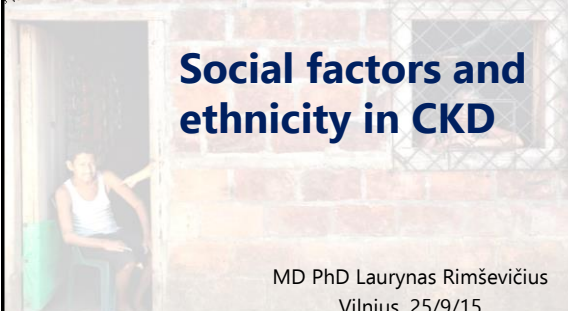
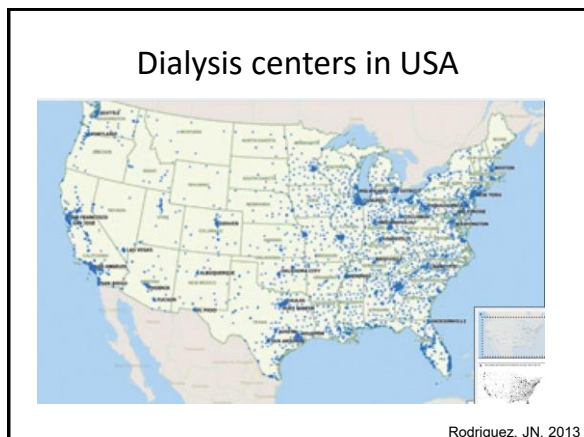
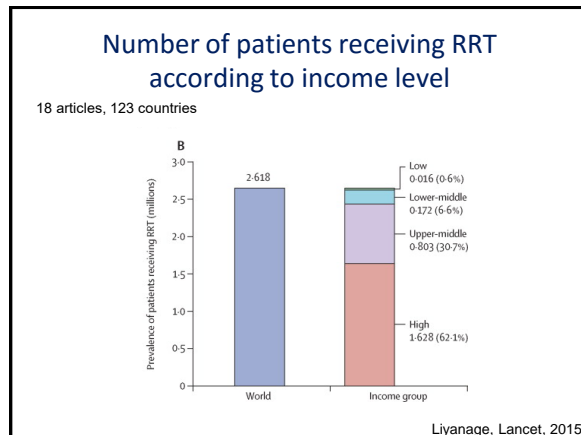
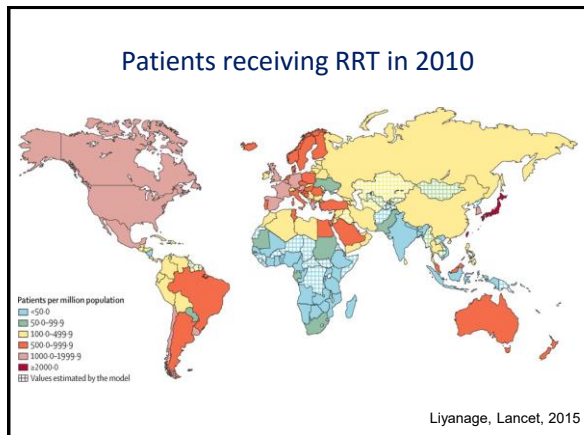
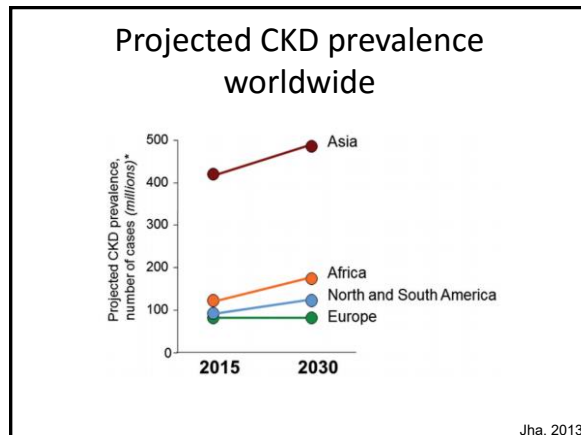


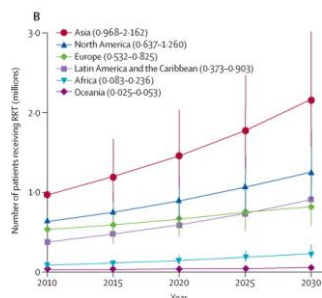
4th Vilnius-Gdansk Meeting on Hypertension, Kidney Disease and Cardiovascular Protection
September 25, 2015

