

A BRIEF OF
CHRONIC
KIDNEY DISEASE,
HYPERTENSION AND DIABETES
MELLITUS SITUATION
IN COLOMBIA **2022**



Fondo Colombiano de
Enfermedades de Alto Costo

**A brief of chronic kidney disease, hypertension and diabetes mellitus
situation in Colombia 2022**



CUENTA DE ALTO COSTO
Fondo Colombiano de Enfermedades de Alto Costo

A brief of chronic kidney disease, hypertension and diabetes mellitus situation in Colombia 2022

Fondo Colombiano de Enfermedades de Alto Costo
Cuenta de Alto Costo (CAC)

Annual periodicity

Bogotá, C. D., Colombia, september 2023

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Suggested citation: Cuenta de Alto Costo (CAC), Fondo Colombiano de Enfermedades de Alto Costo.
A brief of chronic kidney disease, hypertension and diabetes mellitus situation in Colombia 2022;
Bogotá, C. D. 2023.

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The full textbook in spanish of the situation of chronic kidney disease in Colombia is available [at this link](#).



Characteristics of reported population



Chapter 1

at a glance

Characteristics of reported population

Period: July 1st, 2021 to June 30 th, 2022.

5,346,278

people diagnosed with HTN, DM or CKD were analyzed.



60.31% (n= 3,224,194) were women and the mean age was 63.67 years (SD 14.57).



Compared to 2021, the total number of prevalent cases of HTN and DM increased by 0.27% and 1.45%, respectively.

Prevalent CKD cases decreased by

11.14%

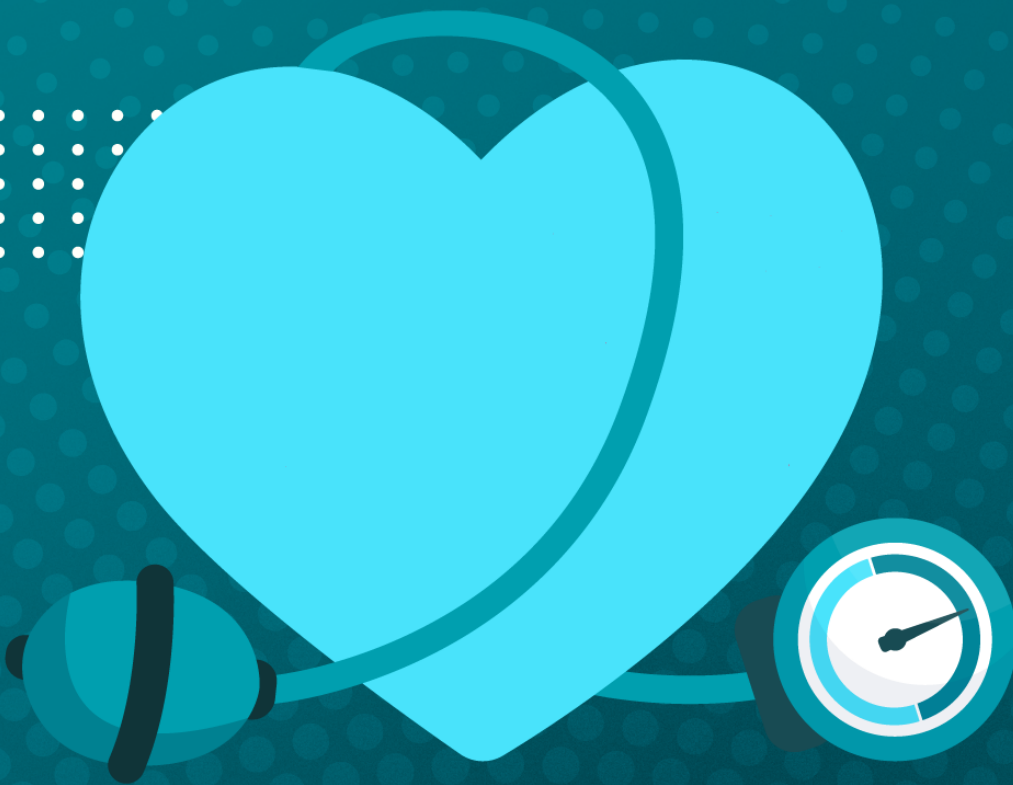
compared to the previous period.

HTN: hypertension.
DM: diabetes mellitus.
CKD: chronic kidney disease.
SD: standard deviation.





