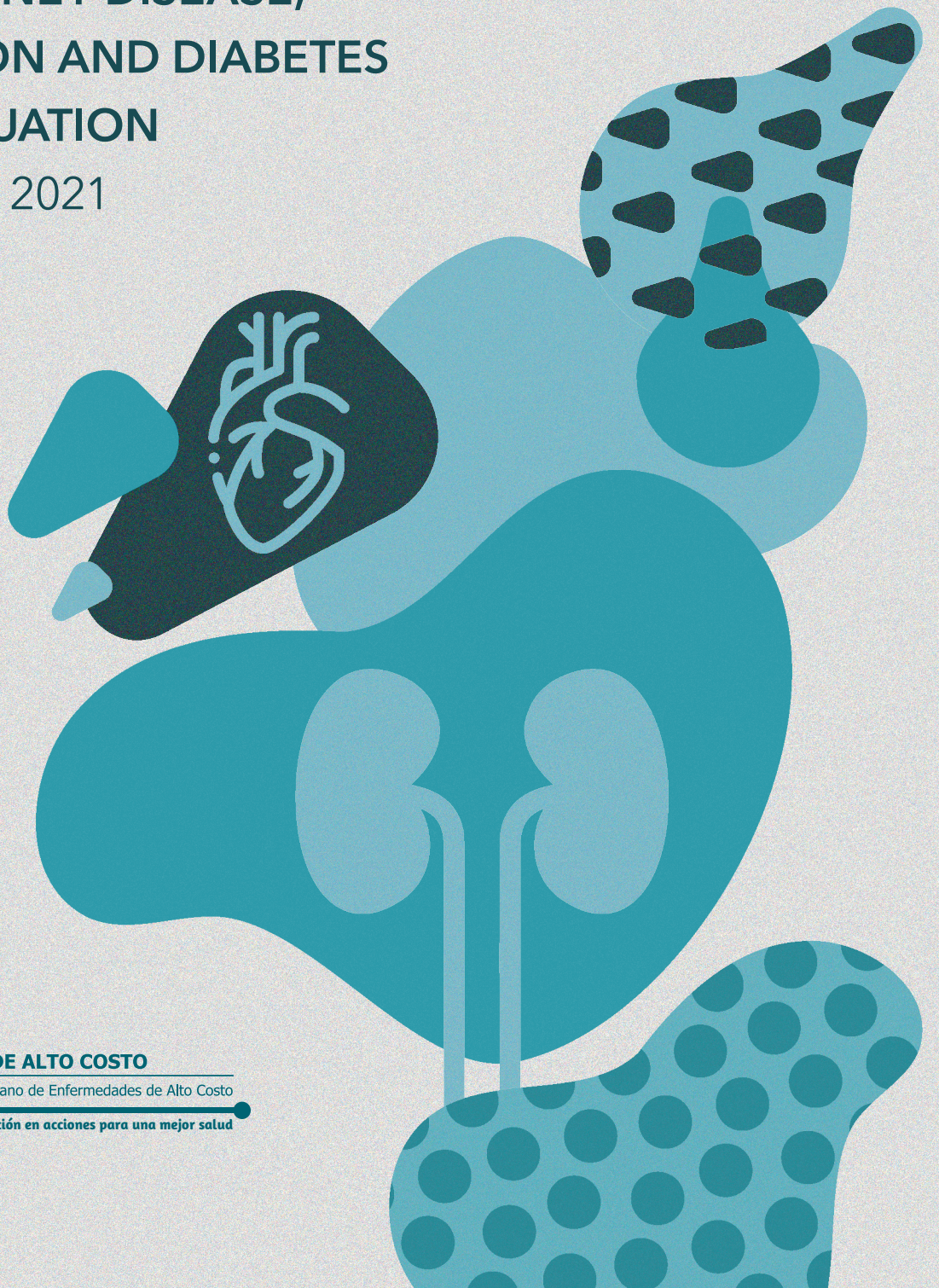
A BRIEF OF

CHRONIC KIDNEY DISEASE, HYPERTENSION AND DIABETES MELLITUS SITUATION

IN COLOMBIA 2021



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A brief of Chronic Kidney Disease, Hypertension and Diabetes Mellitus situation in Colombia 2021





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A brief of Chronic Kidney Disease, Hypertension and Diabetes Mellitus situation in Colombia 2021

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

Annual periodicity

Bogotá, C. D., Colombia, december 2022

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The full textbook in Spanish of the situation of Chronic Kidney Disease, Hypertension and Diabetes Mellitus in Colombia is available HERE

1. Characteristics of reported population

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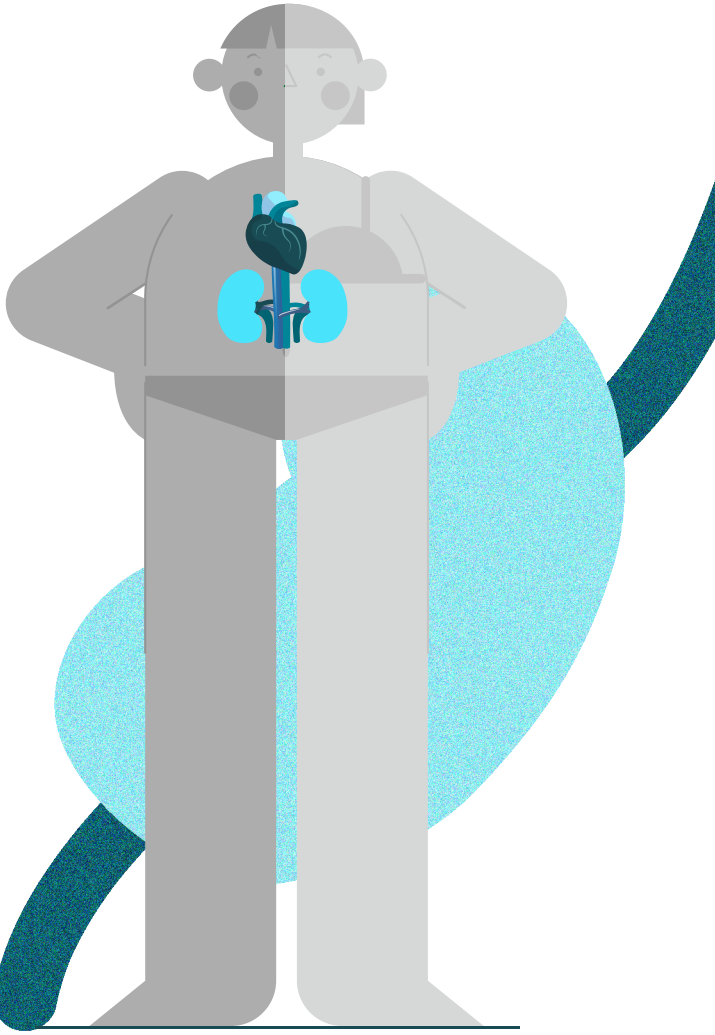
1 Chapter

Characteristics of reported population

Abstract

Period: July 1, 2020 to June 30, 2021.

5,347,829
people diagnosed
with HTN, DM or CKD were analyzed.



