

**John Davis** 

 John Davis is the Chief Executive Officer of Kidney Disease: Improving Global Outcomes or KDIGO.

- John has had more than 30 years experience in the world of medical not-for-profit.
  - Over his career, John has raised over \$200,000,000 for programs in kidney disease and transplantation; providing CME educational programs to over 45,000 physicians and other professionals; bringing transplant athletics to the US; recognizing donor families and creating the effort to bring evidence based clinical practice guidelines to the field of kidney disease.



### Kidney Disease: Improving Global Outcomes

# Global Science Local Change



Kidney Disease: Improving Global Outcomes Clinical Practice Conference Nanjing, China 26 August, 2016

John Davis KDIGO Chief Executive Officer

### **The KDIGO Mission**

 Improving the care and outcomes of kidney disease patients worldwide through the development and implementation of global clinical practice guidelines.



### 2016 KDIGO Leadership

#### KDIGO Co-Chairs:

David Wheeler, UK Wolfgang Winkemayer, USA

#### **Executive Committee:**

Ali Abu-Alfa, *Lebanon* Jürgen Floege, *Germany* Andy Levey, *USA* Ziad Massy, *France* Brian Pereira, *USA* Angela Wang, *Hong Kong*  Olivier Devuyst, *Switzerland* Bert Kasiske, *USA* Zhi-Hong Liu, *China* Roberto Pecoits-Filho, *Brazil* Yusuke Tsukamoto, *Japan* Christoph Wanner, *Germany* 

#### **KDIGO Staff:**

John Davis, Chief Exec Officer Michael Cheung, Chief Sci Officer

Danielle Green, Managing Director Tanya Green, Comm Director



### **KDIGO Aims**

- To translate scientific advances into useful and practical clinical practice recommendations.
- To make these recommendations available to clinicians around the world.
- To implement recommendations taking into account cultural, economic, language, regulatory and environmental issues.
- To adapt, simplify, prioritize and highlight recommendations to make them usable to clinicians in their everyday clinical practice.



## **KDIGO Programs**

#### **Global Clinical Practice Guidelines**

• KDIGO's core business. The development, vetting, dissemination, and implementation are all integral to the KDIGO process.

#### **Controversies Conferences**

 Conferences that examine significant topics in nephrology and related disciplines that are not fully resolved. Each results in a published paper. Often a Controversies Conference will prompt development of a guideline.

#### **Implementation Activities**

- Clinical Practice Conferences Usually held in collaboration with a local or regional nephrology society. Global recommendations and local circumstances are compared and discussed in a case presentation format.
- Core Implementation Kits Educational materials including Speaker's Guides, Reference Tools, and Case Studies to assist with implementation of Conference Reports and Guidelines.

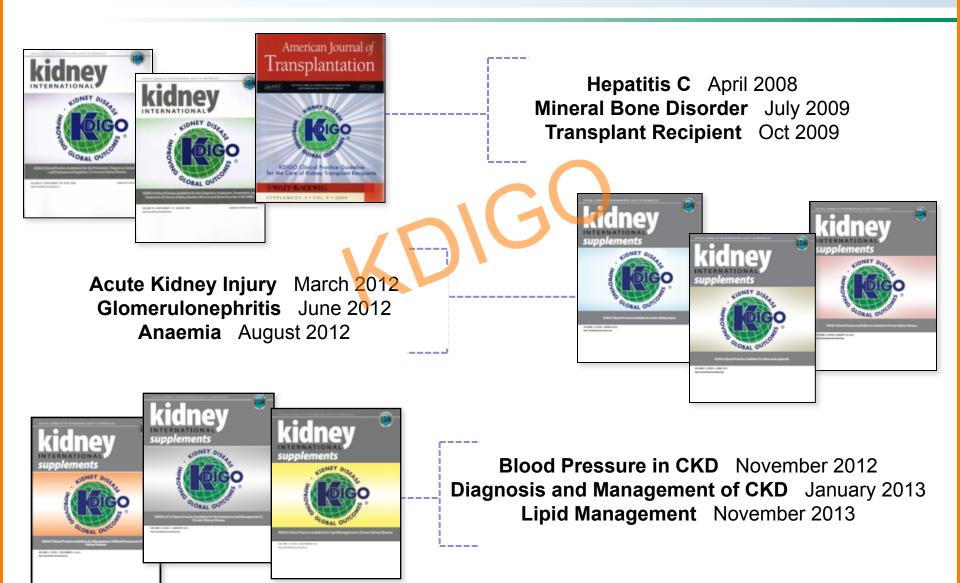


# **KDIGO Topics for Today**

- Mineral and Bone Disorders Guideline Update
  - First presentation on the new guideline, now out for Public Review
  - To be published later this year
  - Brings previous guideline up to date
  - Follows a major Controversies Conference
- Controversies Conference Report on Iron Management
  - Observations from another major conference
  - Will be used in an update of the Anemia Guideline
- Glomerulonephritis Guideline
  - Published in 2012
  - Update process to begin in late 2016
- Controversies Conference on Clinical Trials
  - To be held next month in Paris
  - Includes clinical trials in China
- This Conference is part of KDIGO's priority program to meet and serve the Chinese kidney community. Dr. Liu is a member of the KDIGO Executive and a global leader.



