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Our Journey to Overcome Chronic Kidney Disease

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The etiology and pathophysiology of kidney diseases have shifted significantly due to lifestyle changes and increased longevity.

Lifestyle changes and the rise in diabetes have led to a shift in the primary cause of dialysis initiation from chronic glomerulonephritis to diabetic nephropathy in 1998. During this period, the prevalence of nephrosclerosis has steadily increased. In 2021, diabetic nephropathy was the leading cause of dialysis (40.2%), followed by nephrosclerosis (18.2%), while chronic glomerulonephritis decreased to 14.2%. The continuous rise in nephrosclerosis is particularly noteworthy.

Renal function declines with age. Age-related kidney changes often resemble those of arteriosclerotic nephrosclerosis. The increase in nephrosclerosis is likely due to the accumulation of hypertension, obesity, and glucose abnormalities with aging. The average age of patients initiating dialysis is increasing, now at 71 years old. Despite advances in CKD management, the number of new dialysis patients is decreasing among women across all age groups but continues to rise in men aged 75 and older.

To prevent CKD onset and avoid dialysis in the elderly, early interventions in blood pressure, glucose, lipids, weight, smoking cessation, and exercise from middle age are essential. Since kidney disease is often asymptomatic, early detection is frequently delayed.

The screening for an eGFR below 60 or urinary protein (\pm), follow-up with a primary care physician is crucial, with potential specialist referral. Recently, the renal protective effects of SGLT2 inhibitors and mineralocorticoid receptor antagonists (MRA) have been demonstrated, offering new avenues for preventing CKD progression.

In recent years, the world has seen a rise in natural disasters, including earthquakes and other major catastrophes. These events underscore the critical need to enhance the resilience of kidney disease care systems during emergencies. Strengthening preparedness for disaster scenarios, such as securing access to dialysis and ensuring the availability of medical support, has become essential. This includes robust infection control measures, such as effective vaccination programs, to protect both patients and healthcare professionals during such crises. By building a resilient framework, we aim to provide continuous care to those affected by CKD, even under challenging conditions.

