

Health and Global Policy Institute (HGPI) Kidney Disease Control Promotion Project

Urgent Recommendations for Current Issues and Topics in Kidney Disease Control

Background to these urgent recommendations

Cooperation from related parties in the field of kidney disease control has helped Japan make steady progress in kidney disease countermeasures. In 2007, the Kidney Disease Control Review Meeting was held and a plan called “The Future of Measures for Kidney Disease Control” was formulated. That committee met once again in 2017 with the goal of looking back over the previous decade to track progress and identify issues in kidney disease control. They confirmed that suitable progress had been made in terms of establishing a healthcare provision system and developing human resources. They also recognized steps forward were being taken in the creation of a treatment environment, particularly through pharmaceutical development, to respond to chronic kidney disease (CKD), which had become a major disease for the entire country. After that, the importance of prevention and severity reduction for CKD was mentioned in the Basic Policies for Economic and Fiscal Management and Reform 2018. However, the increase in people receiving dialysis (from both an increase in new patients and growing prevalence) remains unchecked, and their number is projected to continue to grow with future population aging. Given these circumstances, Health and Global Policy Institute (HGPI) started the Kidney Disease Control Promotion Project in FY2022 with the goal of heightening awareness for kidney disease throughout society and building momentum for progress in effective, organic countermeasures in this field. For our first proposal, we present the following urgent recommendations based on hearings and other meetings with experts in each field.

Point 1: As mentioned in the Basic Policies for Economic and Fiscal Management and Reform in 2018, 2020, and 2021, the fact that prevention and early intervention for chronic kidney disease (CKD) is an important foundation for healthy longevity must be reaffirmed and comprehensive countermeasures for CKD that are linked to other chronic diseases must be taken.

CKD has deep links to many chronic or lifestyle diseases such as cardiovascular diseases (CVDs) and diabetes, and the progression of CKD is not only a factor that leads to end-stage renal disease or the need for dialysis, it is also a risk factor for stroke, CVDs, and dementia. Promoting CKD countermeasures in a manner that is mutually complementary with measures for other chronic diseases will serve as a foundation for protecting citizens’ lives and livelihoods. Prevention and early intervention for CKDs will help improve healthcare finances and increase healthy life expectancies in line with Healthy Japan 21 by enabling more older adults to maintain good health. On the other hand, due to the need to respond to the COVID-19 pandemic, it is difficult to say that progress on these measures and efforts to raise public awareness has been sufficient after CKD control measures were included in the Basic Policies for Economic and Fiscal Management and Reform in 2018, 2020, and 2021. As such, expectations are high for initiatives to expand CKD control measures from the Government and related stakeholders.

Point 2: In addition to interventions from medical specialists, advancing measures for kidney disease control will require collaboration among related parties in the healthcare system and during various phases of health promotion measures with involvement from a broad range of collaborators.

In the current situation surrounding kidney disease control measures, it has been pointed out that awareness and diagnosis rates for CKD have been low for some time. For early detection and intervention, patients and potential patients must be identified during each type of health examination (including specific health checkups) and introduced to healthcare institutions to receive early diagnoses, but this process is insufficient. Furthermore, there are regional disparities in fill rates of specialists and in the establishment of systems for healthcare collaboration, particularly those that enable family doctors and specialized clinics to collaborate on diagnoses. Moving forward, steps should be taken to further reinforce collaborative systems to facilitate early detection and early intervention. Some steps that will be necessary include formulating uniform classification standards for use at health checkups; expanding recommendations for examinations or health guidance provided after checkups; reinforcing cooperation among nephrologists and family doctors through training on clinical urine tests or by sharing information including up-to-date medical guidelines; making proactive use of specialists who possess certifications related to kidney disease, starting

with national registered dietitians and kidney disease treatment guidance counselors; and promoting multi-disciplinary cooperation through these specialists. Furthermore, to promote these efforts in an efficient manner, it will be important to assign departments to handle kidney disease control measures in municipalities and for them to have close collaboration with the Government by initiating projects and policies.

Point 3: Community- and prefecture-based best practices in kidney disease control are beginning to emerge and there are high expectations for them to be shared and expanded horizontally.

Efforts from related parties in each region and measures undertaken as part of the 2019 Special Measures for Chronic Kidney Disease Control mean best practices, good examples, and lessons learned in kidney disease control are now being accumulated in each region. Various initiatives have emerged from communities and include collaboration among pharmacists, school physicians, municipal public health nurses, and family doctors; establishing central consultation services for kidney disease control in municipalities; and collaboration among associations for internal medicine and medical specialists. The national Government and related organizations should actively promote efforts to share and spread best practices horizontally through budgetary measures and similar means with the goal of achieving nationwide equity in kidney disease control.

(Continued in the next item.)

Point 4: Kidney disease control measures that are based on the perspectives of patients and other affected parties must be advanced.

Behavioral change and self-management among patients and other affected parties are crucial for chronic diseases, and CKD is no exception. To promote behavioral change including encouraging medical consultation-seeking behavior, different approaches and communication methods should be adopted depending on patient age group. There are also various needs that manifest when involving or collaborating with patients and other affected parties. These include expanding peer support systems, including mental support for those most affected; establishing better environments for dietary management for employed people; providing details on dialysis treatment from the patient's point of view that include type and duration of treatment; and establishing a system for providing information on pre-dialysis transplantation. Other stakeholders must reaffirm that patients and other affected parties are key stakeholders in initiatives that are premised on collaboration as well as take part in comprehensive kidney disease control measures that include non-pharmaceutical interventions, such as providing nutritional guidance and encouraging behavioral change.

Future steps for the Kidney Disease Control Promotion Project – Establishing Kidney Disease Control Measures with Patient, Citizen, and Community Engagement and Collaboration

To more strongly connect past efforts in the field of kidney disease from industry, Government, academia, and civil society to concrete results, while referring to best practices, good examples, and lessons from communities, HGPI will identify necessary measures for nationwide equity in kidney disease control and generate recommendations on an ongoing basis. By holding wide-ranging discussions that examine pharmaceutical therapy as well as encompass efforts to promote behavioral change among affected parties and include the concept of social prescriptions, we will build momentum for greater awareness toward kidney disease countermeasures throughout society. When advancing this project, we will meet with our multi-stakeholder advisory board that includes patients and other affected parties to hold meetings with the theme of “Establishing Kidney Disease Control Measures with Patient, Citizen, and Community Engagement and Collaboration” and synthesize discussion points.

Acknowledgments

When creating these recommendations, we conducted hearings with the following experts who participated on our advisory board. We express our deepest gratitude to them. The recommendations were compiled by HGPI based on those hearings in its capacity as an independent health policy think tank and should not be taken to represent the opinions of any specific advisory board member, related party, or any organization to which they belong.

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About Health and Global Policy Institute

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