should include calls for proposals aimed at new, innovative kidney therapies, considering the great promises held by xenotransplantation<sup>33</sup> and new wearable and implantable artificial kidney systems<sup>34</sup>.



#### Recommended targets

- Dedicate at least two calls for proposals to innovative kidney therapies, including one on organ donation and transplantation research, in the Horizon Europe annual work programmes 2024-2029.
- Dedicate two IHI calls for proposals to innovative kidney therapies in 2024-2029.

## Endnotes

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## About EKHA

EKHA is a non-profit association created in 2007 to propose solutions for the challenges of chronic kidney disease in Europe. It advocates for effective prevention and a more efficient care pathway intended to facilitate the provision of appropriate and affordable treatment to all Europeans equally, while promoting the highest quality of care. EKHA works on the principle that the issue of kidney health and disease must be considered at European level and that both the European Commission and European Parliament have vital roles to play in assisting national governments with these challenges. Besides the European Renal Association, the European Kidney Patients' Federation, the European Dialysis and Transplant Nurses Association/European Renal Care Association, the Dutch Kidney Foundation, the International Society of Nephrology and the European Society for Organ Transplantation (Members of EKHA Board of Directors), over 31 organisations from across Europe are currently affiliated members of EKHA.

[www.ekha.eu](http://www.ekha.eu)



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