

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

2025



Fondo Colombiano de
Enfermedades de Alto Costo

A brief of chronic kidney disease, hypertension and diabetes mellitus situation in Colombia 2025



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

Annual periodicity

Bogotá, D. C., Colombia, August 2026

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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 2025;
Bogotá, D.C. 2026

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

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Change Tracking Table

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1

Population with
hypertension

INFOGRAPHIC summary

Chapter at a glance

Population with hypertension

Period: from July 1, 2024, to June 30, 2025

1



177,360
new cases of HTN,
were reported, representing a
17.41 % decrease compared to
2024.



The crude incidence was —
3.36 cases
per 1,000 inhabitants, representing
a 17.85 % reduction from the
previous period.



The number of prevalent cases of
HTN increased by **7.29 %**
compared to the previous period,
reaching a total of —
6,703,467
individuals.



The Caribbean region recorded the highest SIR,
followed by Bogotá, D. C.



The crude prevalence of HTN was 12.69 cases
per 100 inhabitants.



The mean age of the prevalent cases was 64.04
years (SD $\pm$ 14.75) and 59.72 % were women
(n= 4,002,999).



The Central region and Bogotá, D. C. recorded
the highest SPR.



The all-cause mortality rate among people
diagnosed with HTN was 257.19 deaths per
100,000 inhabitants.



52.77 % of deaths occurred in women
(n= 71,708).

The mean age at death was

79.00 years (SD $\pm$ 12.67).

HTN: hypertension.

SIR: standardized incidence rate.

SPR: standardized prevalence rate.

SD: standard deviation.

2

Population with
diabetes mellitus

INFOGRAPHIC summary

Chapter at a glance

Population with diabetes mellitus

Period: from July 1, 2024, to June 30, 2025

2



In 2025, **74,245** new cases of DM were reported, representing a 13.56 % decrease compared to the previous period.

The mean age of the incident cases was **58.90 years** (SD $\pm$ 14.15) and 57.80 % of cases were women (n= 42,911).

In 2025, the crude incidence was **1.41 cases** per 1,000 inhabitants, representing a 14.18 % reduction from the previous period.



In both sexes, the highest proportion of incident cases of DM was concentrated among individuals aged from 50 to 69 years.



The number of prevalent cases of DM increased by 9.30 %, reaching a total of 2,541,648 individuals.



The crude prevalence was 4.81 cases per 100 inhabitants, representing an 8.51 % increase compared to the previous period.



In both sexes, the highest proportion of prevalent cases was observed among individuals aged from 60 to 69 years.



All-cause deaths among people with DM increased by 14.01 %, reaching 58,184 cases.



The crude mortality rate was 110.12 per 100,000 inhabitants, corresponding to a 13.20 % increase compared to the previous period.

The distribution of deaths among people **diagnosed with DM** showed a marked concentration in older age groups, especially from **70 years onward.**

DM: diabetes mellitus.
SD: standard deviation.

3

Population with
**chronic kidney
disease**

INFOGRAPHIC summary

Chapter at a glance

Population with chronic kidney disease

Period: from July 1, 2024, to June 30, 2025

3



289,987
new cases of CKD

were reported, corresponding to a 2.94 % increase compared to 2024.



24.47 %
of incident CKD cases

were related to DM, and 13.58 % to renal vascular disease.



A total of
1,502,681
people with CKD

were reported, corresponding to a crude prevalence of 2.84 cases per 100 inhabitants.



The highest SIR for CKD was recorded in the Caribbean region and in the state insurance.



The mean age of prevalent CKD cases was 69.22 years and 59.45 % were women.



According to CKD-EPI 2021 staging, 28.62 % of CKD cases were classified as stage 2, followed by 19.17 % in stage 3.



Crude mortality increased by 21.13 % compared to 2024, corresponding to 88.40 deaths per 100,000 inhabitants.

Deaths among people in **stages 1 to 4**
occurred predominantly in women, whereas in stage 5, they occurred predominantly in men.

