

Finding kidney disease sooner in communities most at risk

Submission date 03/03/2026	Recruitment status Recruiting	☐ Prospectively registered
		☐ Protocol
Registration date 13/07/2026	Overall study status Ongoing	☐ Statistical analysis plan
		☐ Results
Last Edited 05/08/2026	Condition category Urological and Genital Diseases	☐ Individual participant data
		☒ Record updated in last year

Plain English summary of protocol

Background and study aims

Chronic kidney disease can develop without symptoms, and people from ethnic minority backgrounds are disproportionately affected. This study tests whether community kidney health check events, delivered with trained peer educators and community support, are an acceptable and practical way to identify possible early kidney disease in people of African ancestry.

Who can participate?

Adults aged 18 and over who want a kidney health check.

What does the study involve?

Participants will attend a local community event, and can choose one or more of the following tests:

- A urine albumin to creatinine ratio test on site.
- A take-home urine test kit supported by the Healthy.io phone app.
- A finger-prick blood test to estimate kidney function (creatinine and estimated glomerular filtration rate).

They can take part without giving personal details if you prefer. They may be asked how they heard about the event and to complete a short feedback questionnaire. If a test suggests possible kidney disease and they agree to be contacted, the team may follow up by phone or email after 4 to 6 weeks, and again later if needed. A small number of people will be invited to a 30-minute interview about their experience.

What are the possible benefits and risks of participating?

Benefits may include learning more about kidney health and identifying possible kidney problems earlier, with advice to contact your GP if needed. Risks include brief discomfort or bruising from the finger-prick test, and possible worry if an abnormal result is found.

Where is the study run from?

The renal research team at King's College Hospital, working with King's College London and community partners including Africa Advocacy Foundation, using faith and non-faith community sites.

When is the study starting and how long is it expected to run for?
The study is expected to run for 40 months; September 2022 to 31 December 2027.

Who is funding the study?

1. Kidney Care UK
2. Kidney Research UK

Who is the main contact?

Dr Kate Bramham, Chief Investigator, King's Kidney Care, King's College Hospital, kate.bramham@kcl.ac.uk

Contact information

Type(s)

Principal investigator, Public, Scientific

Contact name

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Additional identifiers

Integrated Research Application System (IRAS)

302730

Central Portfolio Management System (CPMS)

56127

Study information

Scientific Title

Health Inequalities in kiDney Disease: mEeting the urgent need to identify early disease in high-risk commuNities (HIDDEN) CKD: a feasibility study

Acronym

HIDDEN-CKD

Study objectives

To work out the best way to provide community kidney health checks for people of African Ancestry

Ethics approval required

Ethics approval required

Ethics approval(s)

Approved 19/08/2022, Health and Care Research Wales (Floor Four, North Welsh Government Offices Cathays Park King Edward VII Avenue Cardiff, Cardiff, CF10 3NQ, United Kingdom; +44 02920 230457; Wales.REC7@wales.nhs.uk), ref: 22/WA/0200

Primary study design

Observational

Secondary study design

Cohort study

Study type(s)

Health condition(s) or problem(s) studied

Chronic Kidney Disease

Interventions

Stage 1

Community kidney health check events will be hosted at ten community sites by peer educators. People will be offered the opportunity to have albuminuria testing by 'peer-educators' or a kit to perform the test at home and/or a finger prick kidney function (creatinine) test and advice provided if kidney disease is suspected.

Participants will be invited to provide details about how they found out about the event (e.g. social media or through community), and the option to provide demographics, medical and family history, personal and GP contact details.

Attendance at events and number of people undergoing testing will be recorded.

Participant experience of events and acceptability will be assessed by Likert scale.

Participants with abnormal albuminuria/creatinine results by peer educators by email/telephone (if provided) after 4-6 weeks to confirm if they have had further testing and again at 3 months if they have not been to their GP.

Stage 2

Participants who attended events but did and did not undergo testing, and with positive and negative results who have provided contact details will be approached to participate in semi-structured interviews.

Intervention Type

Other

Primary outcome(s)

1. HIDDEN 1: The number of participants attending events measured using data recorded in event logs at months 4 to 6 during events at faith and non-faith centres

2. HIDDEN 1: The number of participants receiving testing measured using captured through event logs and testing records at months 4 to 6 during events at faith and non-faith centres

3. HIDDEN 1: The proportion of the available community who participate measured using data collected from event logs and community population estimates at the end of months 4 to 6 and analysed in months 7 to 12

Key secondary outcome(s)

1. HIDDEN 2 measured using 1. Demographics/blood-pressure/weight/height/event-questionnaire data will be summarised according to data distribution. Participants' preferred strategy of ACR testing (on site or Healthy-io) will be stratified according to age and sex. 2. The proportion of cases of CKD (KDIGO criteria) will be calculated and reported according to testing method (on-site or home) and prevalence 95% confidence intervals reported. Results will also be stratified by age and sex. at Month 0-1 • Peer educator training Month 2-6 • Community engagement • Events at faith and non-faith centres • Interim review of first two events Month 7-12 • Data analysis and dissemination

2. Demographic, blood pressure, weight, height and participants' preferred ACR testing strategy measured using event questionnaire data stratified by age and sex using data collected at months 2 to 6

3. The proportion of CKD cases, defined by KDIGO criteria, measured using study data to calculate and report by testing method with 95 percent confidence intervals; results will be stratified by age and sex using data collected during months 2 to 6, at months 7 to 12

Completion date

31/12/2027

Eligibility

Key inclusion criteria

1. Is 18 years of age or older
2. Desire to have kidney health testing

Healthy volunteers allowed

Yes

Age group

Mixed

Lower age limit

18 Years

Upper age limit

99 Years

Sex

All

Total final enrolment

0

Key exclusion criteria

1. Unable to participate with testing procedures
2. Lacking capacity to consent

Date of first enrolment

16/09/2022

Date of final enrolment

31/05/2027

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Golden Jubilee Wing Suite 3, King's College Hospital

Golden Jubilee Wing Suite 3

Kings College Hospital

Denmark Hill

London

England

SE5 9RS

Sponsor information

Organisation

King's College London

ROR

<https://ror.org/0220mzb33>

Funder(s)

Funder type**Funder Name**

Kidney Cancer UK

Alternative Name(s)

Kidney Cancer Care Ltd., KCUK

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United Kingdom

Funder Name

Kidney Research UK

Alternative Name(s)**Funding Body Type**

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan**IPD sharing plan summary**

Data sharing statement to be made available at a later date