Social factors and ethnicity in CKD

MD PhD Laurynas Rimševičius
Vilnius, 25/9/15

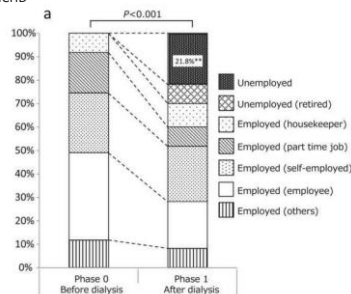
Estimated number of patients undergoing RRT by region



Liyanage, Lancet, 2015

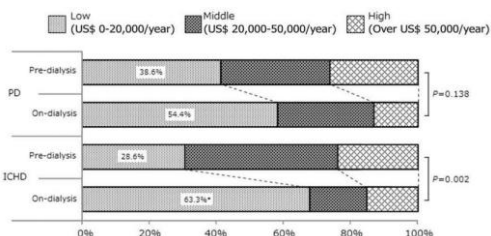
Changes in employment status after dialysis inception

102 PD and 77 ICHD



Nakayama, 2015

Changes in annual individual incomes by dialysis modality



Nakayama, 2015

Poverty increases the burden of disease

Biological factors	Environmental factors
Low birth weight Genetic predisposition Cumulative biological risk profiles Inadequate nutrition	Increased exposure to pollutants Increased exposure to communicable disease Lack of clean water and sanitation
Health behavior	Access to health care
Lack of information on preventive behaviors Lack of knowledge on how best to respond to an episode of illness Health beliefs and unhealthy behaviors	Lack of access to health care Greater distance from health-care providers Lack of out-of-pocket resources

Socioeconomic Class and Values of Key Determinants of Health

Patient Needs	Poverty	Middle Class	Wealth
Food	Key question: Did you have enough? Quantity important.	Key question: Did you like it? Quality important.	Key question: Was it presented well? Presentation important.
Education	Valued and revered as abstract but not as reality.	Crucial for climbing the success ladder and making money	Necessary tradition for making and maintaining connections.
Destiny	Believes in fate. Cannot do much to mitigate chance	Believes in choice. Can change future with good choices now.	Noblesse oblige
Language	Casual register. Language is about survival.	Formal register. Language is about negotiation	Formal register. Language is about networking.
Family Structure	Tend to be matriarchal.	Tends to be patriarchal.	Depends on who has money.
World View	Sees the world in terms of local settings.	Sees the world in terms of national settings	Sees the world in terms of international view.
Time	Present most important. Decisions made for the moment based on feelings or survival.	Future most important. Decisions made against future ramifications.	Traditions and history most important. Decisions made partially on the basis of tradition and decorum

Nicholas, 2015

Poor region vs. capital city

Risk factor	KEEP Mexico City	KEEP Jalisco	ENSA 2000	KEEP US	NHANES 1999-2006
Diabetes ^a	29	48	8	29	7
Hypertension ^b	49	49	31	69	29
Overweight (BMI 25-29 kg/m ²)	37	36	38	32	34
Obesity (BMI ≥30 kg/m ²)	34	48	24	44	32
Albuminuria (ACR >30 mg/g)	19	31 ^c	39	12	6
eGFR <60 ml/min per 1.73m ²	7	10	ND	18	9

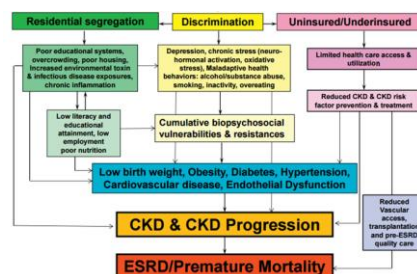
Obrador, Kidney Int., 2010

Screening for CKD in homeless

- 260 homeless individuals in the state of Jalisco, Mexico
- 3.5% knew they were hypertensive but 31% had systolic blood pressure greater than or equal to 140 mm Hg
- 5.8% knew they had diabetes, but 19% had fasting blood sugar >126 mg/dl
- CKD was more prevalent than among the poor Jalisco population 22% vs. 15.8%

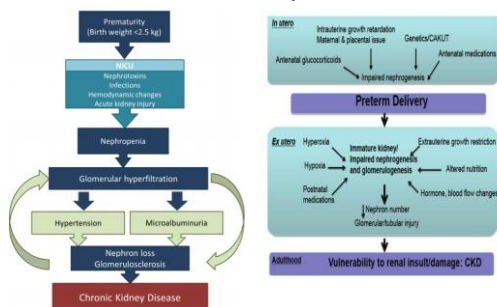
Garcia-Garcia, 2013

Conceptual model of relationship between socioeconomic deprivation and CKD



Nicholas, 2015

Progression from prematurity to chronic kidney disease



Brophy, 2015

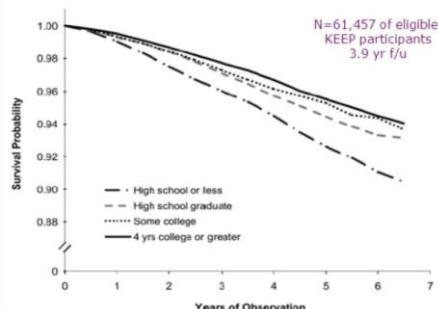
Mediators of the Association Between Low SES and CKD