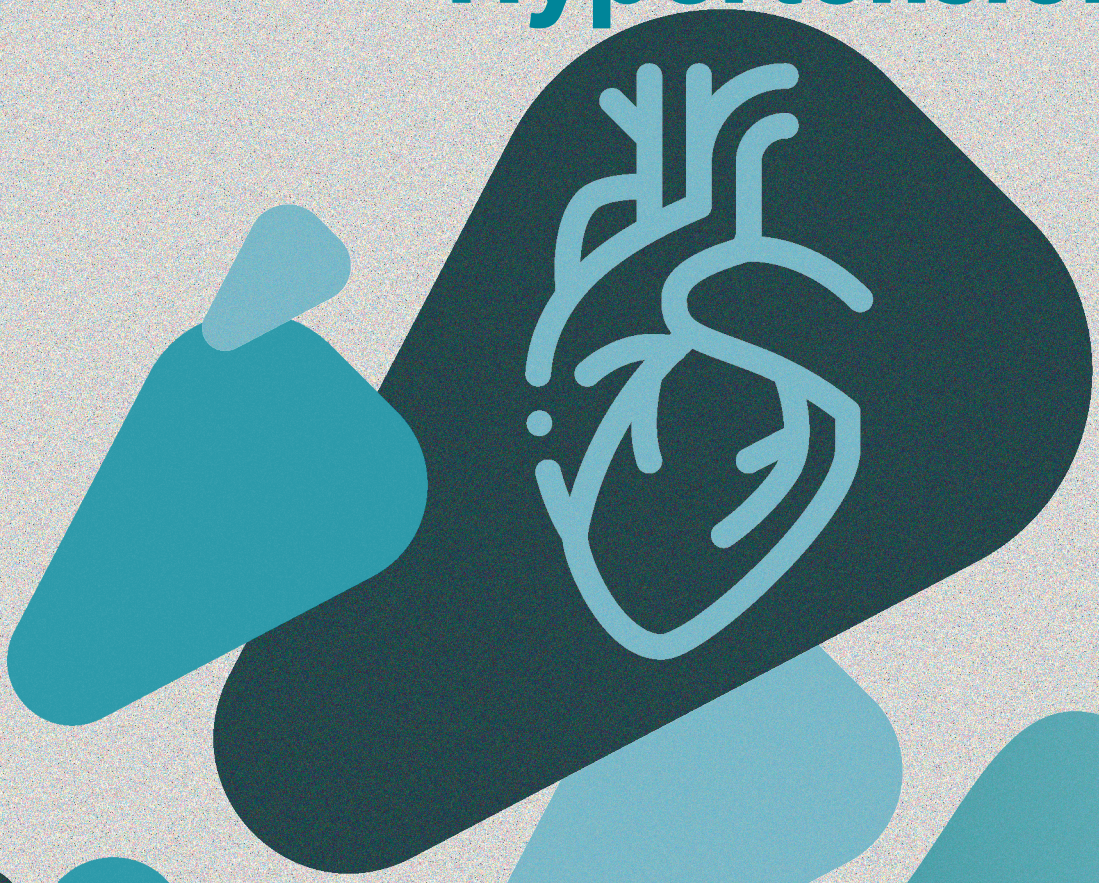
At the cut off period 4,822,819 were alive and active (90.18%).

Mean age of cases in the registry was 63.69 years (SD 14.57).

Prevalent cases of
CKD increased
by 4.61%, beating the downward trend presented since 2019.

HTN: Hypertension.
DM: Diabetes mellitus.
CKD: Chronic kidney disease.
SD: Standard deviation.

2. Population with Hypertension



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2 Chapter

Population with Hypertension

Abstract

Period: July 1, 2020 to June 30, 2021.

413,091 new cases of HTN were reported, 0.75% less than in 2020.

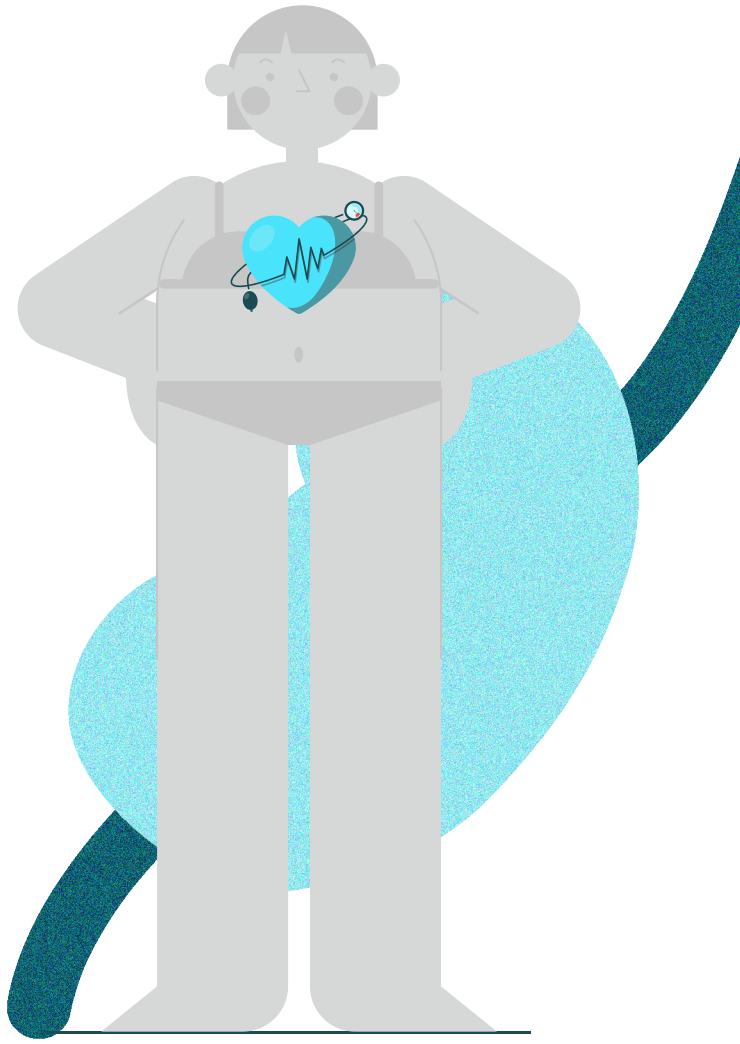
62.06% of HTN new cases were between 50 and 74 years.

There were analyzed 4,890,174 people with HTN, corresponding to a crude prevalence of 9.64 cases per 100 inhabitants.

Third-payer insurance raised its SP compared to the previous period (SP= 11.68). This tendency was also observed for state insurance (SP = 8.28).

