



Chronic kidney disease in south Asia

South Asia has a high incidence of chronic kidney disease (CKD).¹ Bogdan Ene-lordache and colleagues² (May, 2016) reported findings from 75 058 people from 12 countries, including three south Asian countries, in which only 6% of the general population and 10% of high-risk populations surveyed were aware of their CKD status. Besides this low level of kidney health awareness, we identify additional challenges, in particular for end-stage kidney disease (ESKD), which are important to the south Asian population.

Demand for kidney transplantation for ESKD has already outstripped the supply of donated organs from living donors, notwithstanding the inadequate donor pool.³ End-of-life donation can potentially expand the donor pool but is less common. For example, in India, among the 12 294 renal transplantations done between 1971 and 2006, only 234 were from cadaveric donors.⁴ However, expanding the donor pool through national and regional organ donor registries and promotion of cadaveric organ donation holds promise in south Asia. Favourable attitudes towards end-of-life donation can be established through countering strong cultural beliefs about the afterlife that usually disregard an organ donation with culturally appropriate messages such as the notion that helping life will ease the passage to afterlife.

The World Health Assembly in 2004 feared that an increase in demand for transplantation will further increase trafficking.⁵ Trafficking of human organs is a large problem internationally, including in the south Asian countries.³ It is inextricably linked with a growing demand for organ transplantation in south Asia and is globally tied to ESKD. Furthermore, travelling to low-income countries to undergo organ transplantation, commonly referred to as transplant

tourism, reduces the availability of donor organs for citizens in the host countries, while fuelling organ trafficking from outside countries.³

Preserving kidney function is central to human health. As the President of the International Society of Nephrology notes, "when the kidney is sick, all of you is sick".⁶ Additionally, kidney disease is making our society sick, with continual sufferings due to trafficking. Therefore, approaches to tackle CKD should address trafficking. Strong grassroots advocacy is needed to increase awareness of this core issue of kidney health. Furthermore, regional initiatives to fight trafficking and expansion of the kidney donor registry to address the demand of transplantation are imperative.

We declare no competing interests.

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- 1 Abraham G, Varughese S, Thandavan T, et al. Chronic kidney disease hotspots in developing countries in South Asia. *Clin Kidney J* 2016; **9**: 135–41.
- 2 Ene-lordache B, Perico N, Bikbov B, et al. Chronic kidney disease and cardiovascular risk in six regions of the world (ISN-KDDC): a cross-sectional study. *Lancet Glob Health* 2016; **4**: e307–19.
- 3 Shimazono Y. The state of the international organ trade: a provisional picture based on integration of available information. *Bull World Health Organ* 2007; **85**: 955–62.
- 4 Shroff S. Indian transplant registry. *Indian J Urol* 2007; **23**: 272–77.
- 5 Clare NK. Organ trafficking and transplantation pose new challenges. *Bull World Health Organ* 2004; **82**: 715.
- 6 The Lancet. Campaigning for kidney health. *Lancet* 2016; **387**: 1028.