Population with **hypertension**



Chapter 2

at a glance


Population with hypertension


Period: July 1st, 2021 to June 30 th, 2022.

453,337 new cases

of HTN were reported,

9.74% less than in 2021. The crude incidence rate was 8.33 cases per 1,000 inhabitants.


 59.47% of the new cases were women and the mean age was 59.65 years (SD 14.57).


 The Caribbean region and the third-payer insurance reported the highest SIR.


4,903,616

people with HTN


were analyzed. The crude prevalence rate was 9.55 cases per 100 inhabitants.


 The Central region reported the highest number of people with HTN (n= 1,390,223) and Bogotá, C. D., had the highest SPR with 10.70 cases per 100 inhabitants.

 The SPR of both insurance schemes decreased, although the third-payer (11.09) remains higher than the state (6.73).

 The crude mortality rate was 251.39 all-cause deaths per 100,000 inhabitants.

 54.64% of all deaths occurred in people aged 80 or more.

 The Central region had the highest SMR with 276.84 all-cause deaths per 100,000 inhabitants.

 The SMR for the third-payer and state insurances were 240.68 and 202.59, respectively.



HTN: hypertension.
SD: standard deviation.
SIR: standardized incidence rate.
SPR: standardized prevalence rate.
SMR: standardized mortality rate.



Population with **diabetes mellitus**




Chapter 3


at a glance

Population with diabetes mellitus

Period: July 1st, 2021 to June 30 th, 2022.


159,149 new cases of DM were reported, 9.97% fewer than in 2021.


 59.15% of the new cases of DM were women, the mean age was 60.07 years (SD 14.05).


 The Caribbean region and Bogotá, C. D., reported the highest SIR with 4.45 and 3.76 cases per 1,000 inhabitants, respectively.


1,599,368 cases of DM were reported, the crude prevalence rate was 3.12 cases per 100 inhabitants.

 The SPR was 3.98 and 2.17 cases for the third-payer and the state insurances, respectively.

 46,348 people with DM passed away during the period, 25,109 were women.

 The national crude mortality rate was 90.30 all-cause deaths per 100,000 inhabitants, 22.29% lower than the previous period.

 Out of all the reported deaths, 26.10% happened in women and 18.19% in men aged 80 or more.

 The SMR of the third-payer insurance was higher than the state insurance, with 86.99 all-cause deaths per 100,000 insured.



DM: diabetes mellitus.
SD: standard deviation.
SIR: standardized incidence rate.
SPR: standardized prevalence rate.
SMR: standardized mortality rate.



Population with chronic kidney disease



Chapter 4

at a glance







Population with chronic kidney disease

Period: July 1st, 2021 to June 30 th, 2022.

114,745 new cases

with CKD were reported,




39,943 fewer than in 2021.

-  The CKD crude prevalence rate was 1.54 cases per 100 inhabitants.
-  In 39.72% of the new cases, the stage of CKD was unknown.
-  In 24.30% of the prevalent CKD cases the etiology was vascular renal disease and 20.18% by DM.
-  73.90% of the prevalent CKD cases were aged 60 years or higher, and 58.16% were women.
-  Bogotá, C. D., and the Pacific region had the highest SPR.
-  The third-payer insurance had a higher SPR than the state insurance, with 1.90 cases per 100 insured.

33.90% of the prevalent cases

were stratified in stages 1-2,

while 4.54% were stage 5.

-  30,622 all-cause deaths were reported in people with CKD, the mean age was 78.55 years (SD 12.98).
-  The all-cause mortality rate in people with CKD was 59.66 deaths per 100,000 inhabitants, 19.85% lower than 2021.
-  Most deaths, both in men and women, occurred in patients in stage 3, with 31.13% and 31.19%, respectively.



CKD: chronic kidney disease.
DM: diabetes mellitus.
SPR: standardized prevalence rate.
SD: standard deviation.

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Population with **chronic kidney disease** by risk groups

Chapter 5

at a glance

Population with chronic kidney disease by risk groups

Period: July 1st, 2021 to June 30 th, 2022.

Among dead cases,

28.40% did not have disease

staging during this period,

this proportion was higher in people with HTN as the only comorbidity.



The proportion of cases with DM and/or HTN who weren't screened for CKD was 17.76% lower, compared to the previous period.