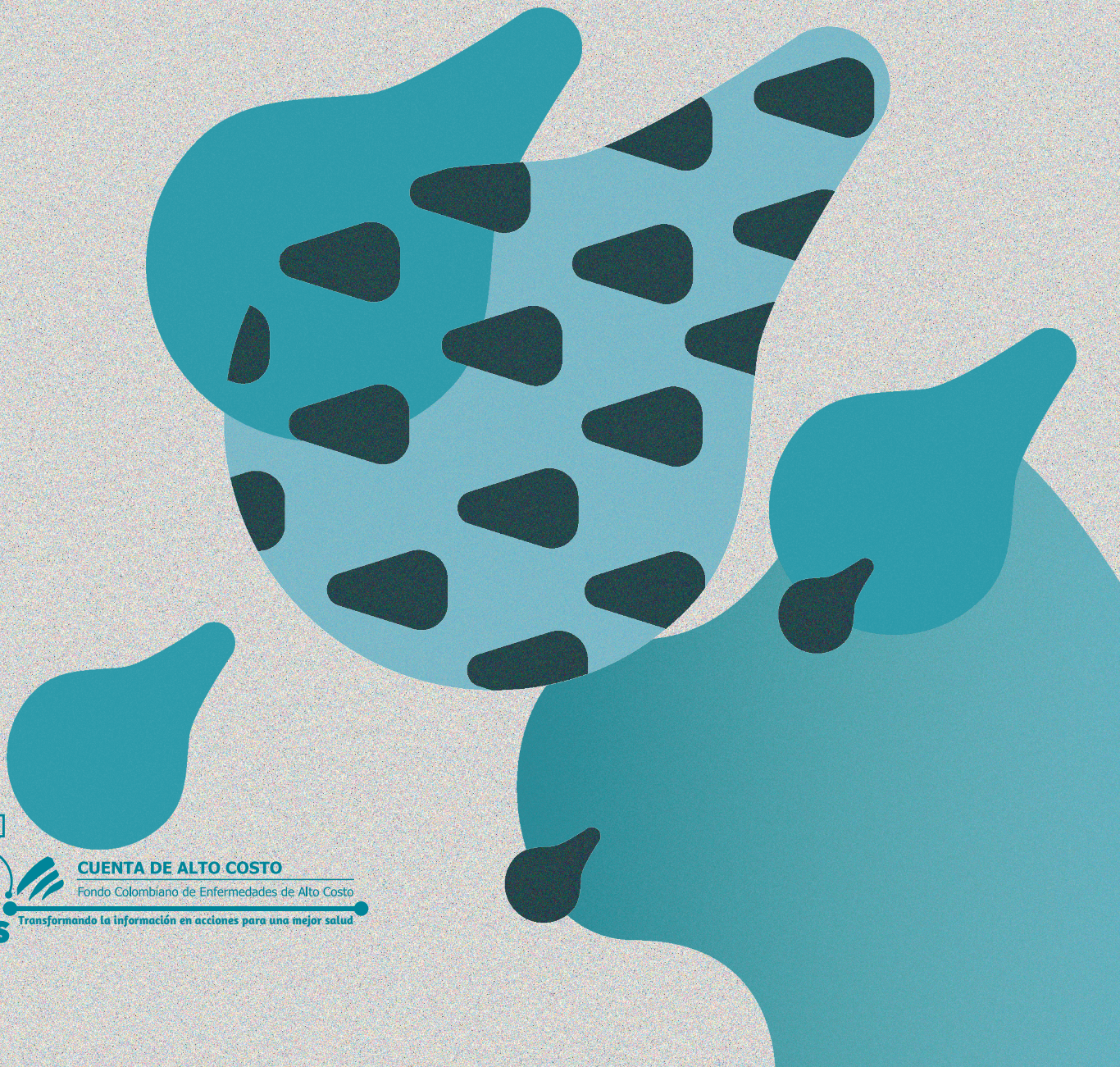
Crude mortality rate was 312.74 deaths per 100,000 inhabitants, which is the highest estimate in the last periods.

Bogotá C. D., reported the highest SM (393.76 all-cause deaths per 100,000 inhabitants), while the Central region had the greatest frequency of death cases (n= 44,202).



HTN: Hypertension.
SP: Standardized prevalence.
SMR: Standardized mortality rate.

3. Population with Diabetes Mellitus



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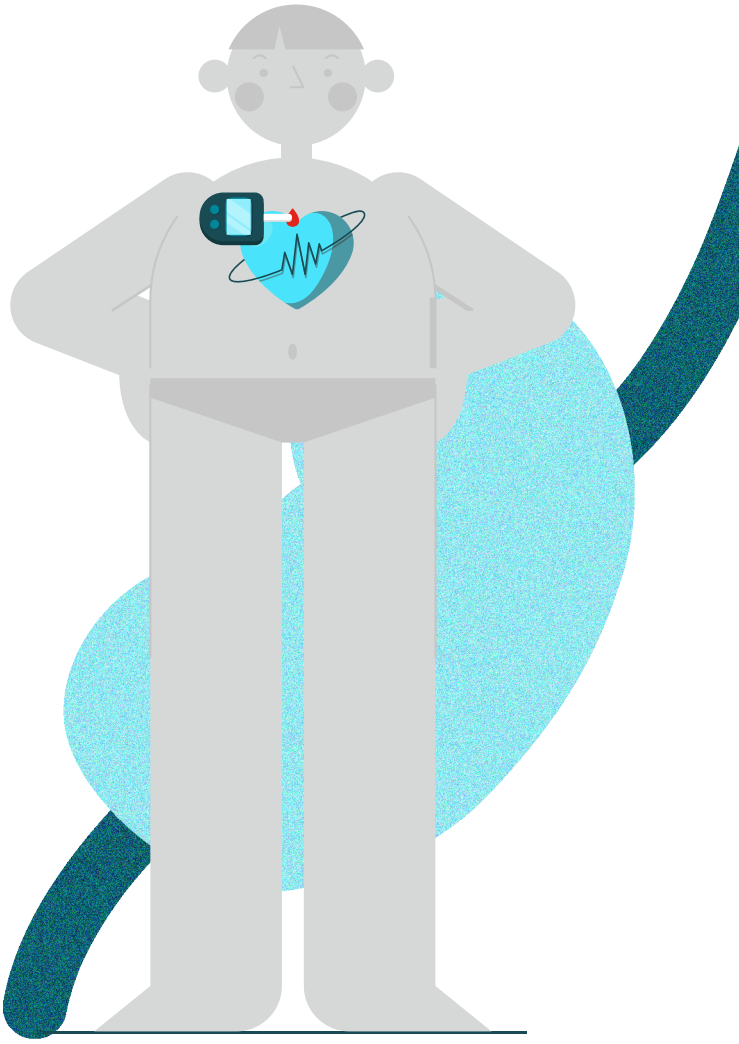
3 Chapter

Population with Diabetes Mellitus

Abstract

Period: July 1, 2020 to June 30, 2021.

176,766 new cases of DM were reported, 4.73% more than the previous period.



