

Editorial



The Proposed Chronic Kidney Disease Management Act in Korea: A Step Toward a National Strategy for Kidney Disease Prevention and Care

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OPEN ACCESS

Received: Mar 10, 2026
Revised: Mar 13, 2026
Accepted: Mar 13, 2026
Published online: Mar 24, 2026

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Electrolyte and Blood Pressure Research

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Chronic kidney disease (CKD) has quietly become one of the most pressing yet underrecognized public health challenges of our time. Globally, an estimated 788 million people aged 20 years and older were living with CKD in 2023, a marked increase from 378 million in 1990 and 627 million in 2013. The global age-standardized prevalence of CKD was estimated to be 14.2% among adults [1]. Consequently, CKD has become the ninth leading cause of death, the twelfth leading cause of disability-adjusted life years, and the seventh leading cause of cardiovascular mortality worldwide [1]. Korea is no exception to this trend. With rapid population aging and the continuing rise of major CKD risk factors—such as diabetes, hypertension, and obesity—the burden of CKD is expected to grow further. Recent reports estimate the age-standardized prevalence of CKD among Korean adults to range from 5.5% to 10.5% in 2023 [1,2]. The prevalence increases sharply with age, reaching 25.1% among individuals aged ≥ 70 years [2].

The consequences of CKD progression are profound. Kidney failure, also known as end-stage kidney disease (ESKD), requires kidney replacement therapy, including dialysis or kidney transplantation. According to the ESKD Fact Sheet 2024 published by the Korean Renal Dialysis System Registry Committee of the Korean Society of Nephrology (KSN), the number of patients initiating dialysis doubled over the past decade, with incidence increasing from 9,335 patients in 2010 to 18,598 in 2022. During the same period, prevalence rose from 58,860 to 134,826 patients [3]. This rapid increase has placed a substantial financial burden on Korea's healthcare system. The annual medical cost per patient undergoing hemodialysis exceeds 27 million Korean won, and national health insurance spending on dialysis treatment alone reached approximately 2.6 trillion Korean won in 2023 [4]. Despite its profound impact on patients' quality of life and the escalating social, economic, and healthcare burden, CKD has historically received less policy attention than other major noncommunicable diseases.

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Funding

None.

Conflicts of interest

The authors declare no commercial conflicts of interest related to this article. Sungjin Chung currently serves as Director of the Clinical Practice Guidelines Committee of the Korean Society of Nephrology (KSN). Jung Pyo Lee serves as Secretary General of the KSN. Hyeong-Cheon Park is President of the KSN and President-Elect of the Asian Pacific Society of Nephrology.

Data sharing statement

The data that support the findings of this study are available from the corresponding authors upon reasonable request.

Authors' contributions

Conceptualization: JPL; Resources: JPL; Supervision: HCP; Visualization: JPL; Writing - original draft: SC; Writing - review & editing: HES.

Against this backdrop, the KSN launched the Kidney Health Plan 2033 in 2023. The initiative outlines three major goals to be achieved by 2033: 1) a 10% reduction in the number of patients with CKD; 2) a 10% reduction in the proportion of diabetic kidney disease among incident patients receiving kidney replacement therapy; and 3) an increase of up to 33% in the proportion of patients with ESKD treated with home-based therapies, including peritoneal dialysis and kidney transplantation [5]. Through this initiative, the KSN and the nephrology community have worked to advance policy awareness and improve kidney health outcomes. One of the key action plans undertaken by the KSN has been the development and implementation of clinical practice guidelines tailored to Korea's specific healthcare context, including the KSN 2023 Practical Recommendations for the Management of Diabetic Kidney Disease and the KSN 2025 Practical Recommendations for the Management of Hypertensive Kidney Disease [6,7].

