

LITHUANIAN EXPERIENCE: CKD (CHRONIC KIDNEY DISEASE) ALERT PROGRAM IN PRIMARY CARE

Inga Arūnė Bumblytė¹, Alanta Žilinskienė¹, Jovita Butkevičienė², Marius Miglinas³

¹Department of Nephrology, Lithuanian University of Health Sciences, Kaunas, Lithuania

²AstraZeneca Lietuva, Vilnius, Lithuania

³Nephrology Center, Santaros Klinikos, Faculty of Medicine, Vilnius University, Vilnius, Lithuania

Background: Early diagnosis of CKD is a pivotal factor for improving patient outcomes. A banner alert program for general practitioners (GP) was initiated to support the early diagnosis of CKD. The company “SoftDent” implemented the program and provided statistical results for the year 2023.

Results: The CKD alert program was implemented in 519 medical facilities (~60% of Lithuania's population). The alert was activated if the patient had CKD risk factors. 49,496 banners were shown to physicians during patient visits, out of these patients 10,941 (22.1%) patients were referred to the nephrologists. 8,968 (80.4%) of referred patients arrived for the consultation. The distribution of CKD risk factors: high blood pressure 8,303 (75.9%), cardiovascular diseases 7,253 (66.3%), diabetes 2,628 (24.0%), kidney diseases 121 (1.1%), obesity 84 (0.8%). 2289 (25.5%) of arrived and consulted patients were confirmed with CKD. Stage 3 was diagnosed in 59.7%, Stage 4 in 22.2%, Stage 5 in 4.2% of patients.

The analysis of treatment showed the most used drug classes: beta-adrenergic blockers (65.7%), diuretics (51.3%), ACE inhibitors (24.74%), and ARBs (21.1%). Among the patients with a confirmed CKD diagnosis, 19.3% used SGLT2, and 5.04% used GLP-1RA.

Conclusion: Following CKD alarm implementation, only 22.1% of patients were referred to nephrologists, with most found to have Stage 3 CKD. The use of ACEI/ARB was below 25%. This data underscores the need for further education on early CKD detection and precise diagnosis to enhance management with new reno and cardio protective medications.

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