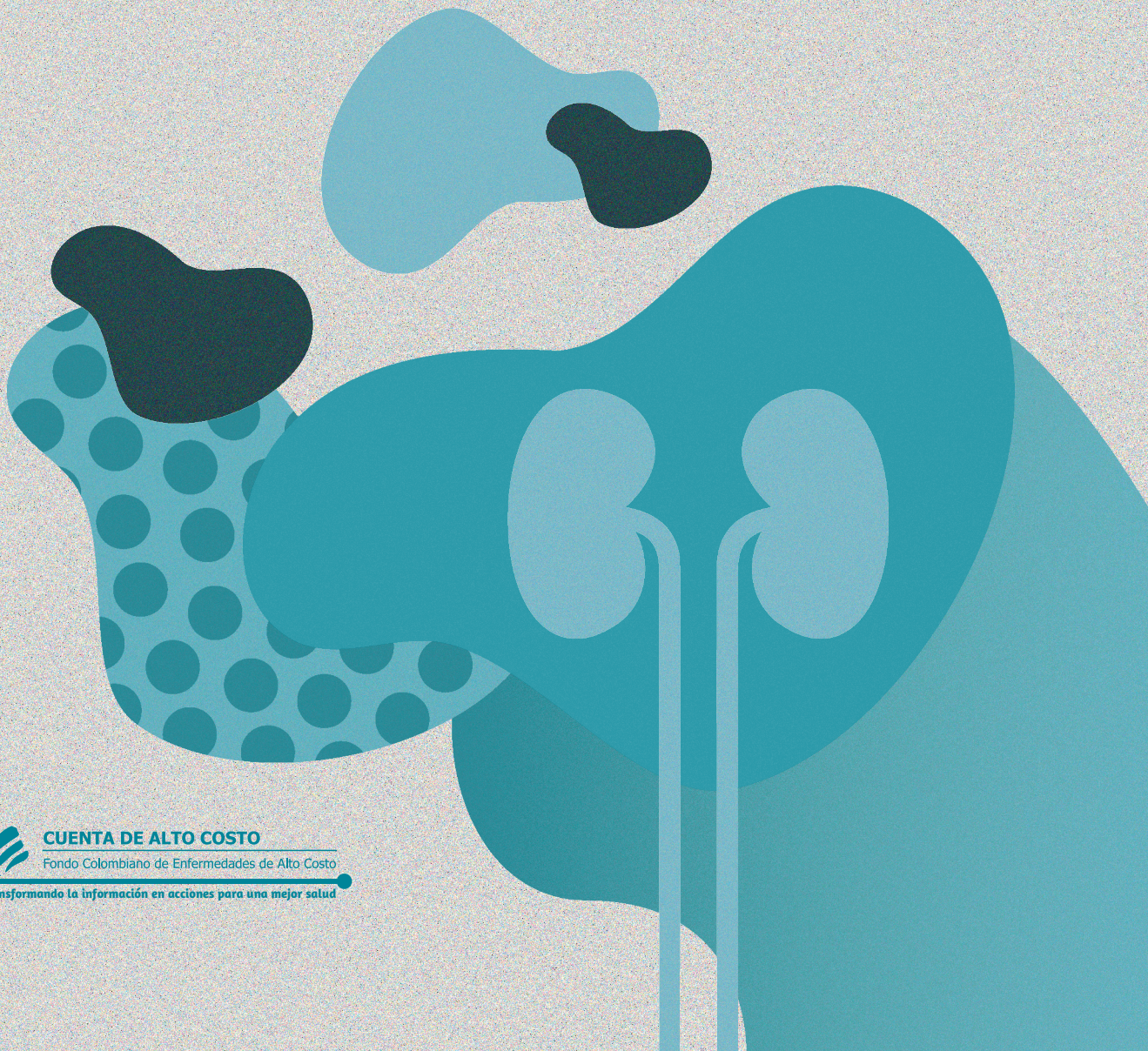
- Mean age of DM incident cases was 60.39 years (SD 13.90).
- 35,384 all-cause deaths were reported in the third-payer insurance (SMR= 146.32) and 21,463 in the state insurance (SMR= 100.81).
- 58,925 all-cause deaths were reported in patients with DM and about 49.61% (n= 29,231) were women.

Colombia's estimated DM crude prevalence was 3.11 cases per 100 inhabitants.

- There was a rise in DM new cases in the state insurance and a decrease in the third-payer insurance.
- The highest standardized prevalence rate was calculated in Bogota C. D. (SP= 3.66) followed by the Central region (SP= 3.40).

DM: Diabetes mellitus.
SD: Standard deviation.
SMR: Standardized mortality rate.
SP: Standardized prevalence.

4. Population with Chronic Kidney Disease



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4 Chapter

Population with Chronic Kidney Disease

Abstract

Period: July 1, 2020 to June 30, 2021.

154,688 new cases of CKD were reported. In 15.20% of those, diabetes was the etiology and in 14.61% vascular renal disease.

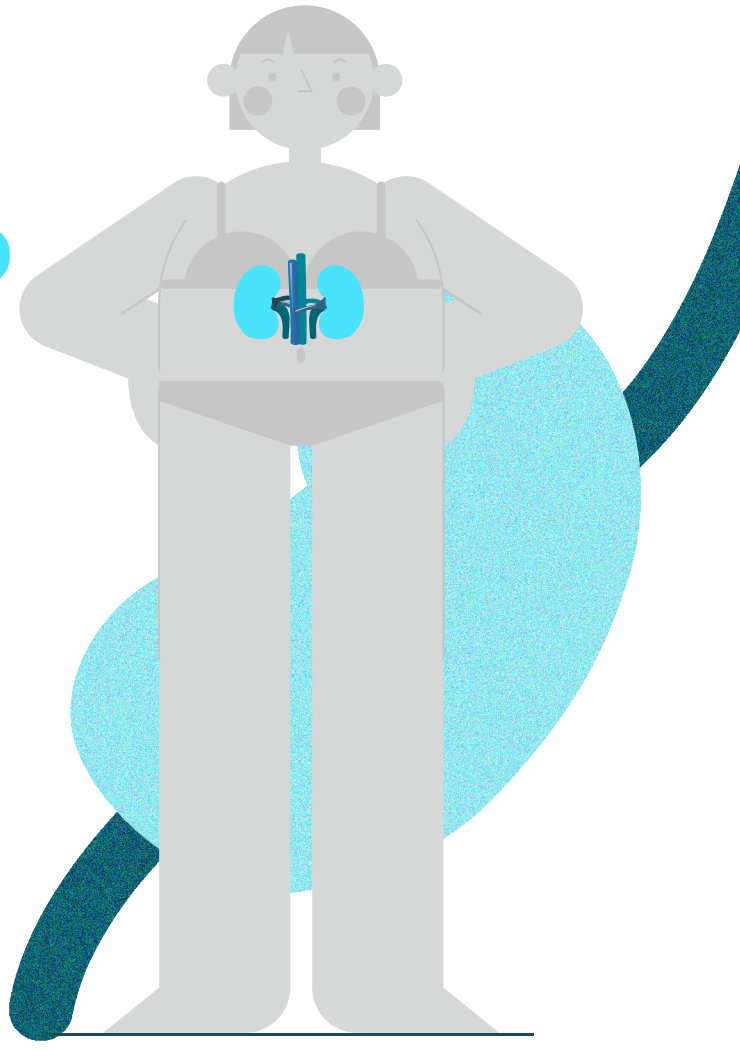
CKD cases between 60 and 64 years accounted for 13.32% (n= 20,607) of the incident cases.

