



Lancashire Teaching
Hospitals
NHS Foundation Trust



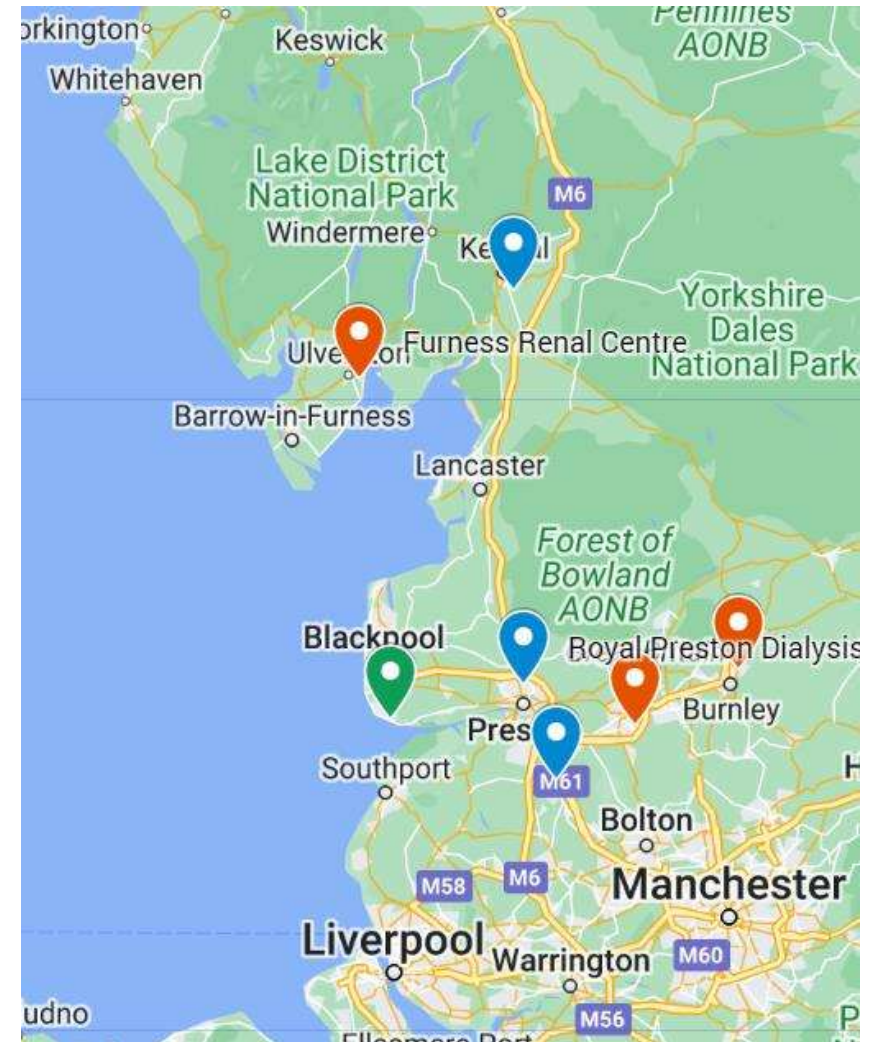
Renal Research in Lancashire & South Cumbria

Dr. Beng So MBChB MD FRCP
Clinical Director Renal Medicine

Red Rose Research Academic Meeting
19th November 2025

The LTH Renal Service

- 1.8 million catchment population
- 5 Acute hospital spokes sites
- 23 inpatient beds at RPH
- 2,513 acute inpatient referrals managed via Patient Pass PA
- Clinic activity: NEW 2,634 and Follow-up 24,058 episodes
- 533 in-centre haemodialysis and 41 home HD delivering 75,925 dialysis sessions this year
- 57 peritoneal dialysis patients
- Approx. 930 post kidney transplant patients