### **Published KDIGO Guidelines**



## **Controversies Conferences**

#### 2016:

- Gitelman Syndrome
- Common Elements in Uncommon Kidney Diseases
- Challenges in the Conduct of Clinical Trials in Nephrology
- CKD & Arrhythmias
- Optimal Management of Patients with 2009: Advanced CKD

#### 2015:

- Diabetes & CKD
- Fabry Disease
- Complement-Mediated Kidney Diseases
- Gitelman Syndrome

#### 2014:

- ADPKD
- Iron Management in CKD
- ADTKD
- Nephropathic Cystinosis

#### 2013:

- CKD-MBD: Back to the Future
- Supportive Care

#### 2012:

Diabetic Kidney Disease

#### 2011:

 Novel Techniques & Innovation in Blood Purification

#### 2010:

- Cardiovascular Disease in CKD
- Drug Prescribing in CKD: Initiative for Improved Dosing
  - Definition, Classification, and Prognosis in CKD
- Blood Pressure in CKD Stage 5D
- 2007:
  - Clinical Practice Guidelines: Methodology and Transparency
  - Coordination of Clinical Practice Guidelines for Anaemia in CKD

#### 2006:

- CKD as a Global Public Health Problem
- Care of the Transplant Recipient

#### 2005:

 Definition, Evaluation & Classification of Renal Osteodystrophy

#### 2004:

Definition & Classification of CKD in Adults
Worldwide

### **Other Current KDIGO Activities**

- Guidelines
  - Living Kidney Donors
  - Transplant Candidate Selection
  - Hepatitis C Guideline Update
  - Blood Pressure Guideline Update
  - Guideline on Diabetes and CKD
- Controversies Conferences
  - Cardio-Renal Issues
    - CKD & Arrhythmias
    - Heart Failure
  - Advanced CKD
  - HIV Associated Nephropathy



## **Core Implementation Kits**

**Core Implementation Kits** will accompany all KDIGO publications. These electronically accessible tools enable clinicians across the globe to utilize KDIGO work in a more concise manner and better care for their patients.

Components of Core Implementation Kits include:

• A **Speaker's Guide** based on a guideline or controversies conference publication. These slide sets will provide clinicians a practical step-by-step guide to putting recommendations and conclusions to use.

• A concise **Reference Guide** to accompany a narrative guideline or conference report. These guides can be printed as pocket cards, handouts, or desk guides to aid clinical decision-making.

• A **Clinical Decision Guide** focused on patient cases to help physicians apply evidence synthesis and expert guidance into pathways of care.



• **Translation** of full guidelines and conference reports, and accompanying components, into multiple languages.

### **KDIGO Comparative Guideline Library**

KDIGO collaborated with Cochrane Kidney and Transplant to create a comprehensive **Comparative Guideline Library**. The Library is under development and will allow users to search across guidelines and recommendation statements from the 6 major English-language guideline entities.

EYWORD SEARCH	AKI prevention			2					
	KDIGO S CSN	9.1	KHA-CARI		0				
Select topic 🔹	4.9.1 March 2012 Acceptance and Dialysis	imend i.v. volume	4.2.1 KDIGO	COMPARATIVE C	UIDELINES LIBRARY			About Glossary	KDIGO Main
Select subtopic 🔹		loride or sodium s te solutions, rather than b blume expansion, in n	expan Keyword ser sodiul bicart Search no i.v. patier	RCH I Key Term			CSN	<b>O</b> KHA-CARI	0 se ×
1 Level 1 Level 2 2 We Recommend We Suggest Ungr Ungraded	2A commend i.v. volume	<b>4</b> W	Ve rei	subtopic	GRADE	E KEYS NOMENCLATUR	E AND DESCRIPTION FOR RATING GUI		ime sotonic ium rather than n, in
EVIDENCE STRENGTH Grade A Grade B High Moderate	sion with either isotonic m chloride or sodium ionate solutions, rather than volume expansion, in its at increased risk for	so bi nı pi	icodiur 7 1 bicarb 2 batien Ung	Level 1 We Recomm Ungraded	Level 1 We Recommend Level 2 We Suggest	Most people in your situation would want the recommended course of action and only a small proportion would not. The majority if people in your situation would want the recommended course of action, but	Most patients should receive the recommended course of action. Different choices will be appropriate for different patients. Each [atient needes to hejt to arrive at a	The recommendation can be evaluated as a candidate for developing a policy or performance measure. The recommendation is likleyo require substantial debate and involvement of stakeholders vefore	sk for
Grade C Grade D Low Very Low		18	A	EVIDENCE STREM Grade A High Grade C	Ungraded		management decision consistent with her or his values and preferences. Ically, to provide guidance based on common sense piles include recommendations regarding monitoring ins are generally written as simple declarative stater 2 recommendations.		otonic um ather than 1, in 1k for
				Low	GRADE Grade A	EVIDENCE STRENGTH High Moderate	The true effect is likely to be close to the	s close to that of the estimate of the effect.	
					Grade B Grade C Grade D	Moderate Low Very Low	possibility that it is substantially differen The true effect may be substantially diffe The estimate of effect is very uncertain, a	it. erent from the estimate of the effect.	

### **KDIGO Clinical Practice Guidelines App**



#### Screenshots from the updated KDIGO app







### **FOLLOW KDIGO**



### www.kdigo.org







@goKDIGO

@goKDIGO

