April 9, 2021

Estimating Kidney Function: An Interim Report from the NKF-ASN Task Force

Last month, ASN and NKF asserted that race modifiers should not be included in kidney function estimating equations and that a suitable approach be put in its place that is accurate; representative for all regardless of race, ethnicity, age, or sex; not differentially produce bias, inaccuracy, or inequalities; and be standardized across the United States. Producing such a national standard depends on coordinating efforts to replace the existing equations for estimating kidney function with a suitable approach.

Today, the Journal of the American Society of Nephrology (JASN) and the American Journal of Kidney Diseases (AJKD) published the interim report of the NKF-ASN Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Disease.

This interim report provides an overview of the history of estimating GFR and the many considerations identifying, and implementing, a kidney function estimating equation that does not include race and does not differentially induce bias and inaccuracy by age, sex, or race.

The report describes three phases of the work of the task force: 1) clarifying the problem and evidence; 2) evaluating the approaches to address race in eGFR estimation; and 3) assessing alternative approaches to replace existing equations for estimating kidney function.

In 16 of 40 sessions, conducted over seven months, the Task Force heard from 90 experts from 19 U.S. states and across seven other countries. Based on testimony and data reviewed, the task force produced 30 statements of evidence and value that will be a cornerstone in forging a path forward. These statements address:

- equity and disparities;
- race and racism;
- GFR measurement, estimation, and equation performance;
- laboratory standardization; and
- patient perspectives.

Members of the task force identified 26 different approaches to estimating and reporting estimated kidney function and attributes to be considered in recommending alternative approaches to estimation of kidney function. Finally, in three community sessions, the task force heard from medical trainees, healthcare professionals and scientists, and patients.
Josephine P. Briggs, MD, and Harold I. Feldman, MD—the Editors-in-Chief of JASN and AJKD respectively—also published a joint editorial today, “Race and the Estimation of GFR: Getting it Right.” They assert, “As journal editors, we recognize published research that has emphasized race as a biologic construct has contributed to a failure to address core problems.” They add that publishing the interim report is an important step “in the pursuit of effective interventions that will lessen race-based disparities in health. It includes being more cognizant of how reporting of science can perpetuate racism. In this spirit, we are grateful for the opportunity to promote and disseminate the work of the task force.”

The task force welcomes input about the approaches inventoried in the interim report. Please provide comment via this link by Friday, April 30, 2021.

Based on this input and the considerable feedback already received from stakeholders, the task force is currently drafting its final report. ASN and NKF commend the task force for its thoughtfulness, thoroughness, time, and effort. Both the interim and final reports will guide the kidney community in developing an evidence-based guideline for practice.