Epidemiology of chronic kidney disease: an update 2022

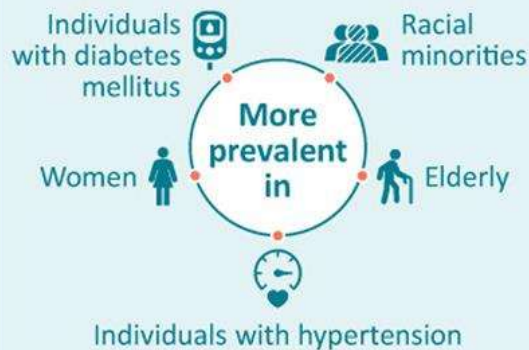
kidney
INTERNATIONAL
supplements



Extremely common

843,6 Million
in 2017

Approximately **1 in 10**



Increasing death rate

+41.5% 1990 to 2017



Rank in cause of death

Large burden in
low- and middle-income countries



Among the **top 10 causes** of death
in Singapore, Greece, and Israel

Kovesdy, 2022

CONCLUSION

Chronic kidney disease (CKD) occurs frequently and has devastating consequences. This should prompt major efforts to develop preventative and therapeutic measures that are effective. The aim of these measures should be lowering the incidence of CKD and slowing its progression.

Number
and stage
of CKD
patients in
a “typical”
practice

	Age (years)	Stage 5	Stage 4	Stage 3	Stage 3–5	Practice population
Male	< 40	1	0	2	3	2,159
	41–60	1	3	28	32	1,267
	61–80	1	9	177	187	870
	80+	0	6	101	107	190
	All	3	18	308	329	4,486
Female	< 40	1	0	4	5	2,094
	41–60	0	1	59	60	1,133
	61–80	1	7	335	343	953
	80+	1	19	206	226	355
	All	3	27	604	634	4,535
All	All	6	45	912	963	9,021
Key: CKD = chronic kidney disease						

0.6%

4.7%

94.7%

WHO – Chronic Kidney Disease



Executive Board
156th session

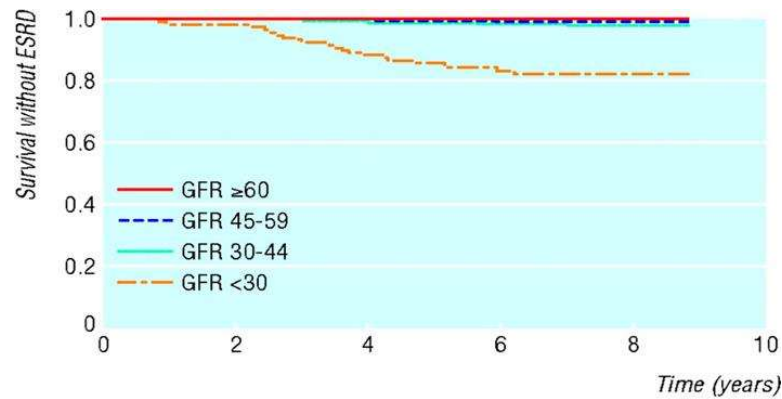
Agenda item 7

EB156(20)

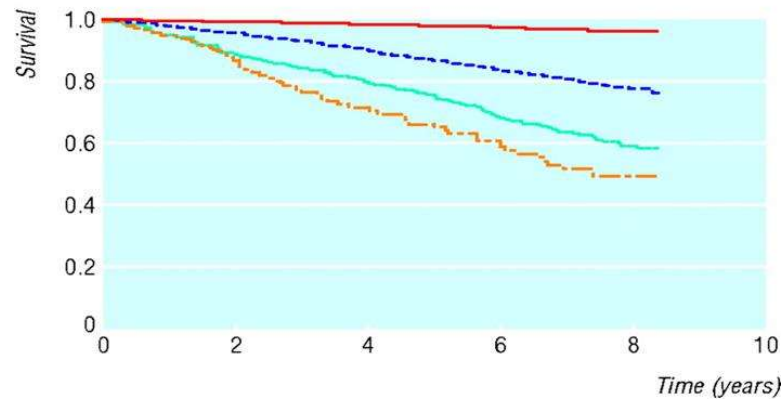
10 February 2025

**Reducing the burden of noncommunicable diseases
through promotion of kidney health and strengthening
prevention and control of kidney disease**