CKD: chronic kidney disease.
SIR: standardized incidence rate.
DM: diabetes mellitus.
CKD-EPI: Chronic Kidney Disease Epidemiology Collaboration.

4

Population with
chronic kidney disease
by risk groups

INFOGRAPHIC summary

Chapter at a glance

Population with chronic kidney disease by risk groups

Period: from July 1, 2024, to June 30, 2025

4



The number of people classified as having CKD and those
classified
as not having CKD increased
20,03 % and
35.77 %, respectively, compared to 2024.



The number of people without
CKD assessment decreased by
10.66 %
compared to the previous period.



35.07 %
of prevalent CKD cases
did not have a defined stage
according to the CKD-EPI 2021
equation.



Among deaths in people with CKD only, 19.80 % were classified as stage 5; among those with DM only, 16.27 % were classified as stage 2.



52.54 % of all-cause deaths among people with CKD had no staging information.



The SIR, SPR, and SMR for CKD across the three risk groups were higher in the state insurance compared to the third-payer insurance.



Across regions, the SIR for CKD in the three risk groups was highest in Amazonía-Orinoquía region.

**The SMR for CKD in the three risk groups
was highest in the Caribbean and Pacific regions.**

DM: diabetes mellitus.

CKD: chronic kidney disease.

SIR: standardized incidence rate.

SPR: standardized prevalence rate.

SMR: standardized mortality rate.

CKD-EPI: Chronic Kidney Disease Epidemiology Collaboration.

5

Population with **stage 5
chronic kidney disease**
according to the CKD-EPI
2021 equation

INFOGRAPHIC summary

Chapter at a glance

Population with stage 5 chronic kidney disease according to the CKD-EPI 2021 equation

Period: from July 1, 2024, to June 30, 2025

5



A total of **3,901** new cases of ESRD were reported to the CAC, corresponding to a crude incidence of 7.38 cases per 100,000 inhabitants.

The mean age of incident ESRD cases was **61.01 years** (SD $\pm$ 16.58) and **59.70 % were men.**

The Caribbean, Central, and Bogotá, D.C. regions recorded the **highest SIR** in the country, in that order.



The SIR was higher in the state insurance, with 6.82 cases per 100,000 affiliates.



A total of 46,688 ESRD cases were analyzed, representing a crude prevalence of 88.36 cases per 100,000 inhabitants.



The mean age of people with ESRD was 60.57 years (SD $\pm$ 16.18), and 58.13 % were men.



The Caribbean region had an SPR of 94.02 cases per 100,000 inhabitants, and the state insurance had an SPR of 77.49 cases per 100,000 affiliates.



The crude all-cause mortality rate among people with ESRD was 11.30 deaths per 100,000 inhabitants.



The mean age of deceased ESRD cases was 68.52 years (SD $\pm$ 15.37), and 56.11 % were men.



Among people with ESRD who died, CKD was reported as the cause of death in 2.76 %, and cardiovascular disease in 28.17 %. In 40.92 % of deaths, this information was not available, while other causes were reported in 16.82 %.

The highest SMR was estimated in the Caribbean region, with **12.55 deaths per** 100,000 inhabitants, and in the state insurance, with 10.12 deaths per 100,000 affiliates.

ESRD: end-stage renal disease.

SIR: standardized incidence rate.

SD: standard deviation.

SPR: standardized prevalence rate.

SMR: standardized mortality rate.

CKD: chronic kidney disease.

CKD-EPI: Chronic Kidney Disease Epidemiology Collaboration.

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**Risk management
indicators**

INFOGRAPHIC summary

Chapter at a glance

Risk management indicators

Period: from July 1, 2024, to June 30, 2025

6



HbA1c measurement in the last
6 months
among people with DM was
performed in

43.02 %

of cases, reaching an intermediate
level of compliance.



uACR was measured in

44.79 %,

of the overall population during the
last year.



Simultaneous measurement of —
uACR and eGFR
was performed in between

37.08 % and 45.78 %
of the populations with precursor

diseases.