9,823 participants in the 2007–2008 and 2009–2010 cycles of the NHANES

Potential Mediator	Odds Ratio	95% CI	% Mediated	95% CI
Health-related behaviors				
Direct effect	1.49 ^b	1.24, 1.74	80 ^b	69, 95
Indirect effect of:				
Smoking	1.04 ^b	1.01, 1.07	3 ^b	3, 11
Alcohol intake ^c	1.04 ^b	1.03, 1.06	3 ^b	2, 12
Physical activity	1.02 ^b	1.00, 1.05	4 ^b	1, 7
Sedentary time ^d	1.01	0.98, 1.04	3	-5, 9
Diet ^e	0.99	0.95, 1.03	1	-6, 11
All together ^f	1.10 ^b	1.04, 1.17	20 ^b	15, 26
Total effect	1.64 ^b	1.42, 1.89		
Comorbid conditions				
Direct effect	1.41 ^b	1.22, 1.62	68	57, 83
Indirect effect of:				
Diabetes	1.01 ^b	1.03, 1.11	13 ^b	8, 21
Hypertension	1.04 ^b	1.03, 1.07	7 ^b	4, 9
Obesity	1.02 ^b	1.00, 1.05	4 ^b	1, 7
Abdominal obesity	1.02 ^b	1.00, 1.04	4 ^b	1, 9
Hypercholesterolemia	1.01 ^b	1.00, 1.03	3 ^b	1, 6
All together	1.16 ^b	1.11, 1.21	32 ^b	25, 40
Total effect	1.64 ^b	1.42, 1.89		
Access to health care				
Direct effect	1.56 ^b	1.35, 1.77	89 ^b	80, 99
Indirect effect of:				
Health insurance	1.03 ^b	1.00, 1.05	6 ^b	1, 11
Health-care visits	1.02 ^b	1.00, 1.04	5 ^b	1, 10
Both together	1.05 ^b	1.02, 1.08	11 ^b	4, 18
Total effect	1.64 ^b	1.42, 1.89		

Vart, 2014

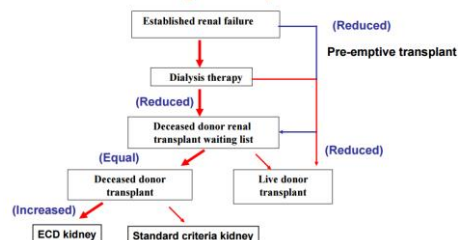
Education level: CKD and mortality



Choi, AJKD, 2011

Social deprivation and access to kidney transplant

n=11,299, 18-69 yr., UK, 1997-2004



Udaya, 2010

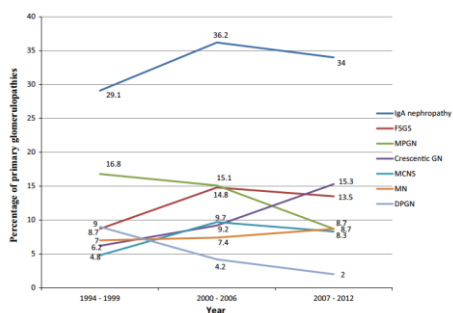


Kidney and infection

Countries	IgA %	MCD %	MPGN %	GNP US\$
Nigeria (N = 41)	-	9	51	770
Peru (N = 1263)	1	5	23	4480
Paraguay (N = 678)	3	1	25	4380
South Africa (N = 104)	5	1	22	8710
Japan (N = 1850)	30	26	7	25,170
Spain (N = 7016)	17	19	4.3	17,850
France (N = 1990)	36	10.7	2.3	23,020
Italy (N = 13,835)	37	7	6.3	22,000
Australia (N = 2030)	34	4.4	2.2	23,850
United States (N = 2000)	9	15	2	31,910

