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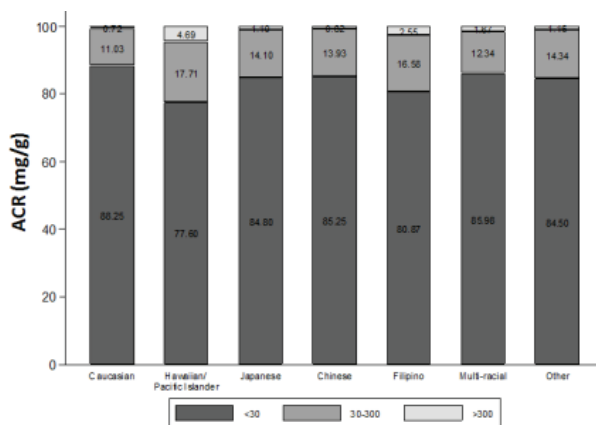
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EARLY CHRONIC KIDNEY DISEASE AWARENESS IN A RACIALLY/ETHNICALLY DIVERSE POPULATION OF HAWAII Connie Rhee¹, Victoria Page², Glen Hayashida², Amy You¹, Kamyar Kalantar-Zadeh¹ ¹UC Irvine, Orange, CA; ²National Kidney Foundation-Hawaii, Honolulu, HI

While various traditional risk factors for chronic kidney disease (CKD) are highly prevalent in Hawaii (diabetes, hypertension), there is limited data on the prevalence of early CKD among the racially/ethnically diverse population of this state. To address this knowledge gap, the National Kidney Foundation of Hawaii (NKFH) developed the Kidney Early Detection Screening (KEDS) Program with the objectives of promoting early CKD screening and advancing knowledge about kidney disease among its residents across the state of Hawaii. We examined the distribution of early CKD (e.g., micro- and macroalbuminuria) and self-awareness among a racially/ethnically diverse group of participants from the KEDS Waves 1-2 (2006-13) screening events. Among 2574 participants, the most predominant racial /ethnic groups were participants of Caucasian (22%), multi-race (19%), Japanese (18%), Filipino (16%), Hawaiian/Pacific Islander (8%), and Chinese (5%) background. Compared with other racial/ethnic groups, Hawaiians/Pacific Islanders had a higher prevalence of diabetes (14-25% vs. 35%, respectively) and hypertension (30-48% vs. 53%). Compared with other racial/ethnic groups, a greater proportion of Filipino and Hawaiians/Pacific Islander



participants had micro- (11-14%, 17%, and 18%, respectively) and macroalbuminuria (1-2%, 3%, 5%, respectively; **Figure**). However, there was a low prevalence of self-reported kidney disease across all racial/ethnic groups (1-2% vs. 7% among all racial/ethnic

groups vs. Hawaiians/Pacific Islanders, respectively). Despite a high prevalence of early CKD, particularly amongst Hawaiians/Pacific Islanders, self-awareness was low across all racial/ethnic groups.