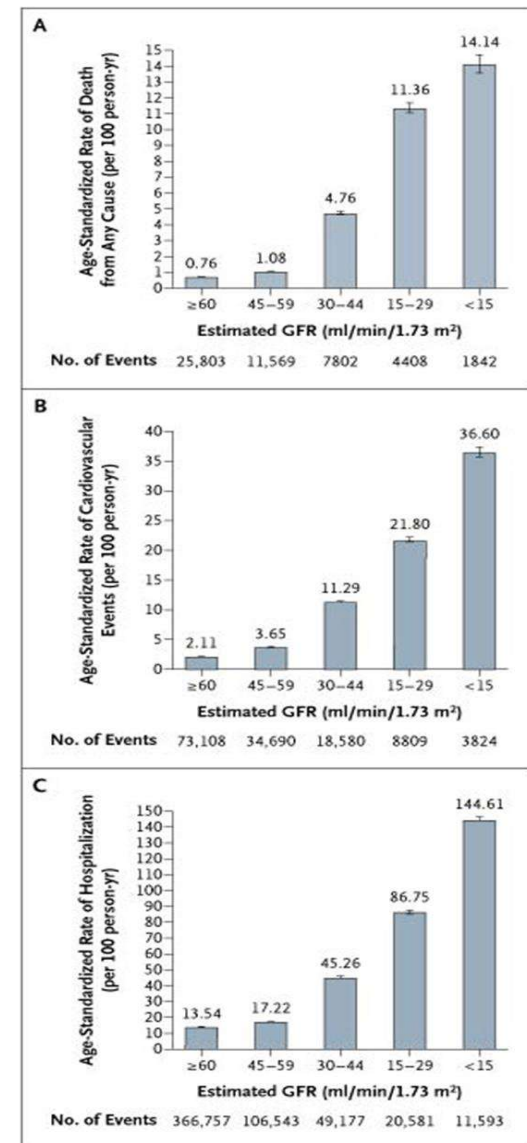
Progression, Morbidity and Mortality



GFR at screening	≥ 60	45-59	30-44	< 30	Total
ESRD	13	9	7	22	51
Total No	62 066	2389	548	120	65 123
Log rank test (P value)	<0.001				



GFR at screening	≥ 60	45-59	30-44	< 30	Total
Cardiovascular death	1913	456	185	50	2604
Total No	62 099	2389	548	120	65 156
Log rank test (P value)	<0.001				0.035



CKD is
primarily a
CVD risk



<https://www.flickr.com/photos/melinda-shelton/4050929055>

"CVD risk" and "Dialysis or transplant"
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The Renal Research: Commercial & Portfolio

Commercial:

- Dialyze-outcomes (AZ)
- TRACK (AZ)
- PASS (Otsuka)
- PIVOTAL (KRUK + Vifor)
- Easi-Kidney (BI)
- RENAL F02 (Alentis)
- PREVAIL (biogen)
- LUCID accelerator (AZ)

Portfolio:

- BiSTRO
- SIMPLIFIED
- Prepare 4KC
- Nephro-S
- UKiVAS
- Kidney BEAM
- DIMENSION-KD
- Complement Activation in ESRF
- SMILE-K
- STOP-ACEi
- RADAR
- Calciphylaxis

Also, health inequalities research: Drivers of urgent & emergency care use in Greater Manchester & Lancashire