Building on these efforts, the Chronic Kidney Disease Management Act was recently proposed in the National Assembly by Representative Nam et al. [4]. The bill represents a significant policy initiative aimed at establishing a comprehensive national framework for CKD prevention and management. Importantly, it signals a shift in Korea's approach to kidney disease—from fragmented frontline clinical care and isolated professional efforts toward a coordinated national policy framework. Why should CKD, among the many diseases affecting the population, warrant dedicated national policy attention? CKD presents unique challenges for both clinical management and health systems. Most patients with CKD have long-standing underlying conditions such as diabetes, hypertension, glomerular diseases, or genetic disorders. When clinical attention is directed primarily toward managing these underlying diseases, early changes in kidney function may be overlooked. Moreover, CKD often progresses silently over many years and may remain undetected until advanced stages. By the time symptoms attributable to CKD itself appear, substantial and often irreversible kidney damage may already have occurred. Early detection, diagnosis, and intervention are therefore critical. Clinical guidelines and expert consensus statements increasingly emphasize a holistic approach to CKD management, incorporating risk modification and chronic care models that integrate system-, provider-, and patient-level interventions to improve outcomes [8,9]. Effective CKD control cannot rely solely on individual clinical encounters. Large-scale population screening strategies, public awareness campaigns, and long-term surveillance systems are needed to identify high-risk populations and monitor disease trajectories. International policy discussions, including those led by the World Health Organization and global nephrology organizations, increasingly highlight the importance of coordinated kidney health strategies integrating prevention, treatment, and research [10].

In this context, the proposed CKD Management Act will play a pivotal role in bridging the gap between clinical practice and government policy, providing a foundation for collaborative national efforts to improve kidney health. The proposed legislation introduces several institutional mechanisms designed to strengthen CKD management in Korea. First, it mandates the development of a five-year national CKD management plan led by the Ministry of Health and Welfare, which will define national strategies for CKD prevention, diagnosis, treatment, and research [4]. Long-term planning is essential because effective CKD prevention requires sustained investment in public health infrastructure and chronic disease management. Second, the Act proposes establishing a national CKD registry and statistical system to systematically collect data on CKD incidence, treatment patterns, and outcomes [4]. National registries are critical tools for kidney health policy. Countries with

well-established renal registries have been able to track epidemiological trends, evaluate treatment quality, and guide resource allocation more effectively. Third, the legislation emphasizes prevention and education, including the development of educational materials, public awareness initiatives, and counseling services related to CKD [4]. Because CKD is closely linked to common metabolic diseases, prevention strategies targeting diabetes and hypertension are likely to yield substantial long-term benefits. In addition, the Act allows national and local governments to provide financial support for patients with ESKD, recognizing the economic hardship associated with long-term dialysis therapy [4]. This provision acknowledges that CKD is not only a medical condition but also a major socioeconomic challenge. Finally, the legislation introduces a certification system for dialysis facilities aimed at improving treatment quality and patient safety [4]. Quality oversight is particularly important in dialysis care because treatment is complex, resource-intensive, and associated with significant risks of complications.

Until recently, Korea lacked a dedicated legislative framework addressing CKD as a national health priority. The proposed CKD Management Act therefore represents a critical turning point in kidney health policy by establishing a comprehensive framework for prevention, surveillance, treatment, and patient support.

Major international nephrology societies—including the International Society of Nephrology, the American Society of Nephrology, the European Renal Association, and the Asian Pacific Society of Nephrology—have issued statements supporting the bill, recognizing its significance and importance (**Fig. 1**). If the bill is passed and effectively implemented, it has the potential to reduce the burden of kidney failure, improve patient outcomes, and strengthen the sustainability of Korea's healthcare system. More importantly, it offers an opportunity to reposition kidney health as a national public health priority and to align clinical expertise with coordinated government policy. Such leadership could place Korea at the forefront of global efforts to address the growing burden of kidney disease. The foundation is already in place—what remains now is decisive action.