Hurtado, Kidney Int, 2005

Renal biopsy data in Lithuania 1994-2012



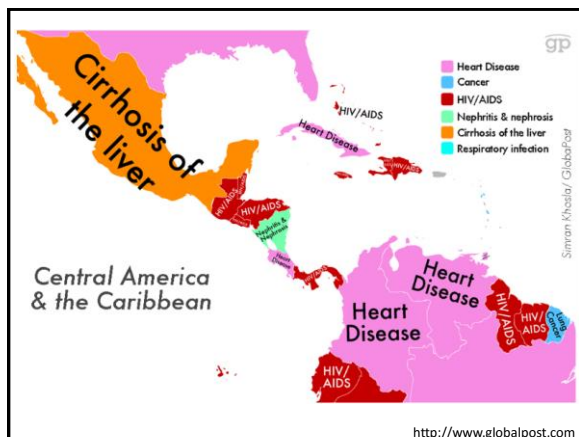
Brazdziute, 2015



Agriculture and CKD

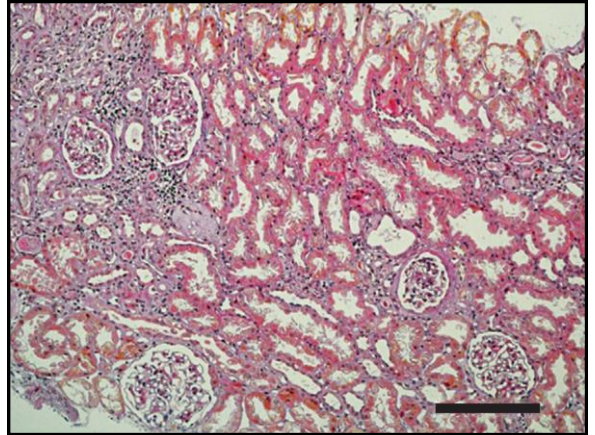
- CKD of unknown origin, prevalence 17.9%–21.1%
- Central America, Egypt, India and Sri Lanka
- Agricultural communities
- Higher in male farmworkers aged 20–50 years
- Varied by community economic activity and altitude
- Agrochemical exposure, dehydration, hypertension, homemade alcohol use, family history

Almaguer, MEDICC Rev, 2014

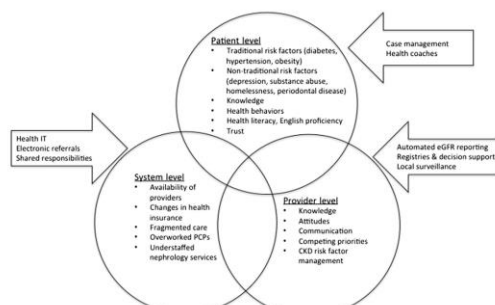


Mesoamerican nephropathy

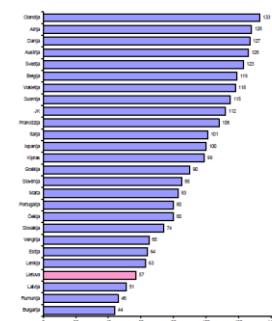
- Prevalent in the Pacific ocean coastal low lands: Mexico, Guatemala, El Salvador, Nicaragua, Honduras and Costa Rica
- Colloquially called creatinine
- Presents as a tubular-interstitial disease with rapid progression to ESRD
- Sugarcane workers, strenuous work in the high temperatures of the coastlands
- Town of Chichigalpa - "Island of Widows"



