“KDIGO Recommendations
Make the Argument”

How KDIGO publications and activities can help you improve local healthcare

David Wheeler
KDIGO Co Chair
The KDIGO Mission

Improving the care and outcomes of kidney disease patients worldwide through the development and implementation of clinical practice guidelines.
KDIGO’s Action Agenda

• To translate scientific advances into useful and practical clinical practice recommendations.
• To make these recommendations available to clinicians around the world.
• To develop 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.
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## MARKED JOURNAL LIST

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Source: Thompson Reuters
How are KDIGO Guidelines developed?

- Rigorous, transparent and unbiased process for identifying relevant clinical trials, observational studies, meta-analyses and systematic reviews.
- Expert workgroup work with evidence review team to develop and grade clinical practice recommendations for given clinical scenarios.
- Published in international clinical journals and online at www.kdigo.org
What can we achieve by Guideline dissemination?

– Help busy clinicians make the best clinical decisions
– Improve outcomes for your patients
– Increase your patients’ access to healthcare
– Streamline efficiency of healthcare delivery
Making best use of KDIGO Guidelines

With whom can you share KDIGO Guidelines?

– Colleagues
– Patients
– Health policy makers
– Payers
– Administrators
– Regulatory Authorities
Improving Healthcare through implementation of clinical science

- Best available evidence
- Clinical Practice Guideline
- Global Implementation
- Optimal Healthcare Delivery for every patient
- Best possible clinical outcome
Controversies Conferences

2015:
• Diabetes and 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

2009:
• 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
Controversies Conferences

- Bring together recognized experts to use collective judgment and knowledge questions:
  - “What Do We Know?”
  - “What Can We Do With What We Know?”
  - “What Don’t We Know?”

- Conference reports contain information that can be used by advocacy efforts.
Controversies conference reports

Arlene B. Chapman¹, Olivier Devuyst², Kai-Uwe Eckardt³, Ron T. Gansevoort⁴, Tess Harris⁵, Shigeo Horie⁶, Bertram L. Kasiské⁷, Dwight Odland⁸, York Pei⁹, Ronald D. Perrone¹⁰, Yves Pirson¹¹, Robert W. Schrier¹², Roser Torra¹³, Vicente E. Torres¹⁴, Terry Watnick¹⁵ and David C. Wheeler¹⁶ for Conference Participants¹⁷

Kidney Int. 2015 Mar 18. doi: 10.1038/ki.2015.59. [Epub ahead of print]
You Are Part of the KDIGO Global Network

900 Volunteers

Global problems – local solutions
KDIGO Global Network

The Global Network helps KDIGO to:

• Communicate with the kidney community and health policy makers around the world.
• Disseminate KDIGO guidelines and conference reports to policy makers.
• Incorporate education on KDIGO Guidelines into local symposia.
• Analyze local health care environments to learn how best to use KDIGO recommendations to influence policy decisions.
What is KDIGO doing next?

- New Guidelines
- Guideline updates
- Living Guidelines
- Comprehensive database of RCTs
- Controversies Conferences
- Computerised tools
- Implementation activities
New in 2015: Living Donor Guideline

Evidence Review Center for this guideline is the AHRQ Center at the University of Minnesota. This guideline is being written in collaboration with The Transplantation Society (TTS). It will cover the care, selection, risk assessment and prognosis of the living kidney donor.

Guideline Co-Chairs
Amit Garg  
Canada
Krista Lentine  
USA

Work Group Members
Josefina Alberu  
Mexico
Mohamed Bakr  
Egypt
Josep Campistol  
Spain
Cathy Garvey  
USA
Sandeep Gularia  
India
Andrew Levey  
USA
Philip K. T. Li  
Hong Kong
Jose Osmar Medina-Pestana  
Brazil
Dorry Segev  
USA
Faissal Shaheen  
Saudi Arabia
Sandra Taler  
USA
Kazunari Tanabe  
Japan
Linda Wright  
Canada
Martin Zeier  
Germany

TTS Representatives
Patricia Adams  
USA
Lorenzo Gallon  
USA
Coming Soon: Transplant Candidate Guideline


Guideline Co-Chairs
Greg Knoll  Steve J. Chadban
Canada        Australia

KDIGO will work again with The Transplantation Society (TTS) on this original guideline, continuing the collaborative relationship forged during development of the KDIGO Guideline on The Evaluation and Follow Up Care of Living Kidney Donors.
Published KDIGO Guidelines

- Hepatitis C  April 2008
- Mineral Bone Disorder  July 2009
- Transplant Recipient  Oct 2009

- Acute Kidney Injury  March 2012
- Glomerulonephritis  June 2012
- Anaemia  August 2012

- Blood Pressure in CKD  November 2012
- Diagnosis and Management of CKD  January 2013
- Lipid Management  November 2013
Guideline Updates in Progress

Co-chair: Mary Leonard, USA

Co-chair: Markus Ketteler, Germany

Co-chair: Michel Jadoul, Belgium

Co-chair: Paul Martin, USA
Diabetes & CKD Conference 2015

• Addressed issues pertinent to the management of diabetes in the context of CKD.
• Co-chairs: Vlado Perkovic, Australia & Per-Henrik Groop, Finland
• Date: February 5-8, 2015
• Location: Vancouver, Canada
The Rare Kidney Diseases Conference Series will focus on six rare diseases and culminate in a major Controversies Conference in early 2016. The series will frame new questions, explore treatment options, and help shape the global research agenda.

