

The third World Kidney Day: looking back and thinking forward

Sudhir V Shah* and John Feehally on behalf of the World Kidney Day Steering Committee

March 13 2008 is World Kidney Day (WKD), which will be celebrated in more than 60 countries. Joel Kopple, founder of the International Federation of Kidney Foundations (IFKF), conceived the idea of WKD in 2003 and was instrumental in bringing it to fruition. A joint venture between the IFKF and the International Society of Nephrology (ISN), the first WKD was staged on March 7 2006. Kidney organizations in 45 countries enthusiastically embraced the first WKD, organizing health screening events, road shows, walkathons, public lectures and press conferences. It was clear that WKD was responding to an urgent need, and tapping into the tremendous energy and motivation of kidney health professionals, patients, and patients' friends and relatives across the globe.

WKD continues to emphasize that "kidney disease is common, harmful and treatable". The day provides an opportunity to inform and educate health policy makers, individuals at the highest risk of developing chronic kidney disease (CKD), and the general public. Less than 5% of the general population knows the anatomical location and function of their kidneys! The theme of WKD 2008—"Amazing Kidneys!"—therefore reinforces the positive message that kidneys are wondrous organs.

Each geographical region can adopt different priorities for WKD. Up to 90% of people with CKD remain unidentified, so the detection and management of CKD will be the focus of WKD in many locations. That CKD is a major public health problem is beyond dispute. It is obvious that an issue of this magnitude cannot be successfully managed by volunteer organizations alone. On WKD we must raise awareness about the heavy burden of CKD on individuals and health-care budgets, and put CKD on the agendas of governments and other institutions that shape health policy. WKD is an opportunity to launch high-profile initiatives and seek the endorsement of agencies that can help to ensure that such initiatives become embedded into routine health care.

"Never doubt that a small group of thoughtful, committed citizens can change the world: indeed, it's the only thing that ever has." (Margaret Mead)

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CKD can be detected through two simple and inexpensive means: measurement of urine protein level, and measurement of blood serum creatinine concentration (for estimation of glomerular filtration rate [GFR]). Nevertheless, developing detection and management programs for CKD that can be implemented widely to improve outcomes at reasonable cost is a formidable undertaking. Even developed countries are unlikely to have the resources to implement whole-population screening programs. In any case, there is no evidence to date to show that such programs are cost-effective. We recommend, therefore, that all countries establish targeted screening strategies.

Steps to establish effective targeted screening programs include the following: reporting of estimated GFR by all laboratories that measure serum creatinine levels; measurement of estimated GFR and proteinuria in the people at highest risk of developing CKD (i.e. those with diabetes, hypertension, coronary heart disease or cerebrovascular disease); regular measurement of blood pressure, estimated GFR and proteinuria in people found to have CKD; establishment of blood pressure control targets for individuals with CKD, and appropriate use of drugs that block the renin-angiotensin system; and agreeing on guidelines for identification of the small proportion of people with CKD who would benefit from the specialist advice of a nephrologist. In parallel, research programs that address the many unresolved issues surrounding CKD and test the efficacy of new health-care strategies must be established.

Our vision is that WKD will be an annual energizing event through which health-care providers, the general public and government bodies unite to improve early detection programs and optimize care for the millions of people with CKD.

Supplementary information in the form of an unabridged version of this article is available on the *Nature Clinical Practice Nephrology* website.