Barriers in access to high-quality CKD care



GDP per capita according to purchasing power standards



Eurostat, 2010

People at risk of poverty or social exclusion

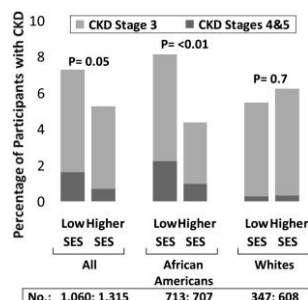
	At risk of poverty or social exclusion (AROPE) (%)		At risk of poverty (AROP) (%)		Severe material deprivation (SMD) (%)		People at risk of poverty or social exclusion with very low work intensity (VLI) (%)	
	No	Some and severe	No	Some and severe	No	Some and severe	No	Some and severe
EU-28 (EU)	17.2	10.2	14.6	8.7	5.1	3.1	12.4	6.4
Belgium	10.8	34.3	12.0	23.7	4.1	8.1	10.4	21.7
Bulgaria	44.1	63.7	17.9	28.0	38.0	17.9	10.2	20.2
Czech Republic (CZ)	12.0	20.1	7.2	11.0	5.1	10.9	4.0	24.2
Denmark	16.5	27.4	13.2	12.7	2.7	6.8	8.5	20.1
Germany	14.9	27.8	11.7	21.5	3.1	8.2	5.8	22.3
Estonia	18.5	34.4	15.2	28.0	5.2	12.6	4.9	23.1
Finland	26.0	38.9	13.0	18.7	7.5	14.7	20.5	47.2
Greece	34.5	36.8	21.9	28.0	19.2	22.2	16.9	39.9
Spain	20.7	29.4	19.2	19.0	5.2	7.2	14.2	30.1
France	16.0	21.6	11.9	16.6	4.2	6.9	6.0	17.2
Croatia	27.1	37.7	17.4	23.7	12.9	19.7	13.1	29.7
Italy	28.4	38.9	17.9	18.7	10.6	15.9	10.3	18.9
Cyprus	25.7	36.7	14.1	20.1	14.0	20.9	6.8	18.8
Lithuania	25.9	42.2	17.7	24.9	12.8	24.4	8.3	33.1
Hungary	29.2	39.8	12.2	13.0	23.1	39.9	8.7	30.7
Malta	21.1	32.7	13.4	19.1	6.3	14.7	7.3	27.8
Netherlands	12.4	22.0	9.5	11.9	1.3	4.9	5.4	24.7
Romania	10.2	34.9	12.4	18.7	2.9	9.9	5.9	20.7
Poland	20.1	30.9	15.8	17.6	10.1	17.0	5.9	20.7
Portugal	27.1	43.9	21.1	18.2	25.2	32.8	5.0	17.6
Romania	10.5	28.7	12.0	20.2	5.1	18.8	6.4	17.6
Slovakia	17.9	22.7	11.2	12.3	6.1	12.6	5.4	15.2
Finland (FI)	14.0	24.9	11.8	18.2	1.9	5.8	6.6	16.3
Sweden	14.3	25.6	13.0	21.4	0.7	3.7	4.8	10.4
United Kingdom	18.0	34.8	14.1	20.0	5.9	12.6	8.0	20.4
Latvia	5.9	27.6	8.0	15.1	7.2	7.0	3.4	19.5
Switzerland	13.7	22.8	12.3	19.5	0.5	1.1	2.9	9.8
Slovenia	10.3	24.9	10.0	14.9	1.3	4.0	4.5	21.8

Eurostat, 2015

Case report: traveller

- Tonigh, 81 yr. male
- Scabies, homeless
- 10th visit to ER this year
- Collapse after discharging from a hospice
- Knows hypertension from 2013
- MI in 2000, 2011, 2013, EF
- Creatinine 418 mkmol/l (AKI!), hgb 10,1 g/l

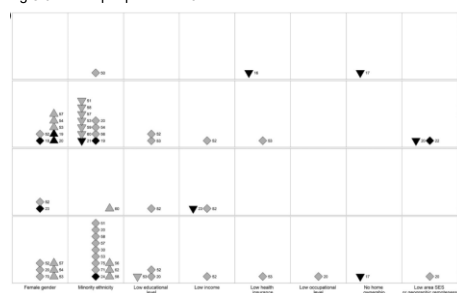
SES, ethnicity and CKD



Crews, AJKD, 2010

Social factors and CKD stage 3-5

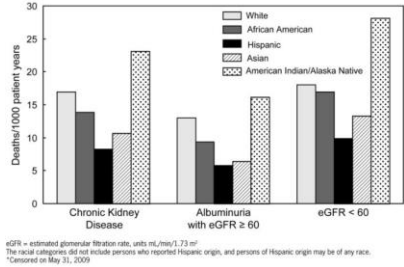
Twenty-four studies in the pre-dialysis population and 34 in the dialysis population representing 8.9 million people from 10 countries



Morton, NDT, 2015

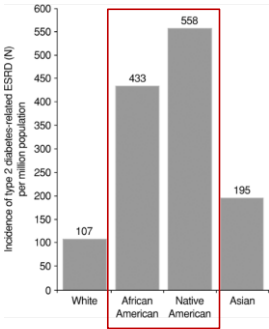
Differences in death rates among participants with CKD, KEEP, 2000 -2009

19,205/ 122,716 CKD



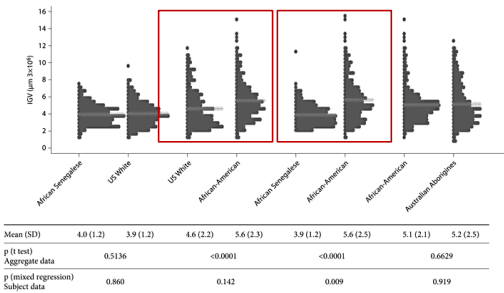
Jolly, CJASN, 2011

Ethnicity and ESDR due to DM



USRDS, 2003

Ethnicity and individual glomerular volume



Hoy, AJN, 2011

Prevalence of CKD, by eGFR and First Nations status

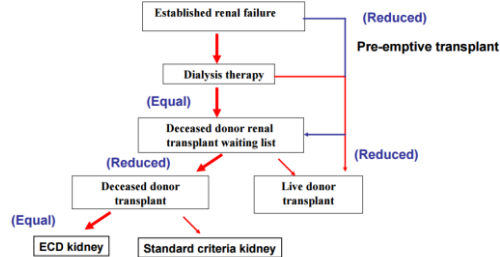
eGFR Stage (ml/min per 1.73 m ²)	Non-First Nations per 1000 Population	First Nations per 1000 Population	P ^a
30 to 59	63.1	50.7	<0.0001
15 to 29	3.8	5.9	<0.0001
<15	0.6	2.9	<0.0001