The Renal Research: Homegrown

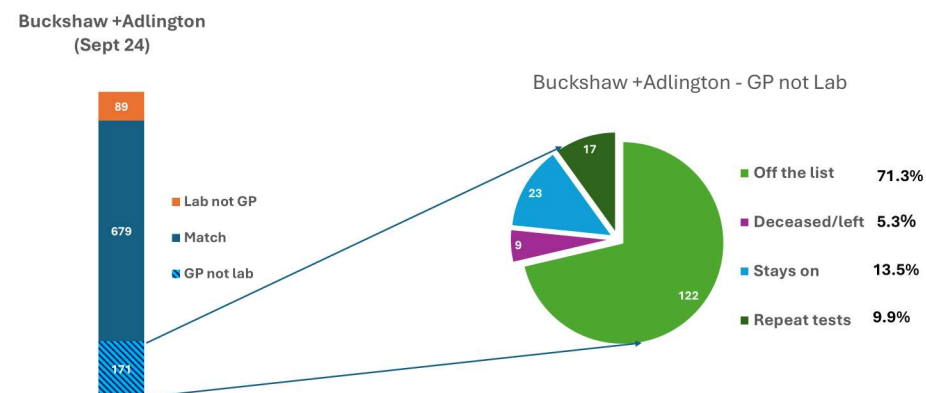
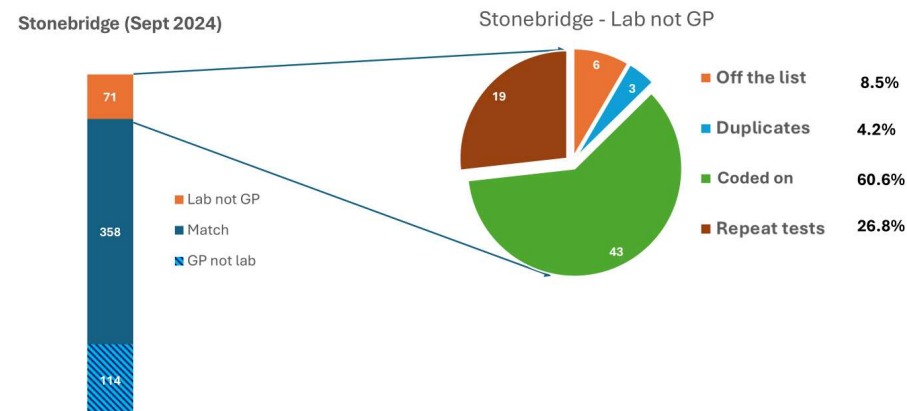
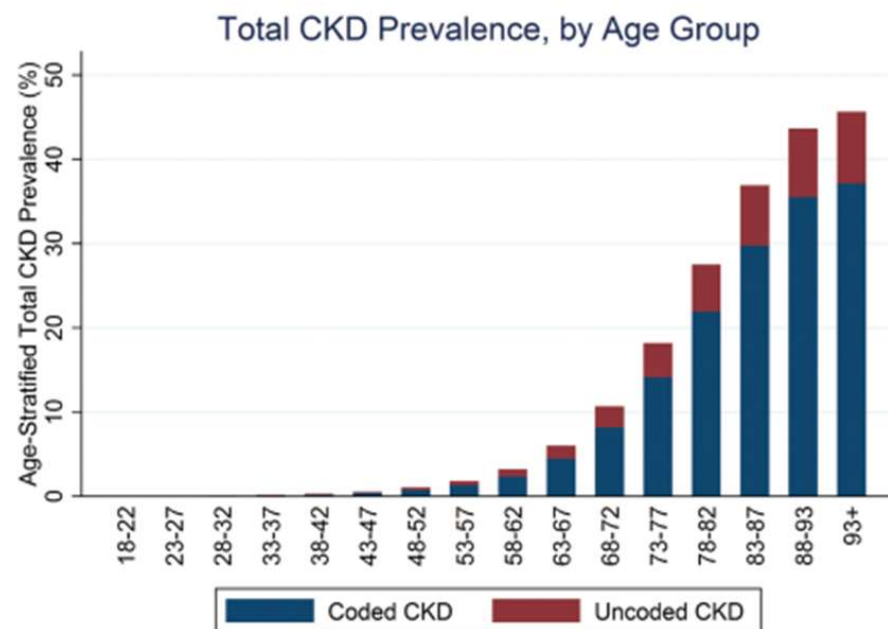
- Andy Nixon, PhD (UoM) – Frailty Assessment and Intervention in Chronic Kidney Disease
- Adam Morris, MD (UoL) – SPECTROVAS: The evaluation of biospectroscopy as a potential biomarker of disease activity in pauci-immune small vessel vasculitis
- Lauren Floyd, PhD (UoM) – The adverse outcomes and unmet needs of patients with ANCA associated vasculitis

Candidates:

- Louise Moore (UoM) – Frailty research
- Winnie, WingYin Leung (LU) – CKD detection research