Renal function measurement in the last 2 consecutive periods was performed in 36.16 % of the overall population. Among those with this measurement, renal function maintenance, estimated using the CKD-EPI 2021 equation, was achieved in 79.13 %.

The indicators for HbA1c measurement, LDL cholesterol measurement, and BMI control reached the **established targets**
across CKD stages.

HbA1c: glycated hemoglobin.

DM: diabetes mellitus.

uACR: urine albumin-to-creatinine ratio.

CKD-EPI: Chronic Kidney Disease Epidemiology
Collaboration.

eGFR: estimated glomerular filtration rate.

LDL: low-density lipoprotein.

BMI: body mass index.

CKD: chronic kidney disease.

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Population with
chronic kidney disease
**on renal replacement
therapy**

INFOGRAPHIC summary

Chapter at a glance

Population with chronic kidney disease on renal replacement therapy

Period: from July 1, 2024, to June 30, 2025

7



A total of **5,281** new cases of RRT were reported to the CAC, and the crude incidence rate was 10.00 cases per 100,000 inhabitants.

The Caribbean region and state insurance had the highest **SIR.**

A total of **54,594** people receiving any type of RRT were analyzed, and the crude prevalence was estimated **at 103.33 cases** per 100,000 inhabitants.



The Central region and the third-payer insurance had the highest SPR.



HD was the most frequent type of RRT (58.49 %), and compared to 2024, the number of people increased across all therapy types.



A total of 5,481 all-cause deaths were reported among people receiving RRT, and the mortality rate was 10.37 deaths per 100,000 inhabitants.

The mean age of deceased cases was **66.88 years, and 57.34 %** were men.

RRT: renal replacement therapy.
SIR: standardized incidence rate.
SPR: standardized prevalence rate.
HD: hemodialysis.

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Population with
chronic kidney disease
on dialysis

INFOGRAPHIC summary

Chapter at a glance

Population with chronic
kidney disease on dialysis

Period: from July 1, 2024, to June 30, 2025

8



During 2025,

10,290
cases receiving PD and
31,934
receiving HD were reported.

55.10 %
of cases on PD
received the manual modality.

The main vascular access among
people receiving HD was **arteriovenous fistula**,
accounting for
66.49 % of cases,
followed by catheter use at 32.91 %.



Kt/V dose, hemoglobin, and albumin in adults
receiving HD and PD achieved a high level of
compliance with the targets established in the
consensus.



The crude all-cause mortality rate was 7.26
cases per 1,000,000 inhabitants among the
population receiving HD and 2.18 cases per
1,000,000 inhabitants among those receiving
PD.

Albumin in children receiving HD, as well as Kt/V dose and albumin in
children receiving PD, **met the target.**

PD: peritoneal dialysis.
HD: hemodialysis.

Kt/V: dialysis adequacy index based on dialyzer urea
clearance (K), dialysis time (t), and urea distribution
volume (V).

9

Population with
chronic kidney disease
**and kidney
transplantation**

INFOGRAPHIC summary

Chapter at a glance

Population with chronic kidney disease and kidney transplantation

Period: from July 1, 2024, to June 30, 2025

9



A total of **772** new cases of kidney transplantation

were identified; the mean age was 44.63 years, and 56.48 % were men.

A total of **9,904**

people with kidney transplantation were reported, and the estimated crude prevalence was

187.45 cases per 1,000,000 inhabitants.

Bogotá, D.C. and the third payer insurance

had the highest SPR.



A total of 190 all-cause deaths were identified among people with kidney transplantation. The crude mortality rate was 3.60 per 1,000,000 inhabitants.



During the 2025 period, mycophenolate (82.46 %) and tacrolimus (74.76 %) were the most frequently used drugs in immunosuppressive therapy among people with kidney transplantation.



Surgical complications occurred in 4.03 % of adults transplanted during the period, mainly involving the surgical wound.

Opportunistic infections occurred in **4.58 %** of adults transplanted

during the period, mostly due to cytomegalovirus.

SPR: standardized prevalence rate.



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Proceso estadístico
Certificado - DANE

NTC PE 1000: 2020
25 - PE - E123 - OE531