



DIABETES UK AND KIDNEY RESEARCH UK JOINT STATEMENT

A third of patients living with diabetes will go on to develop kidney disease. **The impact is debilitating and life changing.** Every week in the UK, six people die whilst waiting for a kidney transplant (1). Early diagnosis and appropriate treatment could prevent people from reaching the point of kidney failure (also referred to End Stage Kidney Disease – ESKD).

By 2033, the number of people with later stage chronic kidney disease (CKD), stages 3-5, is projected to reach 3.9 million. This is mainly driven by an ageing population, as well as risk factors such as diabetes, hypertension and cardiovascular disease and other important factors such as health and economic inequalities (2).

In 2022, there were nearly 520,000 people living with CKD as complication of diabetes (3). Diabetes is the single most common cause of end-stage kidney disease in the UK and has a huge impact on quality of life (4). For patients needing dialysis or a transplant in 2023, 30.6% of cases were a result of diabetic kidney disease (5).

Addressing health inequalities

Both Diabetes UK and Kidney Research UK have recently launched reports to review and tackle health inequalities.

The <u>Diabetes UK tackling inequalities report</u> highlights that people living in the most deprived areas are more likely to develop diabetes related complications, including those which are kidney-related, leading to higher rates of dialysis or kidney transplants (6). <u>Kidney Research UK's Time To Act: A New Review of Kidney Health Inequalities</u> report also identifies that South Asian adults develop kidney disease younger than white adults (7).

Although new management strategies are now available to prevent and slow the progression of CKD, we still face a huge challenge ensuring that not only are there effective treatments for everyone with diabetes who is at risk of kidney disease, but that everyone has fair and timely access to these interventions.

We're working together to make a difference.

There is limited funding for kidney research, with only 1% of the UK non-commercial research spend invested in this general area and much less for diabetic kidney disease (DKD) specifically (8).





As two leading medical research charities, Diabetes UK and Kidney Research UK are uniquely placed to make a difference to people at risk of and living with kidney disease. Both charities have established Clinical Study Groups which bring together people living with diabetes and/or kidney disease, scientists and healthcare professionals to identify research gaps. We are also collaborating to stand up for patients, to help ensure diabetes and kidney disease are prioritised by the government and new research outcomes reach patients as soon as possible.

In 2024, both charities, alongside Breakthrough T1D, held a research priority setting workshop to establish key priorities for DKD; the findings have now been published in <u>Diabetic Medicine</u>. By collating insights from patients, six thematic areas which would benefit from increased research were identified: **understanding the causes of DKD**, **improving diagnosis**, **prevention of DKD**, **improving care for people with DKD**, **supporting self-management and addressing health inequalities (8)**.

We've already invested in diabetic kidney disease research. Between 2020 and 2025 Kidney Research UK invested over £1.5m and Diabetes UK £800,000 into diabetic kidney disease, with projects spanning improving understanding the underlying risk factors and biology to exploring therapeutic targets to protect the kidneys from damage caused by diabetes. However, there is still more work to be done.

Diabetes UK and Kidney Research UK are keen to work towards a future free from DKD through funding research into the relationship between kidney disease and diabetes. We are open to co-funding research projects in these areas and would encourage researchers to notify both charities in advance of applying for grant funding.

Patient <u>Daniel Newman</u> said: "Managing chronic kidney disease alongside diabetes has been a complex journey. It is vital to establish links with underserved communities to empower individuals like me to advocate for coordinated care and shared decision-making. Personalised treatment approaches that consider the diverse subtypes of kidney disease and embrace multi-ethnic perspectives are essential for meaningful progress."

References:

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- (7) Kidney Research UK (2024) Time To Act: A New Review of Kidney Health Inequalities. Available at: https://www.kidneyresearchuk.org/wp-content/uploads/2024/07/FINAL-Accessible-full-report-Academic Report V7-23R02.pdf
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