

STATEMENT FROM KENYA RENAL ASSOCIATION ON WORLD KIDNEY DAY 2024

Today is the second Thursday of the month of March 2024. Kenya joins the international community in celebrating the importance of our kidneys in contributing to our health.

In today's world, kidney health is no longer a guarantee. Our kidneys face multiple challenges. Our diets are more westernized and more salty, meaning worse vascular health. Our lives are more sedentary. Our environments are more polluted. The climate is changing for the worse. We face new infectious diseases, while still dealing with conventional infections.

It is therefore small wonder that the proportion of people living with kidney disease is at an all time high: one out of ten human beings have kidney disease. Kidney diseases kill more and more human beings and kidney disease as a cause of death has progressively risen up the ranks of deadly diseases from number 19 2 decades ago, to number 8 a decade later, and now to number 5.

Treatment of kidney diseases also gobles up a significant proportion of health care budget. This proportion becomes bigger the more advanced the kidney disease such that management of kidney failure by haemodialysis cost Ksh 3.8b in 2023, almost doubling the amount spent 3 years earlier. If NHIF insurance cover is unavailable, then this costly disease consumes a significant portion of the household budget, resulting in catastrophic health spending, indebtedness and worsening poverty.

The remedy to alleviate this is to identify kidney disease early or better still to prevent it from occurring in the first place. Happily, the tools for identifying kidney disease are simple and well established. From a readily available blood pressure measurement to a simple urine test and a blood sugar test, these tools are affordable even at the very primary health care level of community health promoters.

On WKD, the Kenya Renal Association leads health care specialists, patients and others in celebrating the health of our kidneys. We use these simple tools to screen for kidney disease and to remind us that awareness as well as early identification is key.

This year's theme of WKD is Advancing equitable access to Care and Optimal medication practice. The theme resonates aptly with the challenges faced by this country. It poses to us certain questions regarding whether there is equitable access to kidney health services in this country.

Those of us a bit older in the field remember the dark days when out of pocket expenses incurred by a patient diagnosed with kidney failure often portended a slow death sentence, riddled with humiliating poverty. We therefore want to thank the successive managements of NHIF in sustaining a daring program of covering all dialysis sessions required by any of its contributors. Countless lives have been saved and prolonged. Mothers have had more quality time with their families and fathers have had their strengths restored to continue providing for their families. Children have gone back to school.

Lives have been prolonged long enough to enable kidney transplant to be done. The subsidizing on transplant costs has enable more availability of this important exit out of dialysis. More transplant centers have opened up meaning better access to this service. The increase in kidney healthcare workers has occurred thanks to different institutions offering courses on kidney medicine. At the forefront of this is the East Africa Kidney Institute that keeps churning out well trained kidney doctors and nurses year after year. We therefore applaud these important efforts put forth by the government through the Ministry of Health.

A few regrets, however, exist in this long journey in the pursuit for more equitable access to kidney health. Firstly, peritoneal dialysis, a home-based cheaper option for dialysis was not considered, and therefore was not covered by NHIF. Secondly, access to haemodialysis was curtailed by the withdrawal of cover for dialysis catheter insertion. Pre-transplant evaluation as well as post-transplant medication and follow up have been great impediments towards enabling equitable access to kidney transplantation. The biggest blow has come with the recent failure of the national insurer to reimburse claims in a timely and complete manner. Huge pending bills have restricted cash flows to hospitals, immensely affecting many functions critical to the correct management of kidney disease patients. Most affected are dialysis units whose only stream of revenue stems from NHIF. As a result, a number of dialysis units have had to completely shut down and many are surviving on their knees, pleading for patience from suppliers while curtailing aspects of patient health care like regular administration of medication and evaluation by laboratory tests. Already two large hospital associations, RUPHA and KAPH, have issued notices that from next week they will decline to offer services pegged on NHIF reimbursements. For most patients this leaves them in a difficult situation. For dialysis patients, in particular, it is a death knoll, that should ring loud alarm bells in our collective conscience and remind us not to allow things to slide back to how they were a decade ago.

On this day when we emphasize on equitable access to kidney health for all, we want to urge the government not to let its citizens down. Universal Health Coverage which is a key cog in the government's agenda requires proper health financing as a key pillar. We warn those in the Treasury, in the Ministry of Health and in SHA that the lives of these dialysis patients are in their hands. These patients have faithfully paid the monthly premium demanded from them - why should they be denied the health service due to them?

On this day when a doctors' strike begins to materialize, we as the nephrology community urge for soberness and wisdom in how health is managed. We advocate for better leadership and governance, these being key pillars that drive reforms in healthcare. After all, a healthy nation will have healthy kidneys. This year's theme therefore still remains very appropriate: Kidney Health for All: Advancing equitable access to Care and and Optimal medication practice. May we be blessed to achieve this vision.

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