

CHRONIC KIDNEY DISEASE IN MALAYSIA

PREVALENCE AND ASSOCIATED FACTORS





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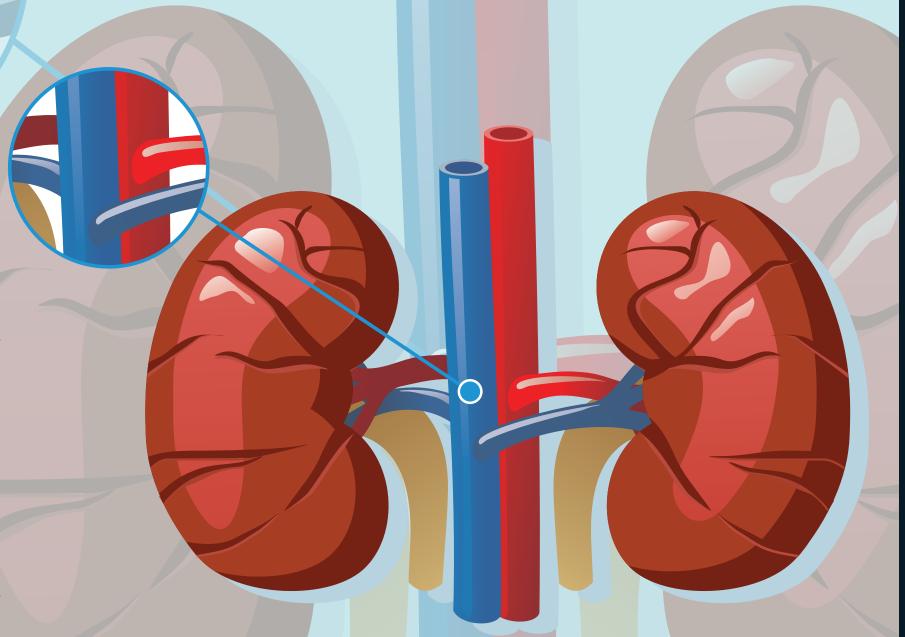
According to the Global Burden of Disease Study 2017, the prevalence of chronic kidney disease (CKD) globally was 9.1%¹. Malaysia recorded a similar prevalence of 9.07% in the 2011's National Health and Morbidity Survey². We aim to determine the current prevalence and associated factors of CKD among adults in Malaysia.

Material and Methods

A nation-wide, population-based, cross-sectional study was conducted in 2018 among adults aged ≥18-year-old. Total of 1,398 adults were randomly selected, using stratified cluster method.

Blood for serum creatinine and random blood sugar was taken from respondents at their home by qualified staff from a nearby Ministry of Health (MOH) hemodialysis unit. Urine albumin-to-creatinine ratio (uACR) was measured using a single urine sample.

The estimated glomerular filtration rate (eGFR) was measured with a calibrated serum creatinine using the CKD-EPI equation. CKD was defined as eGFR < 60 ml/min/1.73m² or the presence of persistent albuminuria if eGFR \geq 60 ml/min/1.73m².



Results

A total of 1398 individuals were approached for this study, and 75% of them (n=1047) consented to participate. Serum creatinine was measured in 977 respondents. The final analysis set comprised of 890 respondents.

Table 1 shows the prevalence of CKD by stages (n = 890). Our study shows that the prevalence of CKD in Malaysia was 15.48% (95% CI: 12.30, 19.31). Using multivariate analysis, as seen in Table 2, shows that hypertension (aOR 3.72), diabetes mellitus (aOR 3.32), increasing Body Mass Index (aOR 1.06), and increasing age (aOR 1.06) were significantly associated with CKD.

Table 1: Prevalence of CKD by stages (N = 890)

CKD Stages	n	Estimated population	Prevalence (%)	95% CI
Total CKD	158	2,607448	15.48	12.30, 19.31
Stage 1	42	649,069	3.85	2.51, 5.87
Stage 2	51	811,853	4.82	3.14, 7.32
Stage 3	59	1,091,582	6.48	4.41, 9.43
Stage 4-5	6	54, 944	0.33	0.14, 0.78

Discussion

This study has demonstrated a rising prevalence of CKD in Malaysia over the last 7 years since the previous study, the prevalence of 9.07 in 2011 to 15.48% currently. The probable reasons accounting for this rising trend are the increasing prevalence of non-communicable diseases that is associated with CKD and changes in population demographics.

National Health Morbidity Surveys have shown an alarming increase in the prevalence of diabetes in Malaysia over the past decade; from 11.2% in 2011² to 18.3.2% in 2019³; with the prevalence of hypertension persistently high at above 30.0% in the same surveys. The prevalence of overweight and obesity among adults had also increased during the same period. Prevalence of obesity was 15.1% in 2011² and 19.7% in 2019³.