^aχ² test.
658,664 non-first nation vs.14,989 first nation
Age and sex-adjusted

Gao, JASN, 2007

Ethnicity and access to kidney transplant

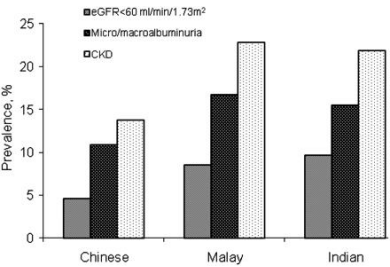
n=11,299, 18-69 yr., UK, 1997-2004



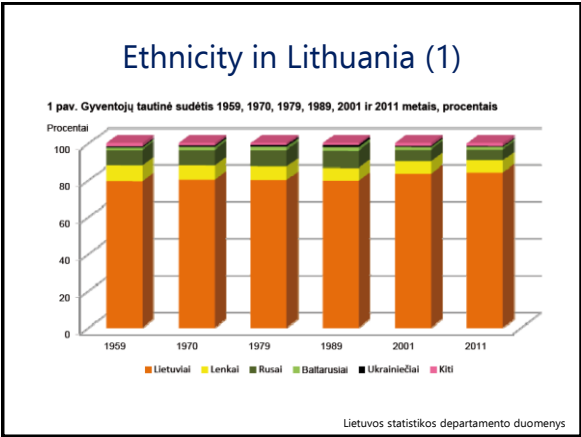
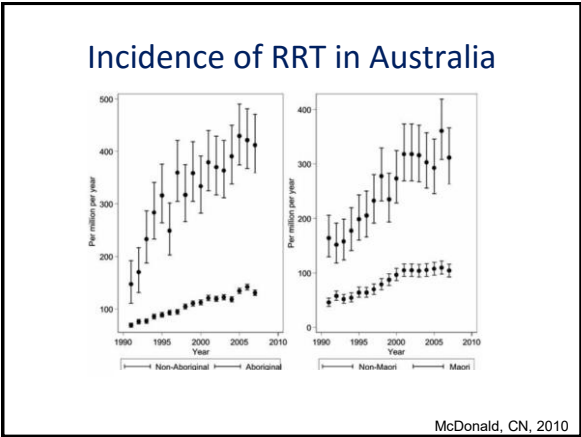
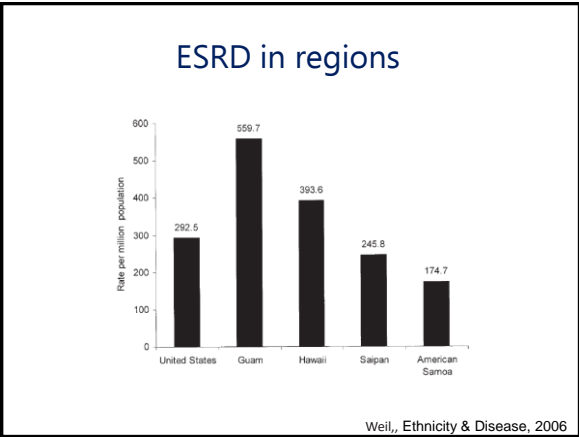
Udaya, 2010

CKD in different Asia countries

4499 participants, 24-95 yr., Singapore



Sabanayagam, NDT, 2010



Ethnicity in Lithuania (2)