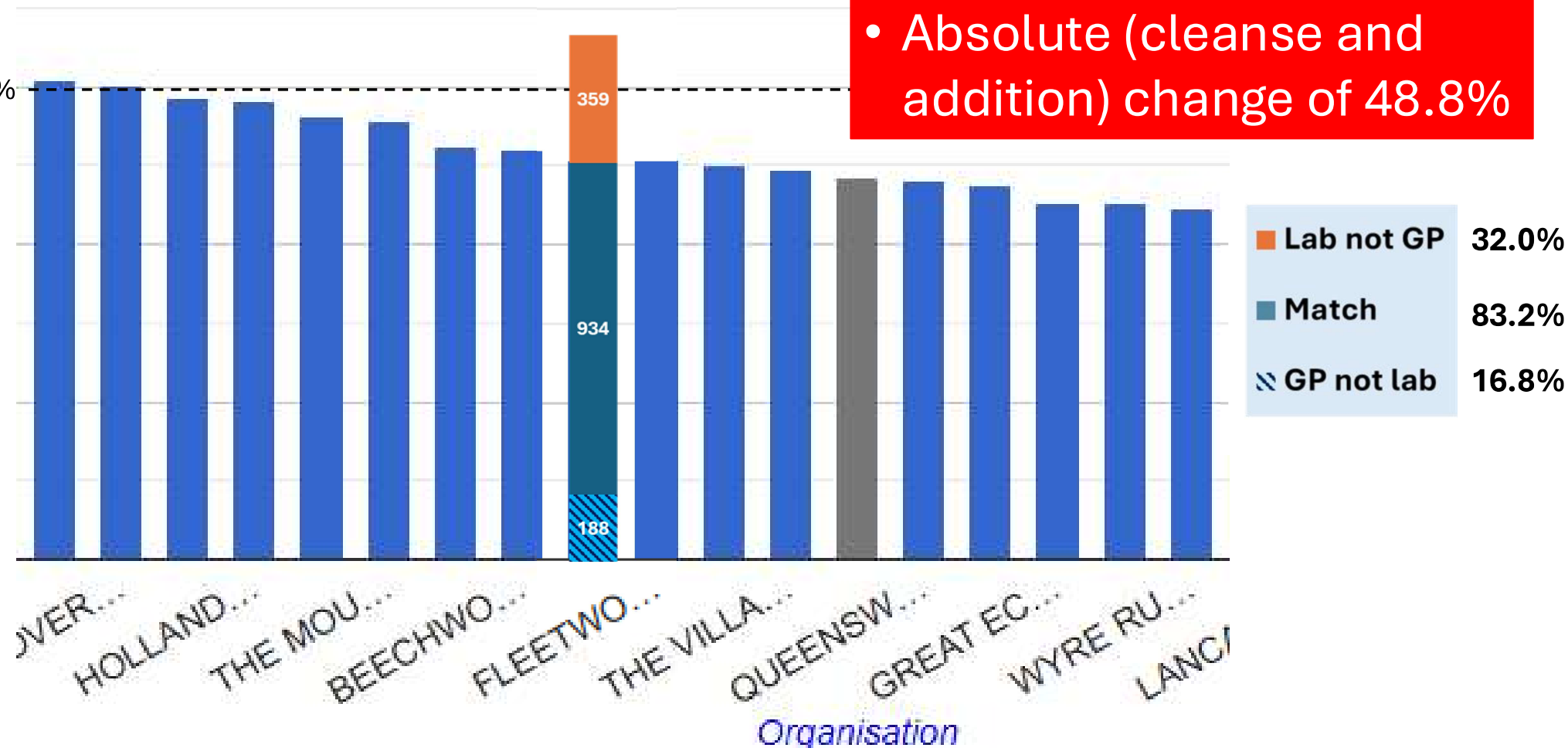
The Renal Research: CKD-SPAN

CKD Surveillance with Primary care
Assessment and Notification programme



What might this mean?

- Relative change of 0.8%↑
- Absolute (cleanse and addition) change of 48.8%



The Renal Research: Vision

Build capacity supported by expanding commercial portfolio - at present we have to be very selective with our opportunities due to lack of (R&I) capacity.

Increased grant applications and further collaboration with industry to support development of local research.

Develop and strengthen academic collaboration with institutions closer to home.

How many errors can you spot?



Thank you for listening – Questions?

Acknowledgement:

- LTH Renal patients who volunteer their time for research
- LTH R&I CC team especially Alex McCarrick, Ellyn Dayondon and Sarah McLoughlin
- My colleagues who strive daily to make LTH Renal a centre of excellence