The third-payer insurance registered a higher SMR than the state insurance. There was an increase in both groups; however, it was greater in the state insurance.

A total of 37,751 all-cause deaths were informed in people with CKD, which represents a 74.36% rise compared to 2020.

CKD crude prevalence was 1.75 cases per 100 inhabitants, having an increase of 39,249 cases in contrast to the previous period.

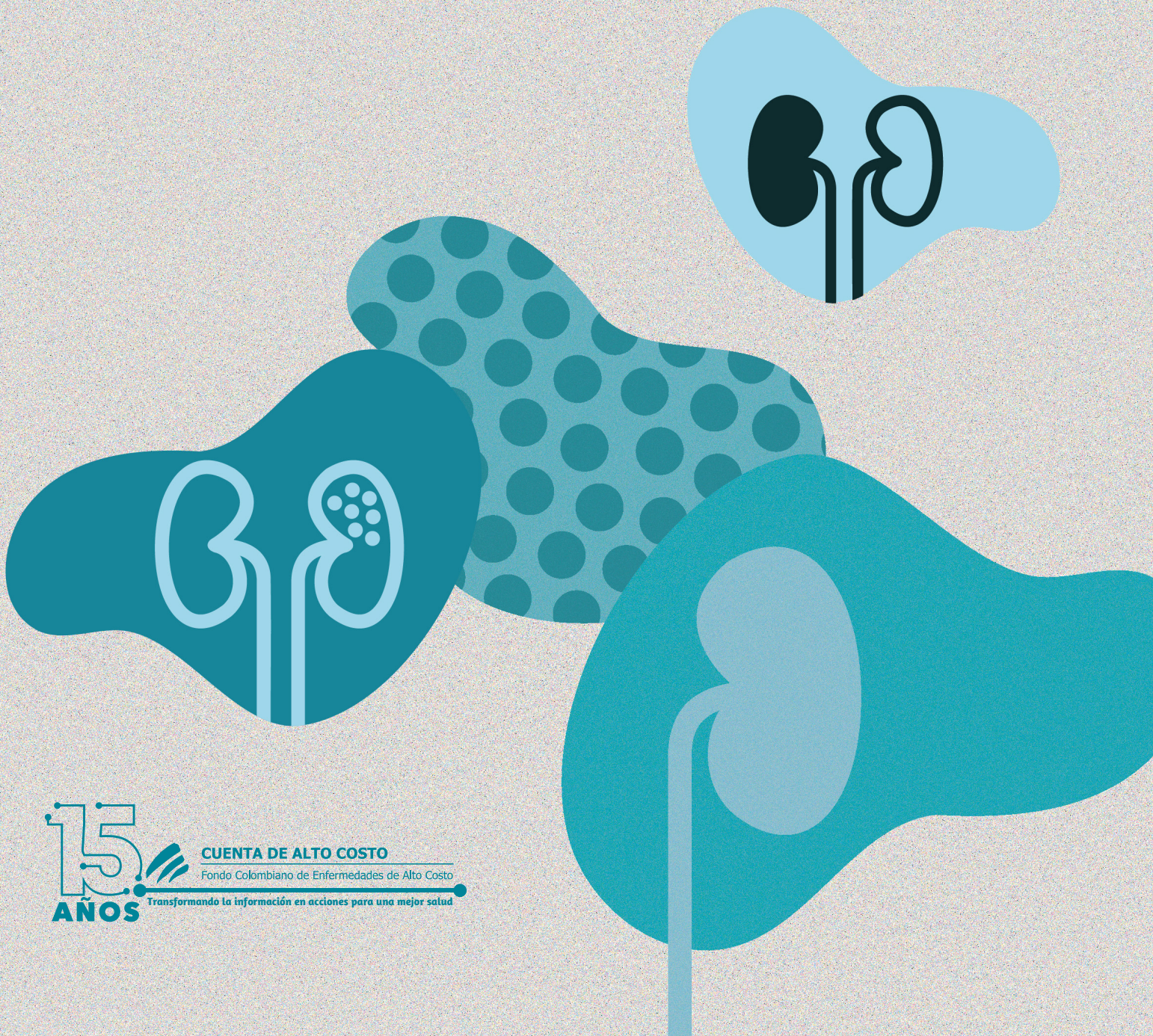
Among 889,123 CKD prevalent cases, 44.30% were stratified in stages 1-2; 34.22% in stage 3; 5.36% in stage 4, and 4.64% in stage 5.



CKD: Chronic kidney disease.
SMR: Standardized mortality rate.

Population with Chronic Kidney Disease by risk groups

5.



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Population with Chronic Kidney Disease by risk groups

Abstract

Period: July 1, 2020 to June 30, 2021.

Among dead cases,

24.51%

did not have disease staging during the period, this proportion was higher in people with HTN without DM.

Cases with HTN and/or DM who did not have screening for CKD raised by 6.80%.

In the third-payer insurance, CKD incidence and prevalence decreased for each risk group. The opposite effect was observed in the state insurance.

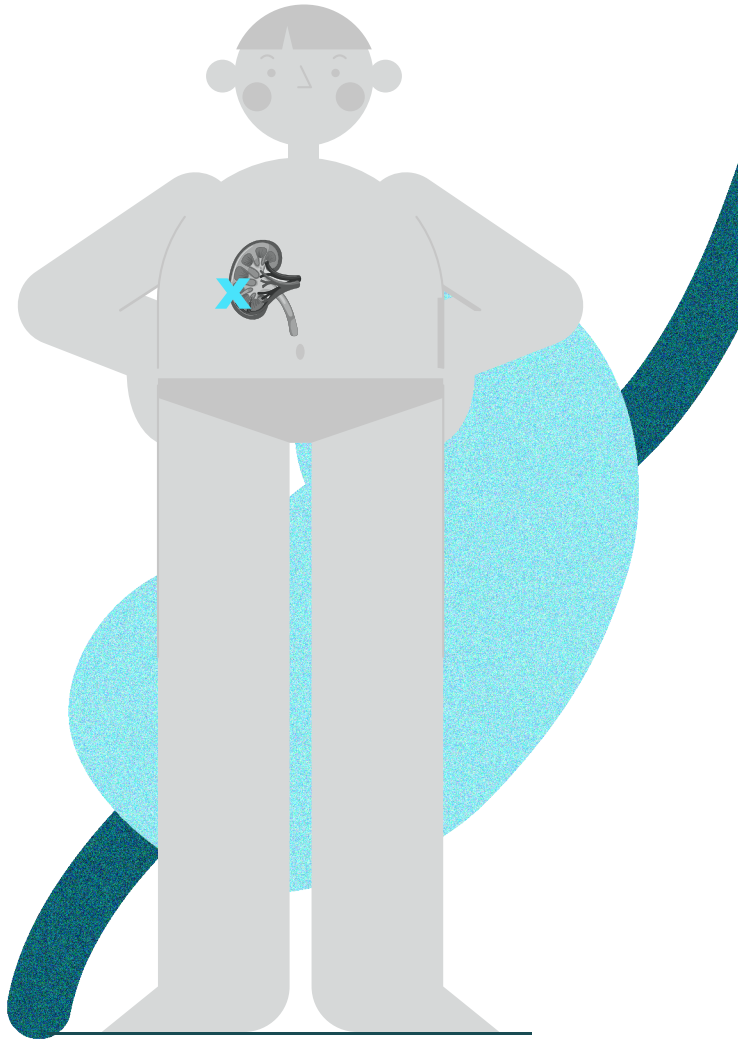
61.70% of prevalent cases with DM without HTN were in stages 1 and 3. In people with HTN, the majority were classified as stage 3.