Population ageing in Malaysia could also have contributed to the observed increase in CKD prevalence as the median age of the overall Malaysian population was 26.3 years in 2010 4 and 28.6 in 2018⁵.

Conclusion

The results show the need to continue surveillance for CKD and its associated factors in Malaysia and to implement new strategies aimed at preventing the development and progression of CKD. The adoption of CKD prevention and management initiatives (ACT-KID 2018-2025) ⁶, can improve CKD care at every level especially its prevention and early detection.

Table 2: Factors associated with chronic kidney disease by univariate and multivariate analysis (N = 890)

Table 2. Factors associated		,	,			
Variable	N	% with CKD	p-value	Unadjusted OR (95% CI)	p-value	Adjusted OR* (95% CI)
Age (years)			<0.001	1.08 (1.06,1.09)	<0.001	1.06 (1.04,1.08)
Gender						
Male	59	16.1		1		1
Female	99	18.9	0.287	1.21(0.85,1.73)	0.198	1.50 (0.81, 2.79)
Race				(2 22, 2,		,
Malay	110	18.6		1		1
Chinese	11	12.6	0.176	0.63 (0.33, 1.23)	0.196	0.60 (0.27, 1.31)
Indian	7	13.0	0.303	0.65 (0.29,1.48)	0.204	0.53 (0.20, 1.42)
Others	30	18.9	0.949	1.02 (0.65, 1.59)	0.153	1.53 (0.86, 2.73)
Strata	E.C.	45.4		4		1
Urban Rural	56 102	15.1 19.6	0.085	1 1.37 (0.96,1.96)	0.141	1.42 (0.89,2.27)
Household Income	102	19.0	0.085	1.37 (0.36,1.36)	0.141	1.42 (0.89,2.27)
Low	112	19.4		1		1
(<rm 2614="" month)<="" per="" td=""><td></td><td>20.7</td><td></td><td>-</td><td></td><td></td></rm>		20.7		-		
Middle	42	14.8	0.506	1.44 (0.49,4.24)	0.133	1.48 (0.89, 2.45)
(RM 2614-10455 per month)						
High	4	14.3	0.943	1.04 (0.34,3.15)	0.307	1.93 (0.55, 6.87)
(≥RM 10456 per month)						
Ever Cigarette Smoking						
Yes	47	16.6	0.542	0.89 (0.61,1.30)	0.251	1.46 (0.77, 2.78)
No	111	18.3		1		1
Physical Activity Active	83	15.6		1		1
Inactive	75	21.0	0.038	1.442(1.02,2.04)	0.368	1.23 (0.79, 1.91)
Diabetes	,,	21.0	0.030	11442(1102,2104)	0.300	1.23 (0.73, 1.31)
Yes	80	46.0	<0.001	6.96 (4.76,10.18)	<0.001	3.32 (2.20,5.03)
No	78	10.9		1		1
Hypertension						
Yes	141	31.1	<0.001	11.14 (6.60,18.81)	<0.001	3.72 (2.08,6.66)
No	17	3.9		1		1
Hypercholesterolemia	=0	22.0	.0.004	0.00 (0.40.4.45)	0.540	4 47 (0 72 4 07)
Yes	79 67	30.9 12.7	<0.001	3.08 (2.13,4.45) 1	0.513	1.17 (0.73, 1.87) 1
No Heart Disease	07	12.7		1		1
Yes	18	30.0		2.03 (1.14,3.64)	0.152	0.58 (0.27, 1.22)
No	136	17.4	0.017	1	0.152	1
Family History of						
Kidney Disease						
Yes	17	20.5	0.521	1.20 (0.68,2.11)	0.099	1.89 (0.89, 4.01)
No	139	17.6		1		1
Painkiller Use		44.	0.001	0.04 (0.77 4.43)		4.00 (0.70 + 50)
Yes	80	16.4	0.221	0.81 (0.57,1.14)	0.723	1.08 (0.70, 1.68)
No Traditional Medicine Use	78	19.6		1		1
Yes	17	15.3	0.468	0.82 (0.47,1.41)	0.281	0.69 (0.35,1.36)
No	140	18.1	01700	1	31201	1
BMI (kg/m2)			<0.001	1.07 (1.03,1.10)	0.006	1.06 (1.02,1.10)
Abdominal obesity				. , , ,		
Yes	123	20.9	0.001	2.02 (1.35,3.02)	0.260	0.68 (0.35, 1.33)
No	35	11.6	1			1

*Final model was adjusted by age, diabetes, hypertension, and BMI OR = Odds Ratio CI = Confidence Interval Definition of chronic kidney disease status:

eGFR< 60 ml/min/1.73 m2 and/or albuminuria eGFR = estimated glomerular filtration rate

BMI = Body Mass Index

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