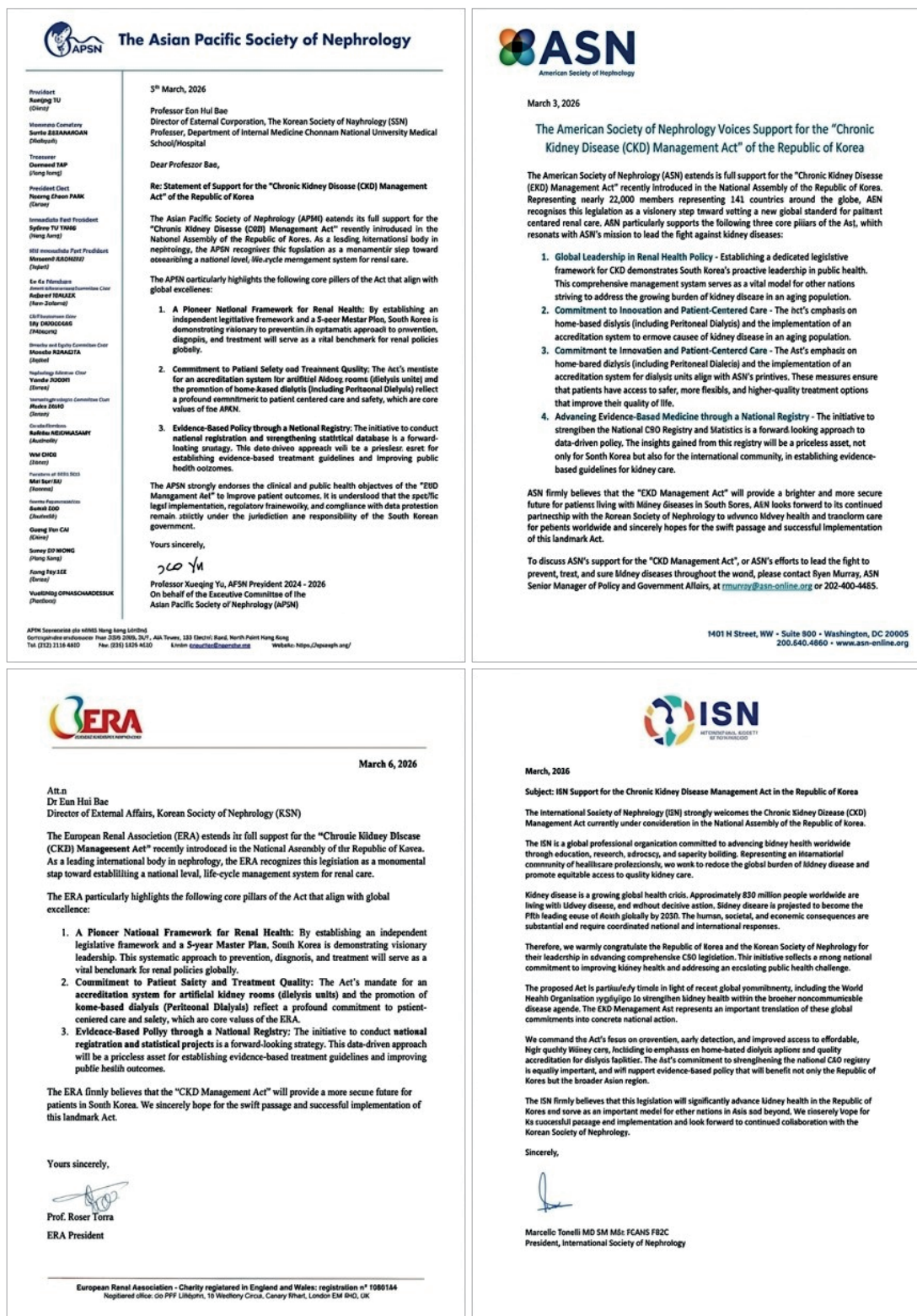


Fig. 1. Support statements from major international nephrology societies: Asian Pacific Society of Nephrology, American Society of Nephrology, European Renal Association, and International Society of Nephrology (from top to bottom, left to right). These materials were provided by the External Affairs and Cooperation Committee of the Korean Society of Nephrology.

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