Most people with

HTN and DM

were informed under study for CKD but without diagnostic confirmation (33.76%).

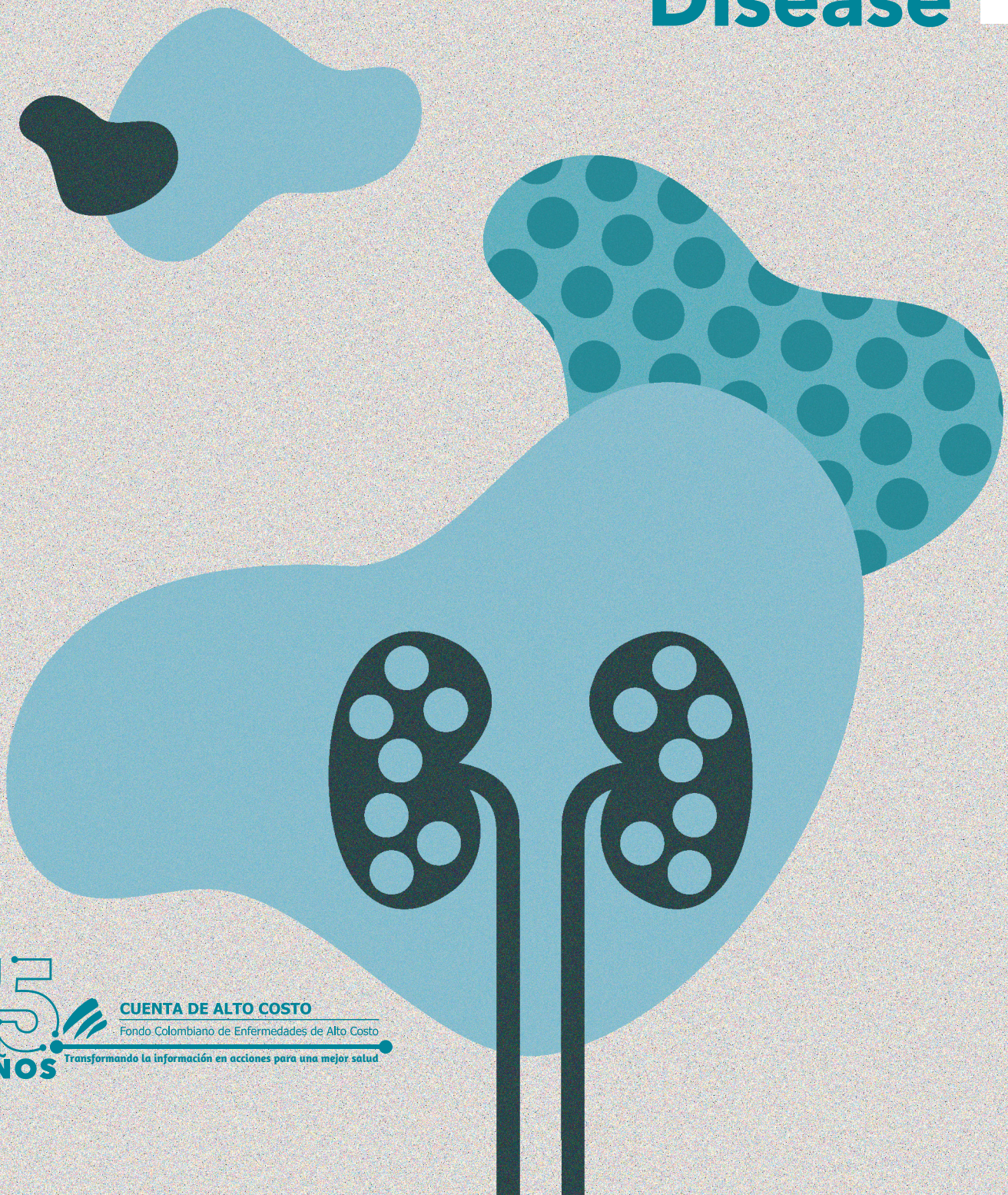
Mortality rates rose for both types of insurance in every risk group compared to 2020.



HTN: Hypertension.
DM: Diabetes mellitus.
CKD: Chronic kidney disease.

Population with stage 5 Chronic Kidney Disease

6.



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Population with stage 5 Chronic Kidney Disease

Abstract

Period: July 1, 2020 to June 30, 2021.

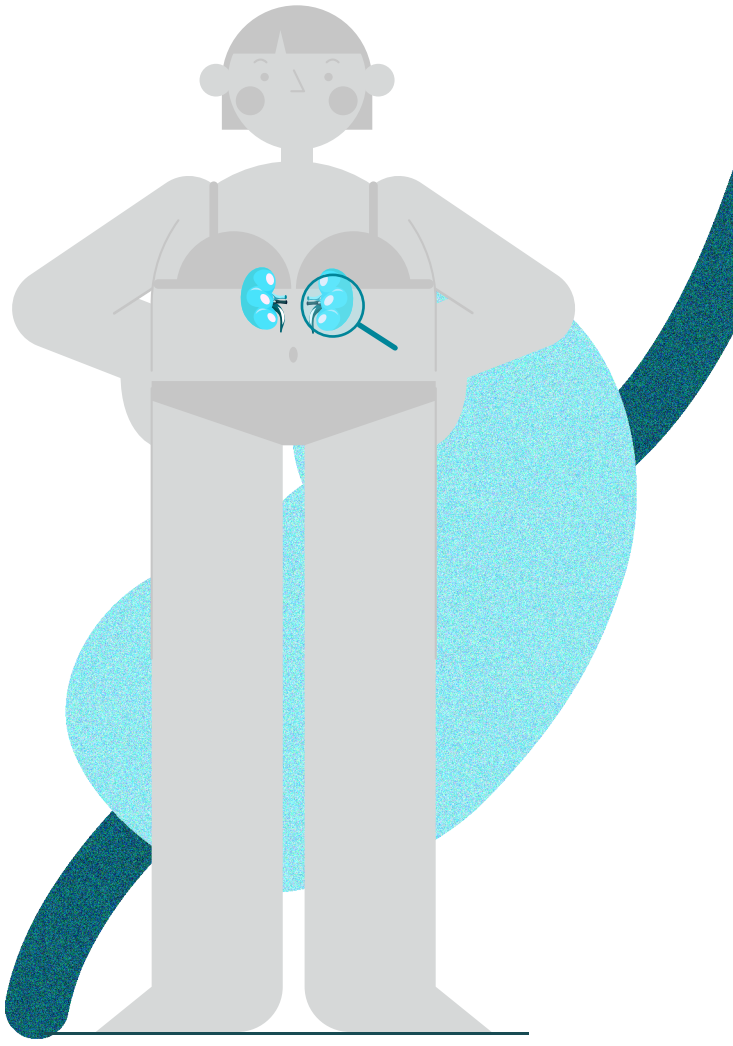
4,518 patients were reported as new onset ESRD cases.