1 lentelė. Gyventojai pagal tautybę 1959, 1970, 1979, 1989, 2001 ir 2011 metais

Tautybė	1959	1970	1979	1989	2001	2011						
	abs. vnt.	proc.	abs. vnt.	proc.	abs. vnt.	proc.						
Visi vnt.	2 711 448	100	2 139 236	100	2 014 892	100	2 043 626	100				
Lietuviai	2 150 787	79.32	2 006 751	93.81	2 712 233	79.57	2 024 251	79.58	2 907 263	85.45	2 001 314	84.18
Lenkai	230 107	8.49	240 203	7.86	247 822	7.38	257 064	7.02	234 889	6.74	200 317	6.56
Rusai	231 014	8.52	267 889	8.57	303 483	8.95	344 405	9.37	219 789	6.31	179 913	5.81
Baltarusiai	30 258	1.12	45 412	1.45	57 584	1.70	63 108	1.72	43 888	1.23	36 227	1.79
Ukrainiečiai	17 802	0.65	25 559	0.93	31 582	0.94	44 759	1.22	27 488	0.85	15 423	0.74
Žydai	24 872	0.91	23 594	0.79	14 867	0.43	12 392	0.34	4 987	0.12	3 588	0.15
Totoriai	3 023	0.11	3 480	0.11	4 599	0.12	5 188	0.14	3 235	0.09	2 783	0.09
Vokiečiai	11 188	0.41	1 904	0.09	2 616	0.08	2 058	0.05	3 243	0.09	2 418	0.08
Romai	1 238	0.04	1 980	0.09	2 308	0.07	2 718	0.07	2 571	0.07	2 115	0.07
Latviai	6 115	0.23	5 983	0.18	4 364	0.13	4 228	0.11	2 985	0.09	2 025	0.07
Armėnai	471	0.02	908	0.02	895	0.03	1 855	0.04	1 477	0.04	1 233	0.04
Azerbaidžaniečiai	580	0.02	711	0.02	1 076	0.03	1 314	0.04	788	0.02	846	0.02
Moldavai	184	0.01	794	0.03	724	0.02	1 400	0.04	704	0.02	940	0.02
Gruzai	358	0.01	473	0.02	423	0.02	858	0.02	497	0.01	512	0.01
Estai	382	0.01	551	0.02	946	0.02	988	0.01	418	0.01	314	0.01
Korėjiečiai	423	0.02	388	0.01	352	0.01	289	0.01	273	0.01	241	0.01
Kiti	2 882	0.11	3 517	0.11	6 919	0.20	7 565	0.21	3 517	0.10	3 588	0.12
Nemėnėdai	74	0.00	0	0	0	0	0	0	32 821	0.95	32 975	1.98

Lietuvos statistikos departamento duomenys

Case report: periodic fever

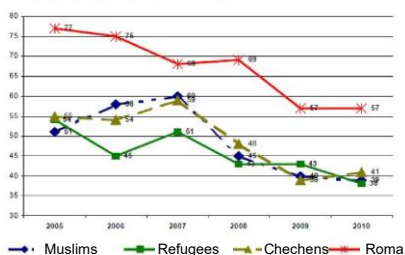
- 33 yrs. female, armenian
- Periodic disease, treated with colchicine
- Amyloid in salivary gland
- HD from 2007 via central line
- Fever attack in 2009, later on underwent transplantation
- Dead because of infectious complications

Case report: rare HLA

- 60 yr. male, Kazakh
- Many years has diagnosis of MN
- 2 years on CAPD from 2012, then changed to HD because of abdomen wall abscess
- Waiting for transplantation
- Never as a first candidate

Fear in society

3 pav. Prašome pasakyti, su kuo iš išvardytų žmonių grupių Jūs nenorėtumėte gyventi kaimynystėje? (proc.) 2005-2010 m. proc.

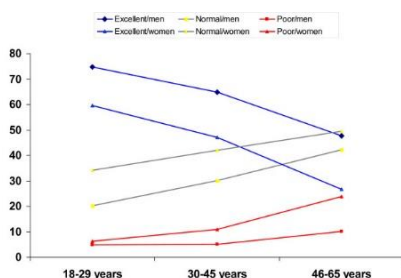


Field hospitals in Syria: dialysis



Akram Al-Makki, 2014

People health in Syria



Asfar, 2007

ESRD epidemiology in Syria

- Aleppo city – 550 patients on HD (total 2,132,100)
- Mean age 44.7 yr.
- Rates relatively low due to the high cost of treatment, high mortality rate and low kidney transplantation rate
- Causes: HTN 21.1%, GN 20.5%, DM 19.45%

Moukeh, 2009

CKD epidemiology in Roma people

- Cross-sectional epidemiological HepaMeta study conducted in Slovakia in 2011
- 452 Roma and 403 non-Roma respondents
- Roma females had OR of 1.56 for having nephropathy over non-Roma females
- Roma females had a significantly lower GFR (mean difference 3.4 ml/min, $t = -3.58$, $p < 0.001$); all female female patients with proteinuria were Roma

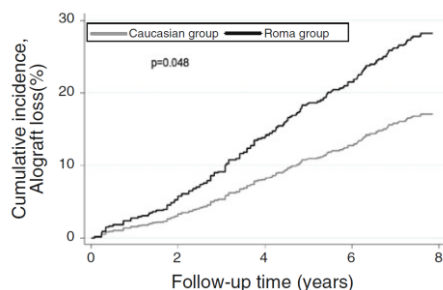
Rosenberger, Cent Eur J Public Health, 2014

