Kidney disease affects several million people in the UK and has a devastating impact on the lives of patients, their families and carers. Research is therefore essential to better understand and prevent kidney disease and develop new and improved treatments.

In 2014, £16.4M was expended on renal research - 0.86% of the total £1.9BN investment and listed at only 15th out of the 21 health categories reported (UK Clinical Research Collaboration HRAF Report 2015). Renal clearly remains significantly underfunded compared to the human and economic cost of its disease burden (£1.4bn NHS cost of renal care and 144.7 DALYs for renal disease).

Kidney Research UK’s strategy aims to tackle key areas including evidence gaps in renal research, lack of funding, growing and sustaining research capacity and patient involvement in research. These ambitions are demonstrated through a series of new initiatives and funding programmes to accelerate renal research investment.

For example, re-introduction of the senior clinical fellowship into the charity’s grant portfolio in honour of Professor David Kerr and his legacy, mentoring careers in nephrology. Supporting clinicians who have attained a higher degree and wish to further their research, this jointly funded award through the Medical Research Council (MRC) Clinical Scientist programme, attracts non-renewal funding into renal research. Support is also generated through a campaign-driven appeal focused on the established research community allowing them to contribute to their legacy by securing the future of the next generation in nephrology.

In 2015, the charity also announced a new 3-year funding stream in partnership with The Stoneygate Trust, supporting established researchers to undertake innovative research to advance our knowledge of kidney disease, refine current treatments or lead to new advances. This programme of research grants has been established to mark the retirement of Professor John Feehally from clinical practice, with the themes for the first funding round chosen by him and including glomerular disease, proteinuria and lifestyle changes in people with kidney disease. Five awards have been made to date.

Launched in 2013, our Making Every Kidney Count appeal is engaging the charity’s supporters to help deliver an ambitious series of programme grants to accelerate research in renal transplantation and encourage inter-institutional and industry collaboration. Two awards have already been addressing the need to make more organs available for transplantation and tackling rejection, to make transplanted kidneys last longer. The next funding call, released in Spring 2016, aims to support 2-3 more programme grants under the same themes.

Acknowledging that allied health professionals require funding support to develop their research careers and opportunities for them are scarce, from 2016 the charity has re-introduced fellowship awards specifically to support this group of renal experts to undertake research. In the next year, we also intend to provide support to address the loss of experts and their developed skills following personal leave, and who wish to return to their career in the renal research sector.

The imminent publication of the UK Renal Research Strategy produced by the kidney sector will provide a direction for renal research, policy and funding communities. Many of Kidney Research UK’s current and new activities align with the emerging recommendations in the report and this proposed session or poster will illustrate how we are meeting the challenge of building research capacity and aims to stimulate interest in renal research amongst multi-disciplinary delegates.

References:
13 http://www.hrcsonline.net/pages/uk-health-research-analysis-2014