Bogotá, C. D. had the highest frequency of new ESRD cases (n= 788), while Sucre had the highest age-standardized incidence rate (SI= 18.84 per 100,000 inhabitants).

The Central region had the highest number of prevalent cases (n= 11,790) and the highest prevalence at the national level (SP= 89.37).

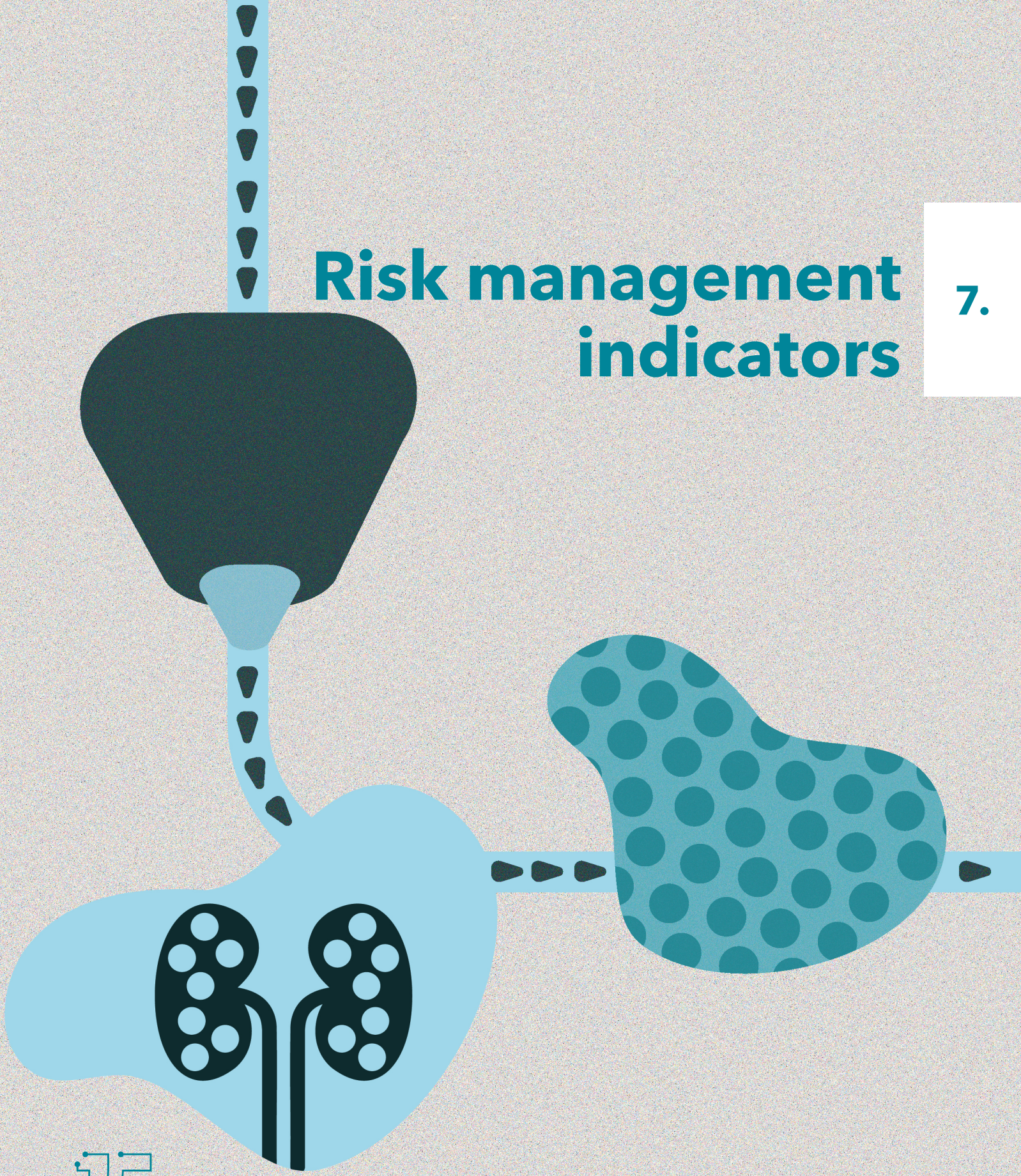
SMR in people with ESRD has been higher in the state insurance compared to the third-payer since 2018.

Among the **41,246 ESRD** prevalent cases, 49.97% were women (n= 17,725).



ESRD: End stage renal disease.
SI: Standardized incidence.
SP: Standardized prevalence.
SMR: Standardized mortality rate.

7. Risk management indicators



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7 Chapter

Risk management indicators

Abstract

Period: July 1, 2020 to June 30, 2021.

67.14% of the total cohort

population had adequate blood pressure control; it was superior in patients with third-payer insurance (68.51%) than state insurance (64.47%).

27.98% of the individuals had a BMI between 20 - 25 kg/m², which places the indicator at an intermediate level of compliance.

75.81% of the total cohort population remained without significant loss of renal function measured by CKD-EPI.

In people with HTN and DM, indicators with higher performance were blood pressure control and the percentage of people without loss of renal function.

53.08% of diabetics

had at least one measure of glycosylated hemoglobin in the last six months.



BMI: Body mass index.
CKD-EPI: Chronic Kidney Disease Epidemiology Collaboration.
HTN: Hypertension.
DM: Diabetes mellitus.

8. Population with renal replacement therapy



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8 Chapter

Population with renal replacement therapy

Abstract

Period: July 1, 2020 to June 30, 2021.

7,816 kidney transplant recipients were analyzed, which accounts for a prevalence of 154.13 per million inhabitants.

