LETTERS

CHRONIC KIDNEY DISEASE IN CENTRAL AMERICA: THE BIG PICTURE

In their November Editorial, Wesseling et al. relay conclusions of the First International Research Workshop on Mesoamerican Nephropathy specifying heat exposure and dehydration as key risk factors or essential cofactors for chronic kidney disease of unknown origin (CKDu).^{1,2} The Editorial simultaneously downplays substantial research from El Salvador and Sri Lanka, which suggests toxic agrochemicals as key in the disease's etiology.^{3,4}

The authors also downplay the degree to which industry has sponsored some of the major research carried out to date. The largest study of CKDu in Nicaragua, for example, was organized by the World Bank's International Finance Corporation (IFC) and funded by a major sugar producer as part of a mediated agreement with complainant workers.⁵ More recently, the Centers for Disease Control and Prevention has announced three studies into CKDu with funding from the Central American sugar industry, at least one of which is to be led by the same epidemiologist who conducted the IFC study.⁶ By contrast, governments and

Letters to the editor referring to a recent Journal article are encouraged up to 3 months after the article's appearance. By submitting a letter to the editor, the author gives permission for its publication in the Journal. Letters should not duplicate material being published or submitted elsewhere. The editors reserve the right to edit and abridge letters and to publish responses.

Text is limited to 400 words and 10 references. Submit online at www. editorialmanager.com/ajph for immediate Web posting, or at ajph.edmgr.com for later print publication. Online responses are automatically considered for print publication. Queries should be addressed to the Editor-in-Chief, Mary E. Northridge, PhD, MPH, at men6@nyu.edu. the World Health Organization funded the Salvadoran and Sri Lankan studies.

The People's Health Movement (PHM) contends that the Editorial's envisaged focus for future research and intervention around lifestyle factors is victim blaming and near-sighted, and will result in overly simplistic public health interventions. We note the alternative approaches and applaud the subsequent interventions enacted based on the precautionary principle in both Sri Lanka and El Salvador. Both countries have banned chemicals of concern, and El Salvador has implemented a primary care based prevention program encompassing all risk factors.^{7,8} PHM considers the conclusions of the Editorial enabling of an erroneous emergent narrative regarding CKDu that feeds into a corporate political agenda, encourages faulty science, and spawns overly simplistic solutions. To not reveal the whole picture shown by research about CKDu is to betray affected communities around the world.

> Lori Hanson, PhD, MSc Leigh K. Haynes, JD, MPH Laura Turiano, MS-PA

About the Authors

Lori Hanson is with the Department of Community Health and Epidemiology, University of Saskatchewan, People's Health Movement-Canada, Saskatoon. Leigh K. Haynes and Laura Turiano are with the People's Health Movement-USA, Oakland, CA.

Correspondence should be sent to Leigh K. Haynes, JD, MPH, 3355 Guido St. Oakland, CA 94602 (e-mail: leigh. kamore@gmail.com). Reprints can be ordered at http://www. ajph.org by clicking the "Reprints" link.

This letter was accepted February 28, 2014. doi:10.2105/AJPH.2014.301984

Contributors

All authors contributed equally to the research, drafting, and finalization of this letter.

References

1. Wesseling C, Crow J, Hagstedt C, Jakobsson K, Lucas R, Wegman DH. The epidemic of chronic kidney disease of unknown etiology in Mesoamerica: a call for interdisciplinary research and action. *Am J Public Health*. 2013;103(11):1927–1930. 2. Wesseling C, Crowe J, Hogstedt C, Jakobsson K, Lucas R, Wegman D (eds). *Mesoamerican Nephropathy: Report From the First International Research Workshop on MeN*. Heredia, Costa Rica: Program on Work, Environment and Health in Central America (SALTRA). 2013. Available at: http://www.saltra.una.ac.cr/images/ SALTRA/Documentacion/SerieSaludTrabajo/ seriesaludytrabajo10.pdf. Accessed February 20, 2014.

3. Jayatilake N, Medis S, Maheepala P, Mehta F. Chronic kidney disease of uncertain aetiology: prevalence and causative factors in a developing country. *BMC Nephrol.* 2013;14:180.

4. Orantes CM, Herrera R, Almaguer M, et al. Chronic kidney disease and associated risk factors in the Bajo Lempa region of El Salvador: Nefrolempa study, 2009. *MEDICC Rev.* 2011;13(4):14–22.

5. Brooks D, McClean M. Summary Report: Boston University Investigation of Chronic Kidney Disease in Western Nicaragua, 2009-2012. 2012. Available at http://www.cao-ombudsman.org/documents/BU_ SummaryReport_August122012.pdf. Accessed February 20, 2014.

6. Chavkin S. CDC launches industry-financed studies of deadly kidney disease in Central America. In: *Mystery in the Fields.* The Center for Public Integrity. 2014. Available at: http://www.publicintegrity.org/health/mystery-fields. Accessed Feb 16, 2014.

7. ColomboPage. Sri Lanka implements measures to prevent kidney disease, bans import of agrochemicals. *ColomboPage*. April 8, 2013. Available at: http://www. colombopage.com/archive_13A/Apr08_1365421309CH. php. Accessed February 15, 2014.

8. Asamblea Legislativa aprueba reformas que prohíben pesticidas que dañan la salud [Legislative Assembly approves reforms that prohibit pesticides that are harmful to health]. Legislative Assembly of El Salvador. Available at: http://asamblea.gob.sv/noticias/archivo-de-noticias/ asamblea-legislativa-aprueba-reformas-que-prohibenpesticidas-que-danan-la-salud. Accessed February 15, 2013.

WESSELING ET AL. RESPOND

We thank Haynes et al. for expressing their concerns on behalf of the People's Health Movement (PHM) about our recent editorial on the Mesoamerican nephropathy (MeN). We wish to clarify for the readers that PHM is a growing international network of nongovernmental organizations, civil society, and academic organizations, civil society, and academic organizations who work together toward "Equity, ecologically sustainable development and peace . . . a world in which a healthy life for all is a reality."¹ We share PHM's vision. In fact, SALTRA, the organizing entity of the workshop questioned in the Letter to the Editor,