

# The Global State of Hyperkalaemia

AstraZeneca surveyed 1,000 patients with chronic kidney disease (CKD) or heart failure (HF) and 500 healthcare professionals (nephrologists and cardiologists) around the world to understand their perspectives on hyperkalaemia (HK).



USA

SPAIN



UK



ITALY



JAPAN



**5** countries



**1,000** patients



**500** healthcare professionals



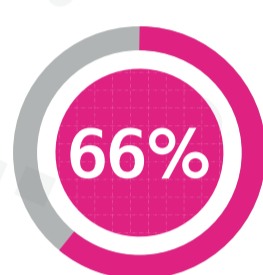
**K+**

HK, or high levels of potassium in the blood, is a potentially serious medical condition that is a common complication of CKD and HF.<sup>1</sup>

**K+**

## Survey results

Most patients with CKD or HF generally **lack awareness** of HK, which if left untreated could result in additional cardiovascular complications, including cardiac arrest in severe cases.<sup>1</sup>



66% of patients don't realise HK is a potential complication of their condition.<sup>2,a</sup>

<sup>a</sup>The risk of HK is increased for patients who take common life-saving medications for CKD and HF, such as RAAS-inhibitors which can increase potassium in the blood.<sup>2</sup>



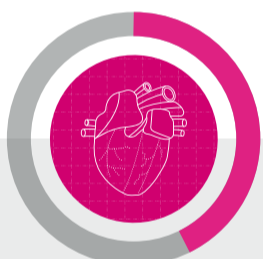
On average, patients only recognise **3 out of 10 symptoms** listed.<sup>2</sup>

HCPs value the importance of educating their patients about HK, **yet awareness remains low among patients and challenges associated with the management of the condition persist.**

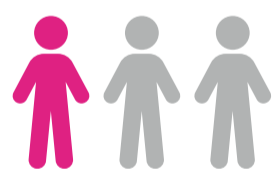


Both nephrologists (**75%**) and cardiologists (**43%**) tend to rank HK in their top 3 complications\* to manage.<sup>2</sup>

\*From a list of 9 common conditions for nephrologists and 7 for cardiologists



However, only **45%** of patients with CKD and **31%** of patients with HF recall potassium management being mentioned as important for their condition.<sup>2</sup>



Most patients are interested in learning more about HK from their specialists, yet approximately **one-third of HCPs surveyed did not feel comfortable discussing HK with their patients.**<sup>2</sup>



## How to improve the state of HK

Nephrologists and cardiologists have different concerns in managing HK, but agree **there is a need for clearer guidelines and management strategies.**<sup>2</sup>



A third (**34%**) of HCPs claim that HK is easy to manage in their patients.<sup>2</sup>



Less than half of nephrologists (**44%**) and cardiologists (**41%**) agree they have clear guidelines on how to classify HK depending on potassium levels.<sup>2</sup>

## AstraZeneca is committed to:

- **Leveraging these findings to build awareness** of HK among both patients and HCPs to drive earlier diagnosis.
- **Continuing to champion robust collection of data** for all stages of kidney and cardiovascular disease to better understand the patient journey.
- **Supporting patients, HCPs, and patient organisations** to uncover new approaches and solutions capable of transforming care for the millions of people living with CKD and HF around the world.

### References:

1. Rosano GMC et al. Expert consensus document on the management of hyperkalaemia in patients with cardiovascular disease treated with renin-angiotensin-aldosterone system inhibitors: Coordinated by the Working Group on Cardiovascular Pharmacotherapy of the European Society of Cardiology. Eur Heart J Cardiovasc Pharmacother. 2018; 4(3):180-8.
2. Global State of Hyperkalaemia Survey Key Findings, REF-129958, AstraZeneca Pharmaceuticals LP.
3. Weir MR and Rolfe M. Potassium homeostasis and renin-angiotensin-aldosterone system inhibitors. Clin J Am Soc Nephrol. 2010;5(3):531-548.