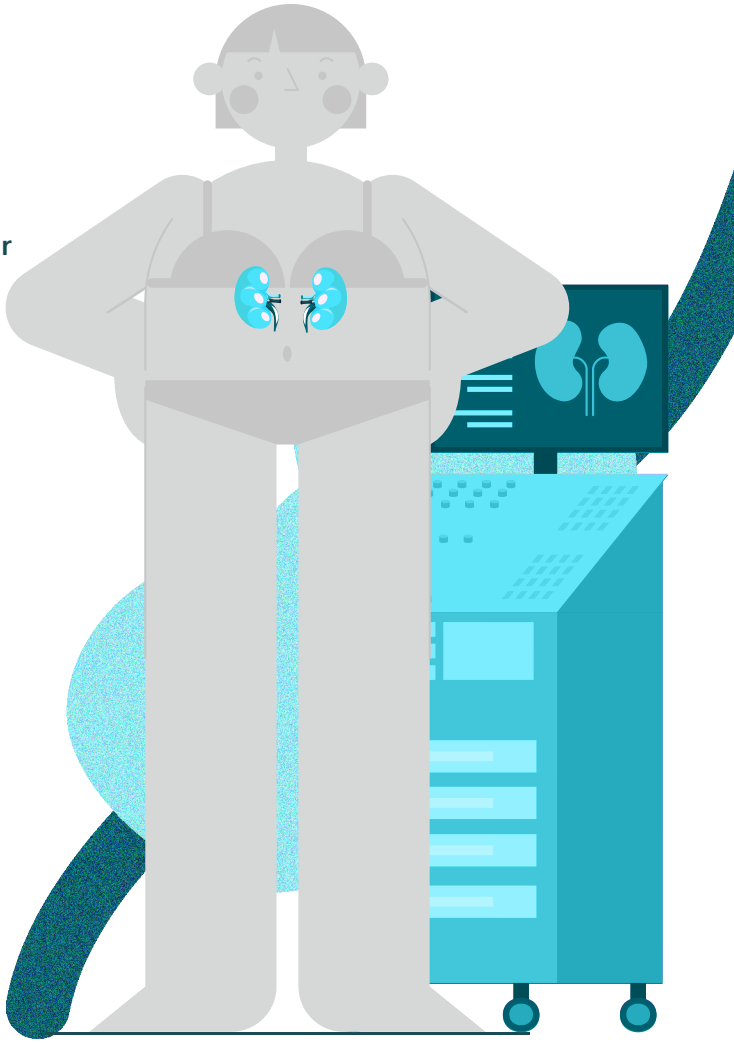
The national incidence of RRT was 7.51 per 100,000 inhabitants. The Central region had the highest proportion of new cases, followed by the Caribbean region.

The estimated RRT prevalence was 85.44 per 100,000 inhabitants. HD was the most frequent therapy in this population.

In adults with PD, phosphorus goal indicator represents an opportunity for improvement.

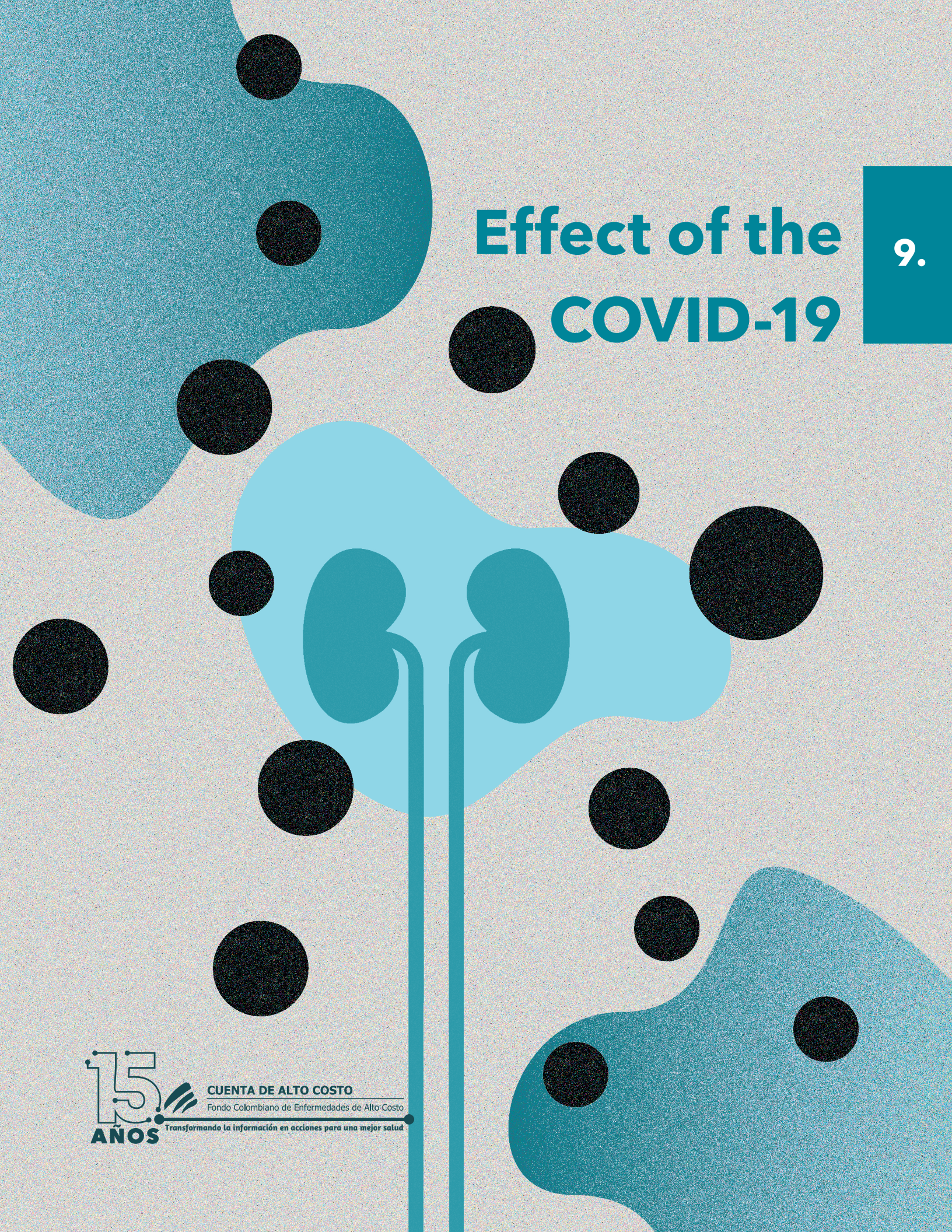
In adult transplant recipients, cancer cumulative incidence diminished, as well as the rejection rates in the period.

In adults with HD, the proposed goals for the phosphorus, hemoglobin, Kt/V and albumin indicators were achieved.



RRT: Renal replacement therapy.
HD: Hemodialysis.
PD: Peritoneal dialysis.

9. Effect of the COVID-19



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9 Chapter

Effect of the COVID-19 public health emergency on the management of people with HTN, DM and CKD

Abstract

Period: July 1, 2020 to June 30, 2021.

During the COVID-19 pandemic, a 16.10% drop was noted in the report of HTN incident cases for 2020 and 0.76% for 2021.

A recovery of 1.53% in the report of incident CKD cases was observed in the 2021 period, compared with 2020.

The total number of all-cause deaths in people with HTN raised by 66.78% in 2021 compared to the previous year. Similarly, among those with DM, an 88.16% increment was registered.

All-cause deaths in people diagnosed with CKD increased by 74.36% in 2021 compared to 2020. For ESRD this change was 43.27% and in the people with RRT was 49.59%.

In 2021, there was an improvement in the reporting of follow-up tests (15.87%).

During 2020, there was an overall decline of 28.40% in the number of follow-up clinical tests as LDL, creatinine, and albuminuria, compared with 2019.

The initiation of COVID-19 immunization in Colombia in February 2021, coincides with the recovery in measurement trends of follow-up tests.



HTN: Hypertension.
CKD: Chronic kidney disease.
DM: Diabetes mellitus.
ESRD: End stage renal disease.
RRT: Renal replacement therapy.

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