The CKD incidence and mortality rates were higher in the state insurance, on the other hand, the prevalence rate had mixed results depending on the risk group.



53.03% of prevalent cases with DM without HTN were in stages 1 and 2. In people with HTN, the majority were classified as stage 3.

Most people with HTN and DM were

reported under study for

CKD but without diagnostic confirmation (38.81%).



HTN: hypertension.
DM: diabetes mellitus.
CKD: chronic kidney disease.



Population with stage 5 chronic kidney disease



Chapter 6

at a glance

Population with stage 5 chronic kidney disease

Period: July 1st, 2021 to June 30 th, 2022.

4,131 patients were reported as new onset ESRD cases, 9.53% fewer than 2021.



The Caribbean region and Bogotá, C. D., had the highest SIR in the country.



The SIR was similar for the third-payer and state insurances, with 8.91 cases per 100,000 insured.



The crude prevalence rate of ESRD was 69.87 cases per 100,000 inhabitants.



ESRD prevalence was 12.53% and 16.17% lower for women and men, respectively.



The mean age of the prevalent ESRD cases was 59.92 years (SD 16.91).

5,031 all-cause deaths

were reported in people with ESRD.



Compared to 2021, the crude mortality rate reduced in 4.75 deaths per 100,000 inhabitants.



Bogotá, C. D., and the Pacific region had the highest SMR.



Among the patients with ESRD that passed away, 23.00% was caused by cardiovascular disease and 4.19% by CKD.



ESRD: end stage renal disease.
SIR: standardized incidence rate.
SD: standard deviation.
SMR: standardized mortality rate.
CKD: chronic kidney disease.



Risk management indicators







Chapter 7

at a glance

Risk management indicators

Period: July 1st, 2021 to June 30 th, 2022.

76.42% of the population enrolled in third-payer insurance had adequate blood pressure control, in the state insurance population 61.47% met the goal.

-  49.20% of the total cohort population had measurements of 24-hour albuminuria or urine albumin-creatinine ratio.
-  69.52% of the total cohort population remained without significant loss of renal function measured by CKD-EPI equation.
-  The blood pressure control, glycemic control (HbA1c < 7%) in people with DM, LDL < 100 mg/dl and both non-significant loss of renal function indicators achieved the goals set for the HTN and DM population.
-  The HbA1c, LDL and preserved renal function goals were met in all CKD populations, regardless of the stage.

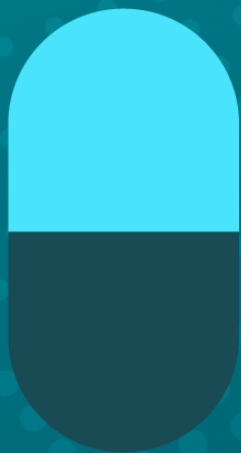
The **albuminuria** measurement goal wasn't achieved in any of the populations analyzed.



CKD-EPI: chronic kidney disease epidemiology collaboration.
HbA1c: glycosylated hemoglobin.
DM: diabetes mellitus.
LDL: low density lipoprotein.
HTN: hypertension.
CKD: chronic kidney disease.



Population with renal replacement therapy



Chapter 8

at a glance

Population with renal replacement therapy

Period: July 1st, 2021 to June 30 th, 2022.

3,896 new cases of RRT were reported.

45.74% had HTN,

1.75% had DM and 43.33% had both comorbidities.



The RRT prevalence was 77.46 cases per 100,000 inhabitants. Bogotá, C. D., and the Pacific region had the highest prevalence rates.



Hemodialysis was the most frequent RRT (56.80%), non-dialytic management increased in 51.38%, compared to 2021.



4,348 deaths were reported in people in RRT. The mean age was 65.86 years (SD 14.55) and 59.64% were men.



The most frequent vascular access for hemodialysis was the fistula (70.49%) followed by the central venous catheter (28.59%).



The Kt/V measure, hemoglobin, albumin and phosphorus risk management indicators achieved the goals set in both hemodialysis and peritoneal dialysis patients.

590 new cases of renal transplant were reported, this accounts for a crude incidence of

11.49 cases per million inhabitants.



The most frequent immunosuppressant agents used in patients with kidney transplant were mycophenolate (86.65%) and tacrolimus (72.66%).



RRT: renal replacement therapy.
HTN: hypertension.
DM: diabetes mellitus.
SD: standard deviation.



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