Roma and risk of ESRD

Age groups	Majority population		Roma population		RR for ESRD (standardized) [95 % confidence interval]
	Total population* (n)	Dialyzed patients* (n)	Total population* (n)	Dialyzed patients* (n)	
0-14	873,572	21	129,278	5	1.82 [1.18-2.82]
15-29	1,308,243	41	128,983	10	2.77 [2.03-3.79]
30-44	1,192,744	96	87,591	20	3.42 [2.75-4.26]
45-59	1,132,677	240	49,574	29	3.14 [2.61-3.76]
60-74	615,426	304	13,938	16	2.47 [1.94-3.16]
75+	273,140	109	3,053	3	2.38 [1.35-4.20]
Total	5,395,802	810	412,416	83	2.85 [2.56-3.17]

Kolvek, Int J Public Health, 2012

Outcomes of transplantation in Roma



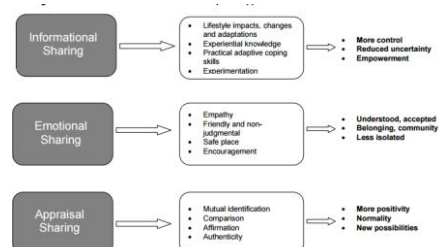
Molnar, Int Urol Nephrol, 2012

Case report: medicine is evil

- 31 yr., Roma woman
- ADKD from 17 yr. old
- Father died being on HD
- No compliance with RRT
- AVF after long persuasion
- Refuses all medication
- Not wait-listed for transplant, needs nephrectomy



Perceived attributes and benefits of peer support



Dennis, 2003

Proposed CKD Quality Metrics (1)

- Prevention and screening
 - Assessment of smoking status and cessation advice
 - Avoidance of NSAID prescription
 - Pneumovax and hepatitis B vaccine
- Monitoring and treatment
 - Use of ACEi/ARB in patients with hypertension, proteinuria, and diabetes
 - Lipid profile and statin prescription
 - Assessment of anemia and iron studies
 - Assessment of metabolic bone disorder parameters
 - Delivery of pre-ESRD education

Tuot, 2015

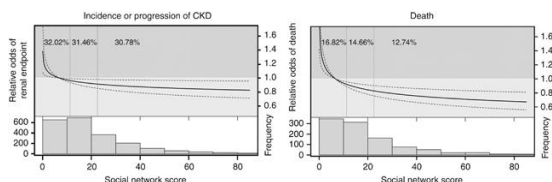
Proposed CKD Quality Metrics (2)

- Experience of care
 - Patient care coordination perception
 - Patient satisfaction surveys
- Access to specialty care
 - Time to next new nephrology appointment
 - Availability of virtual nephrology consultation or comanagement
 - Electronic referral and consultation system

Tuot, 2015

Social network score and renal endpoint

6972 ONTARGET patients with diabetes without macroalbuminuria were studied



Dunkler, 2015

Monitoring at home: platform

- FP7-ICT-2013-611140
- Consortium: 6 partners – 4 EU countries
- Duration: Nov 2013 – Oct 2016
- Budget: 3,210,470€

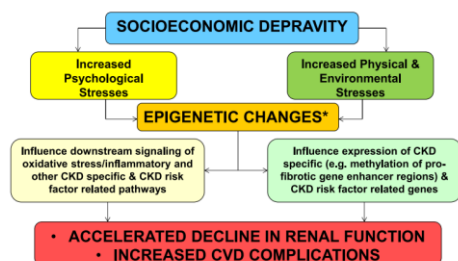
Monitoring at home: platform



Monitoring at home: platform

- Dynamic CRS model of comorbidities
- Data aggregators
- Interactive visualization
- Decision support system
- Patient empowerment
- Shared decision support service

Conceptual model of socioeconomics influencing epigenetic changes



Nicholas, 2015

12 MARCH 2015
KIDNEY HEALTH FOR ALL

Of all the forms of inequality, injustice in health care is the most shocking and inhumane

Martin Luther King, Jr.

Take home message

- Roma – bubreszka
- Tatars - büjjer, büjiräk
- Karaim - bögrek, bivrek
- Armenians – yerikam (Երիկամ)
- Georgians - t'irkmeli (თირკმელი)
- Arabs - الكلى

4th Vilnius-Gdansk Meeting on Hypertension, Kidney Disease and Cardiovascular Protection
September 25, 2015

Social factors and ethnicity in CKD

MD PhD Laurynas Rimševičius
Vilnius, 25/9/15