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New therapeutic approaches for patients with chronic kidney disease and permanent renal failure in Austria

Around 9,000 people suffer from permanent renal failure in Austria alone. But there is hope that a new generation of “portable artificial kidneys” will alleviate the burden on dialysis patients. Innovative medicines are also being developed to stop or delay the onset of end-stage kidney failure in sufferers of chronic kidney disease. Key developments in this field and virtually all nephrological specialisms will be presented at the Austria Center Vienna from 21-24 May at the European ERA-EDTA Kidney Congress.

- Constant increase in the number of patients with permanent renal failure – up 26% since 2005
- Personalised therapy for chronic kidney diseases made possible by new medicines, and in certain cases biological drugs, as well as hormone treatments for genetic kidney diseases
- Living with dialysis – constraints on daily life, high transplant rate in Austria improving quality of life for 4,700 patients
- Pioneering treatment breakthroughs for the largest risk group – diabetics – thanks to innovative pharmaceuticals

Numbers of dialysis and transplant patients in Austria rising sharply
The kidneys are among the hardest working organs in the human body. Every day they filter the blood, removing waste and other metabolic end products. They are also responsible for regulating fluid levels, pH values, blood pressure and the production of red blood cells.

Kidney disorders – the most serious of which is known as end-stage renal disease – have a negative impact on countless other processes in the human body. End-stage renal disease describes permanent failure of kidney function, a process that leads to a life-threatening increases in the amount of uraemic substances in the blood. “In Austria alone, almost 9,000 patients are affected by the condition and have to undergo regular dialysis, or have already had a kidney transplant,” confirmed Prof. Gert Mayer, Director of the Innsbruck University Clinic for Internal Medicine (Nephrology and Hypertension) and president of the ERA-EDTA Congress. “It is alarming that the number of end-stage renal patients in Austria has increased by more than a quarter since 2005 from 7,200 to 9,100.”
This is why it is so important to focus on prevention and early detection, as this is the only way to stop and stabilise chronic kidney disease or at least delay its progression," Mayer added.

Special programmes for high-risk groups are already delivering initial successes, as shown by a slight decline in the number of new registrations of end-stage renal disease among diabetics.

**Personalised therapy possible thanks to biological drugs**

Biological drugs are increasingly finding their way into treatment programmes as a way to bring chronic kidney diseases under control at an early stage. As the name suggests, these novel pharmaceuticals are prepared using biotechnology. In terms of their structure, the biological agents are similar to the body’s own molecules, making them more easily tolerated and in many cases clearing the way for individualised therapies, the likes of which have been successfully used to treat cancer.

**Revolutionary help for genetic kidney diseases**

Some renal disorders that can lead to end-stage kidney disease, such as polycystic kidney disease, are genetic. "Special compounds that block the ADH hormone and slow the rate of kidney damage have recently been developed to help these people," Gert Mayer said. There is also fresh hope for sufferers of atypical haemolytic-uremic syndrome (aHUS), a genetic kidney disease caused by a defect in the body’s own immune system that results in kidney damage.

**Life on dialysis – prerequisites for transplants**

Although dialysis is highly developed from a technological perspective and refined therapy options such as dialysis during pregnancy are now possible, this approach is exceptionally time consuming and places significant restrictions on patients' everyday lives. “Around 4,000 haemodialysis patients – people who use a dialysis machine to remove excess fluid, minerals and waste from the blood – visit a dialysis centre three times a week for four to five hours. Although they enjoy greater mobility levels and independence, the 400 Austrian peritoneal dialysis patients, whose peritoneum is used to filter the blood, are still required to conduct dialysis treatment themselves three to four times a day or 21-28 times a week – a process that takes half an hour every single time," the ERA-EDTA Congress President explained.

The fact that life expectancy for dialysis patients is 25-50% lower than that of healthy people is a significant additional psychological burden.

“Wherever possible, transplants are used to make life easier for these people and to increase life expectancy. With 4,700 transplant patients (as of 31 December 2014) we are very well placed here in Austria compared with other countries,” Mayer added. In Professor Mayer’s view, the situation is closely linked with the highly favourable Austrian legal framework for organ donation.

That said, just one third of dialysis patients actually receive a transplant, since parallel diseases such as tumours and heart conditions make surgery of this kind impossible. “Teams all over the world are currently working on artificial, portable kidneys – portable mini-
dialysis devices designed to improve long-term quality of life for patients deemed unsuitable for transplants," Mayer said, touching on another of the revolutionary developments that will be presented at this year's ERA-EDTA Congress.

**Presentation of pioneering treatment breakthroughs for diabetes patients**

40-50% of dialysis patients also suffer from diabetes and high blood pressure," Mayer noted. **Pioneering medical advances** promise new treatment approaches for diabetics, a high-risk group. “The results of an international study of new medicines designed to lower blood pressure will be presented at the ERA-EDTA Congress. These drugs are also expected to deliver highly encouraging outcomes in combating kidney disease,” Mayer concluded in anticipation of the upcoming publication of the globally significant findings.

**About ÖGN and ERA-EDTA**

The Austrian Society of Nephrology (ÖGN) is dedicated to improving clinical nephrology with a special focus on dialysis and kidney transplantation. Between 21 and 24 May the European Renal Association – European Dialysis and Transplantation Association (ERA-EDTA) and the ÖGN will co-host the ERA-EDTA Congress at the Austria Center Vienna. With more than 7,000 delegates, the ERA-EDTA Congress is Europe’s largest nephrology and hypertension forum.

**About the Austria Center Vienna**

The Austria Center Vienna is operated by Internationales Amtssitz- und Konferenzzentrum Wien, Aktiengesellschaft (IAKW-AG), which is also responsible for maintaining the Vienna International Centre (VIC). The Austria Center Vienna is Austria’s largest conference centre, with 24 halls, 180 meeting rooms, and some 42,000 square metres of event space (including 22,000 square metres of exhibition space), and is one of the top players on the international conference circuit. IAKW-AG and the Austria Center Vienna are headed by Chief Executive Officer Susanne Baumann-Söllner. www.acv.at.

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