





Ensuring optimal care for people with kidney diseases during the COVID-19 pandemic

The COVID-19 pandemic presents numerous challenges to health care systems around the world. Many initiatives focused on containing virus transmission may affect ongoing care of people with preexisting health conditions, especially in resource-constrained settings.

Most people with kidney failure need to receive treatment at dialysis centers every 2-3 days (others dialyze at home). Strict lockdowns impose limits on public and private transport that normally support travel for people who often live at significant distances from treatment centers.

In addition, interruptions in supply chains, and increased demand, have led to shortages of personal protective equipment for dialysis center staff, placing these health care workers at undue risk. Shortages of drugs and consumables necessary for dialysis treatment also create obstacles to care for people with kidney failure.

Staff placed in quarantine when a patient or healthcare worker has the infection may limit the ability of some centers to provide dialysis. Many facilities are struggling to provide an adequate health workforce, and the burden of finding an alternative facility often falls on patients.

Preliminary data have shown that about 20-30% of patients hospitalized with COVID-19 develop kidney failure, leading to a surge in requirement for dialysis. Yet regular dialysis services have been interrupted to prepare hospitals to provide care to COVID-19 patients.

"Hospitals need to be prepared to augment dialysis capacity in order to provide effective care to patients with COVID-19 and stringent measures should be adopted to protect the frail dialysis population from COVID-19 infection," said Professor Carmine Zoccali, President of the European Renal Association-European Dialysis and Transplant Association.

"Interruption of this life-saving treatment is a certain death sentence for patients on maintenance dialysis. Making them collateral damage to this pandemic would be a tragedy," observed Professor Anupam Agarwal, President of the American Society of Nephrology.

"The COVID-19 pandemic is exposing the deficiencies in care delivery, especially in countries with weak health systems. The global healthcare community and policymakers should anticipate and address the unique needs of different patient groups such as those with kidney failure," said Professor Vivekanand Jha, President of the International Society of Nephrology.

On behalf of our three societies, we ask that government agencies overseeing dialysis centers in the developing world ensure that they provide support to staff, nephrologists, and other health professionals delivering life-saving dialysis treatments to these vulnerable patients. At the same time, government agencies must make rapid testing capabilities and personal protective equipment an utmost priority.

Prof. Anupam Agarwal ASN President

Prof. Carmine Zoccali ERA-EDTA President

Prof. Vivekanand Jha ISN President

Facts: <u>850 million people have kidney diseases</u>. Of those, about 5 million people experience kidney failure. These people require dialysis or a kidney transplant to remain alive.

The ERA-EDTA collects and processes personal information to provide you with details regarding the Association and its activities. The information is used for accounting and commercial purposes by ERA-EDTA and/or Euromeetings s.r.l. in compliance with the EU General Data Protection Regulation (2016/679).