

## A statement from the ACB and LIMS manufacturers regarding CKD-EPI issued 09<sup>th</sup> February 2016

1. The ACB supports the NICE recommendation from CG182 on introduction of the CKD-EPI<sub>creatinine</sub> equation for estimation of GFR to replace MDRD-based equations, and recommends adoption of this approach
2. As stated in CG182, this may be supplemented by measurement of cystatin C and estimation of GFR using the CKD-EPI<sub>cystatin</sub> equation in specific cases where clinically indicated as determined by reference to the NICE guideline. This part of the guideline requires local discussion and agreement between laboratory professionals, nephrologists and commissioners
3. The ACB Scientific Committee is engaged in constructive discussions with a number of LIMS manufacturers (CliniSys, ISS, Intersystems, CGM, Roche, Technidata, CSC and Centennial/Meditech) who have agreed to create harmonised rule-based routines that will enable calculation of CKD-EPI eGFR using creatinine alone and cystatin C alone, giving the same eGFR result for the same demographic and biochemical data independent of LIMS product
4. The rule based update enabling calculation of CKD-EPI<sub>creatinine</sub> eGFR will be made available by the LIMS suppliers to laboratories expressing a wish to implement CKD-EPI reporting of eGFR. There will be minimal additional cost for laboratories using compatible software versions
5. Laboratories currently considering implementing this change are encouraged to await completion of the testing phase of the harmonised rule bases
6. Equations and algorithms to be used will be as described by Inker et al (N Engl J Med 2012;367:20-9). The ACB is not currently recommending implementation of the combined CKD-EPI<sub>creatinine-cystatin</sub> equation
7. The ACB suggests that laboratories should implement the change from MDRD to CKD-EPI<sub>creatinine</sub> no later than April 2017