Diabetes and diabetic kidney disease  
– an increasing epidemiological problem

Economical growth, observed in most countries (e.g. China, India and many others) and even in whole continents (like Africa) that were previously regarded as undeveloped and poor, resulted in an increase of global prevalence of obesity, and subsequently of increasing incidence and prevalence of diabetes. Published in 2011 prognosis predict that the prevalence of diabetes of half a billion patients in the year 2030.

Therefore, one can predict that also the number of patients with diabetic kidney disease (or diabetic nephropathy) will increase, even if the relative incidence will decrease (i.e. the percentage of subjects with this complication will be decreasing) as a result of improved treatment and prophylaxy. However, at the moment even the relative prevalence is high, exceeding 40% of patients with diabetes (1-3). As chronic kidney disease (diabetic and non-diabetic) is associated with increased cardiovascular risk (4, 5), one can also predict that cardiovascular mortality and prevalence of other cardiovascular outcomes may increase.

This is the reason for that, that diabetes and diabetic kidney disease were chosen for this issue of „Progress of Medical Science“.

It was of course not possible to address in one issue all the problems connected with diabetic kidney disease. It seems however that early screening and diagnosis, determinating later treatment, are of utmost importance. I would like to encourage the Readers to perform a screening of diabetic kidney disease. It should be done in order to search for increased urinary albumin excretion as well as for early loss of kidney function (glomerular filtration rate).

The principles of monitoring and screening of patients with diabetes are precised in the Guidelines of Polish Society of Diabetology, reading of which I would like to recommend (6), and in case of shortage of time they may be also found at www.cukrzyca.info.pl, where you can check for a solution of any problem connected with diabetes or diabetic kidney disease.

I wish you an interesting reading
Edward Franek

BIBLIOGRAPHY

5. So WY, Kong AP, Ma RC et al.: Glomerular filtration rate, cardiorenal end points, and all-cause mortality in type 2 diabetic patients. Diabetes Care 2006; 29(9): 2046-2052.