

A deep dive in the calls to action

● 01



Recognise chronic and rare kidney diseases as public health priorities.

RKD must be formally integrated into EU and national health strategies to unlock coordinated investment, improve visibility, and drive earlier intervention.



1.1 Include CKD and RKDs in the broader EU and national cardiovascular policies.



1.2 Mandate integrated multidisciplinary care models within national health strategies ensuring collaboration between primary care, cardio-renal-metabolic, and other relevant specialities to optimise diagnosis and outcomes.



1.3 Implement comprehensive, standardised collection of clinical data into national and European-wide registries – ensuring disease progression from early stages and disease outcomes for all kidney diseases (including rare kidney diseases) are covered – to strengthen evidence generation and inform policy decisions.

● 02



Streamline investment of financial and healthcare resources towards early detection and faster referral to prevent and slow disease progression.

Systematic kidney health checks and clear referral pathways are essential to identify disease earlier, prevent irreversible damage, and reduce the need for dialysis and transplantation.



2.1 Regular kidney health checks based on KDIGO-recommended creatinine and uACR screening to be included in the EU protocol for cardiovascular health checks.



2.2 Include screening for at-risk populations (family history of kidney disease, CKD of unknown aetiology, early onset CKD) before the age of 35 in national health insurance coverage. Strengthen the reference centre model in each Member State, and implement an early referral system to nephrologists upon identification of abnormal kidney markers.