



Leading European Nephrology

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European Renal Association – European Dialysis and Transplant Association

Efficient strategies to reduce the burden of drug abuse are needed

The global burden of renal disease related to abuse of illicit drugs might be expected to increase

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Abuse of illicit drugs is common, it is often complicated with a variety of medical problems with high morbidity and mortality and is an important contributor to the global burden of disease. Opioid and amphetamine dependence are the two most common forms of illicit drug dependence worldwide. The prevalence of illicit drug dependence is still high. According to the 2015 World Drug Report of the United Nations Office on Drugs and Crime (UNODC) [1] it is estimated that a total of 246 million people used an illicit drug in 2013. The popularity of “designer drugs” is even rising – and therefore the global burden of renal disease related to abuse of illicit drugs might also be expected to increase in the next years.

A multitude of renal diseases are associated with drug abuse including rhabdomyolysis, interstitial nephritis and glomerulonephritis. Additionally, viral infections like hepatitis-B and -C and HIV are highly prevalent in drug abusers and renal disease associated with those infections has increased. Hepatitis-C related membrano-proliferative glomerulonephritis has emerged as the most prevalent kidney disease in drug abusers worldwide. “In the last decade, the incidence of AA-amyloidosis as a cause of chronic renal disease has increased in intravenous drug abusers and is now the most common cause of renal failure in that patient population in Norway”, explained Helga Gudmundsdottir, Oslo, Norway, at the ERA-EDTA Congress in Madrid. This is thought to be the result of the better survival of drug users nowadays and of the improved long-term treatment of bacterial and viral infections.

Treatment of chronic kidney disease, including dialysis, in chronic users of illicit drugs with variable adherence to recommended treatment is costly and raise many ethical questions. Besides, it is challenging from the medical point of view. “Therefore, efficient strategies to reduce the burden of drug abuse are urgently needed, if we want to decrease the number of renal disease related to abuse of illicit drugs”, explained Gudmundsdottir.

[1] <https://www.unodc.org/unodc/en/frontpage/2015/June/2015-world-drug-report-finds-drug-use-stable--access-to-drug-and-hiv-treatment-still-low.html>



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About ERA-EDTA

With almost 7,000 members, the ERA-EDTA ("European Renal Association – European Dialysis and Transplant Association") is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. It also supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all activities ERA-EDTA has the Young Nephrologists' Platform (YNP), a very active committee whose board includes members who are 40 years old or younger. Besides, it has established various working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board was established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association's journals, NDT (Nephrology, Dialysis, Transplantation) and ckj (Clinical Kidney Journal), are currently the leading nephrology journals in Europe; furthermore NDT-Educational is the online educational journal, open for free to all uses, of the Society as well as the very important and useful feature of NDT-Educational "Literature Review". The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. ENP, the European Nephrology Portal, is the latest new initiative of ERA-EDTA: here all those interested in the activities of the Society can find everything that is done, all in one place! Finally, ERA-EDTA is member of the European Kidney Health Alliance (EKHA), a consortium of patients, nurses, foundations all related to renal issues that actively interacts with the European Parliament. For more information please visit www.era-edta.org