Rare Kidney Diseases Conference Series Topics:

- Autosomal Dominant Tubulointerstitial Kidney Disease (ADTKD)
- Autosomal Dominant Polycystic Kidney Disease (ADPKD)
- Nephropathic Cystinosis
- Fabry Disease
- Complement-Mediated Kidney Diseases
- Gitelman Syndrome
Common Elements in Uncommon Kidney Diseases

• This meeting will focus on clinical issues common to all rare kidney conditions such as referral, genetic counseling, centers of excellence, progression from pediatric to adult care, and registries.

• Co-Chairs: Olivier Devuyst, Switzerland & Lisa Guay-Woodford, USA

• Date: April 2016
Challenges in Clinical Trials in Nephrology

• Will bring together sponsors, scientists, trialists and patients to debate and discuss controversial issues related to trial design and the impact of trials on patient care.

• Co-chairs: Colin Baigent, England and John McMurray, Scotland

• Topics will include:
  • Reasons for the failures of RCTs in nephrology
  • Optimal clinical trial design
  • Relevant clinical endpoints
  • The role of trial consortia
  • Secondary analysis and meta-analysis trials
  • Innovations that reduce the cost of clinical trials
  • The use of registries to capture endpoints
Total Care in the transition from Stage 4-5

- Dataset assembled and analyzed by the CKD Prognosis
- Co-chairs: Brenda Hemmelgarn, Canada and Kai-Uwe Eckardt, Germany
- The conference will address why many patients in Stage 4 do not receive kidney replacement therapy.

- If they die, what do they die of?
- As they progress how are major co-morbidities managed?
- How often is supportive care used?
- How does care in Stage 4 determine outcomes in Stage 5?
- How are patients and families involved in care?
- How are the treatment needs of patients at both stages handled to maximize outcomes?
2015 Clinical Practice Conferences

February 9 – Mumbai, India
4th Annual Mumbai Nephrology Summit

February 10 – Calabar, Nigeria
27th Annual Nigerian Association of Nephrology
General Meeting and Scientific Conference

February 24-27 – Cairo, Egypt
33rd Annual ESNT Conference

June 5-7 – Nagoya, Japan
58th Japanese Society of Nephrology Meeting

September 15-19 – St. Petersburg, Russia
Renal Week 2015 in collaboration with the Russian Dialysis Society

September 17-19 – Daegu, Korea
7th Asia Pacific Chapter Meeting of International Society for Peritoneal Dialysis, in collaboration with the Korean Society of Nephrology
Expert Roundtables

A gathering of local, regional or international KDIGO experts. They discuss specific questions or topics presented by a KDIGO corporate partner.

Topics can include:

- Reimbursement policies and challenges
- Regulatory issues
- Regional practice patterns
- Physician education needs
- Value of KDIGO clinical recommendations
- Competitive environment

Expert Roundtables can be sponsored. They are sometimes held in conjunction with country or regional congresses, or can be stand alone events.
Now available for iPad & iPhone

Download the KDIGO Clinical Practice Guidelines for Kidney Disease app today. Access the complete library of KDIGO guidelines on your iPad & iPhone for free.
Summary

• KDIGO translates high quality evidence into clinical practice recommendations.
• Controversies conferences highlight gaps in knowledge and highlight areas where research is needed.
• KDIGO publications can be used to influence those who developed healthcare policy.
• KDIGO activities can provide opportunities to engage policy makers.
• KDIGO wants to learn from its implementation efforts to become more effective in its mission.
Examples of KDIGO Recommendations You Can Use to Influence Policy Decisions

• KDIGO Guideline recommendations on specific treatments:
  – Anemia, target Hbg levels
  – Bone and Mineral Disorders, the nomenclature itself
  – Lipids Management, use and keep patients on statins
  – Blood Pressure, lower levels improve CVD risk

• KDIGO Controversies Conference recommendations:
  – Stages of CKD, based on eGFR
  – “Heat Map” of risk of progression based on eGFR and Albuminuria to Creatinine Ratio
  – Appropriate iron therapy in anemia management
  – Diabetes with CKD means more than glucose management