

ECONOMIC LOSS OF CHRONIC KIDNEY DISEASE OF UNKNOWN ETIOLOGY (CKDu): A CASE STUDY OF ANURADHAPURA DISTRICT SRI LANKA

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Chronic Kidney Disease of Unknown Etiology (CKDu) places a significant economic burden on both affected households and the country. This study assesses both direct and indirect economic losses incurred by the CKDu patients and reviews the government expenditure on CKDu during the past five years. The study uses primary data from a representative sample of 46 registered CKDu patients from the *Madawachchiya* Divisional Secretariat division collected through a pre-tested questionnaire and secondary data from the annual reports of the Ministry of Finance. The cost of illness method was employed assuming that the mean annual total economic loss is comprised of mean annual direct cost and mean annual indirect cost. The mean number of years since the diagnosis of the disease is 4.41 (SD 1.42). Sixty one percent of affected households are currently employed while 32% are unemployed due to the illness. The majority (37%) of the employed patients are farmers. The mean annual direct cost of a patient at end-stage treatment (Rs. 41305.00) is nearly six times higher than that of the patients at initial stages (Rs. 6618.82) of illness. Also, the highest proportion of the direct cost (64.9%) is incurred for transportation to obtain medical treatments. The monthly mean indirect cost calculated through the loss of farming income reveals that farming households incur the highest indirect cost (Rs. 22,120) compared to other livelihoods. Furthermore, the mean annual total economic loss of the sample is high as Rs. 151,765 with more so for patients at the haemodialysis stage (Rs. 158,248). Also, during the period 2014 – 2018, the government has spent Rs. 3.88 billion capital expenditure, with the highest incremental change (193%) during 2015 – 2016, on disease prevention programmes, construction of treatment centres, and provision of safe drinking water. While continuing these planned interventions by the government to improve the quality of life and financial situation of affected households, a collective effort of all responsible stakeholders is vital to eradicate the CKDu issue.

Keywords: Chronic kidney disease of unknown etiology, Cost of illness, Direct cost, Indirect cost