Adverse event reporting information and relevant Prescribing Information can be accessed via a QR code and link at the end of the document. This material is produced and funded by Bayer plc & is intended for UK healthcare professionals & relevant decision makers only.

Partnerships with Bayer



TARGETING CKD

In England, RRT has cost the NHS ~£780m (2009-10).^{1'} Commissioning responsibilities for RRT now lie with Integrated Care Boards.²

QOF recognises that HCPs must establish and maintain a register of patients with CKD (G3a to G5).³

Early identification of CKD

Early identification of CKD may allow implementation of measures to reduce or prevent progression of renal impairment and to help manage associated risks such as development of CVD.^{3,4} Early intervention may reduce the burden on patients, their families and healthcare costs associated with more advanced CKD and may limit mortality.⁵

Identifying CKD

- Improving patient access to primary care services is currently a key priority
- The 2023/2024 ACC-08 IIF indicator incentivises PCNs to increase the number of patients who are given an appointment within 2 weeks of booking⁶
- This offers an opportunity to make clinically valuable intervention with patients at-risk of CKD

Improving practice related to CKD

 The National CKD audit 2017 included recommendations for GPs to improve on GFR and ACR testing for patients at high risk of CKD and to improve coding for patients with CKD⁵

Bayer and the NHS

- Bayer is committed to collaborating and working in partnership with the NHS, to improve outcomes for patients and the healthcare system
- We can support the NHS to improve detection and management of CKD through our joint working projects which include:
 - o Quality improvement
 - o Provision and interpretation of QOF data
- o Optimising capacity to support with workload

Classifying CKD

- CKD is classified according to cause, GFR category, and albuminuria category
- Knowledge of both GFR and ACR allow the prognosis of CKD and risk of adverse outcomes to be determined⁷
- Increased ACR and decreased GFR are linked with an increased risk of adverse outcomes⁸

			Persistent albuminuria categories Description and range			
Prognosis of CKD by GFR and Albuminuria Categories: KDIGO 2012			A1	A2	A3	
			Normal to mildly increased	Moderately increased	Severely increased	
			<3 mg/mmol	3-30 mg/mmol	>30 mg/mmc	
categories (ml/min/ 1.73 m²) Description and range	G1	Normal or high	≥90			
	G2	Mildly decreased	60-89			
	G3a	Mildly to moderately decreased	45-59			
	G3b	Moderately to severely decreased	30-44			
	G4	Severely decreased	15-29			
GFR	G5	Kidney failure	<15			

Figure adapted from: KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. Kidney Int. Suppl. 2013.⁷

*Through direct and indirect costs

Abbreviations ACR, albumin-to-creatinine ratio; CKD, chronic kidney disease; CVD, cardiovascular disease; GFR, glomerular filtration rate; GPs, general practitioners; HCPs, healthcare professionals; IIF, Investment and Impact Fund; NHS, National Health Service; PCNs, primary care networks; QOF, Quality and Outcomes Framework; RRT, renal replacement therapy.

References
1. NHS Kidney Care. Chronic Kidney Disease in England: The Human and Financial Cost. Available at: https://www.england.nhs.uk/improvement-hub/wp-content/uploads/sites/44/2017/11/Chronic-Kidney-Disease-in-

1. NHS Nichey Care. Chronic Nichey Disease in England: The Human and Financial Cost. Available at: https://www.england.nhs.uk/improvement-hub/wp-content/upioads/sites/44/2011/11/chronic-kidney-Disease-inf-England-The-Human-and-Financial-Cost.pdf. Accessed December 2024; 2. NHS. Roadmap for integrating specialised services within Integrated Care Systems. May 2022. Available at: https://www.england.nhs.uk/wp-content/ uploads/2022/05/PAR1440-specialised-commissioning-roadmap-addendum-may-2022.pdf. Accessed December 2024; 3. NHS England. Quality and outcomes framework guidance for 2024/25. Available at: https:// www.england.nhs.uk/publication/quality-and-outcomes-framework-guidance-for-2024-25/ Accessed December 2024; 3. NHS England. CVDPREVENT. Available at: https://www.england.nhs.uk/ourwork/clinical-policy/cvd/ cvdprevent/. Accessed December 2024; 5. HQIP. National Chronic Kidney Disease Audit: National Report (Part 1) January 2017. Available at: https://www.lengland.nhs.uk/wp-content/uploads/2023/03/PRN00157-ncdes-investment and-impact-fund-2023-24-guidance.pdf. Accessed December 2024; 7. KDIGO. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. Kidney Int. Suppl. 2013;3(1): 1-150; 8. NICE. Chronic kidney disease: assessment and management (NG203). Available at: https://www.england.accessed December 2024; NICE. Chronic kidney disease: assessment and management (NG203). Available at: https://www.england.accessed December 2024; NICE. Chronic kidney disease: assessment and management (NG203). Available at: https://www.england.accessed December 2024; NICE. Chronic kidney disease: assessment and management (NG203). Available at: https://www.england.accessed December 2024; NICE. Chronic kidney disease: assessment and management (NG203). Available at: https://www.nice.org.uk/guidance/ng203. Accessed December 2024.

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