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Policy Options for the Prevention and Progression Control of Diabetic Kidney Disease

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Diabetic kidney disease (DKD) remains the leading cause of end-stage kidney disease (ESKD) worldwide and represents a major contributor to cardiovascular morbidity, mortality, and healthcare expenditure. In Korea, the burden of DKD continues to rise in parallel with the increasing prevalence of diabetes and population aging, posing substantial challenges to healthcare systems. Despite advances in therapeutic strategies, including renin–angiotensin system blockade, sodium–glucose cotransporter 2 (SGLT2) inhibitors, and non-steroidal mineralocorticoid receptor antagonists, the progression of DKD remains insufficiently controlled in real-world practice. A critical gap exists between evidence-based recommendations and their implementation. Early-stage DKD is frequently underdiagnosed due to suboptimal screening practices, particularly the underutilization of urine albumin-to-creatinine ratio testing. Furthermore, proven kidney-protective therapies are often underprescribed or initiated too late, and long-term adherence to lifestyle modification remains suboptimal. These gaps suggest that the challenge in DKD management is not solely due to a lack of effective interventions, but is more closely related to limitations in timely identification, delivery, and sustained implementation of care. This lecture aims to explore policy options to address these unmet needs and improve both prevention and progression control of DKD. Key policy domains include strengthening early detection through systematic screening programs, improving access to and reimbursement for evidence-based therapies, and promoting integrated, multidisciplinary care models that bridge primary and specialty care. In addition, digital health strategies—such as mobile application–based lifestyle interventions, remote monitoring, and data-driven risk stratification—offer promising opportunities to enhance patient

engagement and enable continuous, personalized care. Finally, a structured policy framework is proposed to translate these strategies into practice, emphasizing early detection, effective treatment, continuous monitoring, and active patient engagement. Addressing DKD at the policy level is essential to reduce disease burden, delay progression to ESKD, and improve long-term outcomes. Bridging the gap between evidence and implementation will be the key to achieving meaningful impact in DKD care.

Keywords: Diabetic Kidney Disease, Chronic Kidney Disease, Health Policy, Early Detection, Digital Health