Addressing disparities in kidney transplantation



The health disparities that lead to higher incidence of kidney failure in communities of color also lead to barriers in accessing kidney transplants. Race, older age, less social support, lower income, more comorbidities, type of insurance coverage, and fewer transplant learning activities have been associated with a lower probability of kidney transplantation. These disparities in kidney transplantation have been demonstrated in the data:

- There are more than 106,000 Americans on the organ transplant waiting list, with 90,000 of them—85%—waiting for a kidney.
- In 2020, 43% of all kidney transplant recipients in the U.S. were white, while 26% were Black and 18% were Hispanic.
- In 2018 (most recent data available), there were 131,636 people newly diagnosed with kidney failure, and 3,732 of them received a kidney transplant in the same calendar year. Of the 3,732 who received a transplant, 77% were white, 10% were Black and 10% were Hispanic.
- Though racial and ethnic disparities in deceased donor transplantation have narrowed for the past 3-4 years, large disparities in living donor transplantation persist. In 2020, 64% of the 5,234 living donor transplants performed in the U.S. went to white recipients, while just 11% went to Black recipients and 16% to Hispanic recipients.
- Among patients who were initially waitlisted for a kidney transplant in 2013 (most recent data available), the median wait time was 5 years for Black patients and 4.7 years for Hispanic patients, but only 3.4 years for white patients.
- In 2018 (most recent data available), 5% of white patients were added to the kidney transplant waiting list for a preemptive transplant, while 3.9% of Black patients were and 4.2% of Hispanics were.

The American Kidney Fund's policy efforts to address disparities in kidney transplantation

The American Kidney Fund (AKF) has strongly supported efforts by recent presidential administrations to increase kidney transplants, including the implementation of the End-Stage Renal Disease Treatment Choices Model and changes to organ procurement organization regulations. We also support the passage of legislation that would:

- Direct the National Institutes of Health to conduct research and develop a plan to increase kidney transplants in communities of color, rural communities and underserved communities (H. R. 3893, CARE for All Kidneys Act of 2021)
- Reduce barriers to living organ donation (H.R. 1255/S. 377, Living Donor Protection Act of 2021)
- Increase access to the Medicare Kidney Disease Education Benefit, so patients with kidney disease can learn more about kidney transplantation as a treatment option (H.R. 4065/S. 1971, Chronic Kidney Disease Improvement in Research and Treatment Act of 2021)

AKF's Health Insurance Premium Program also helps fight transplant disparities

AKF's Health Insurance Premium Program (HIPP) assists low-income kidney failure patients pay for their health insurance. In 2020, 1,615 low-income dialysis patients had kidney transplants and post-transplant care thanks to AKF HIPP financial support—7% of all kidney transplants performed in the U.S. last year. When compared to the overall kidney transplant population, HIPP makes transplants possible for a higher percentage of people of color. Of HIPP transplant recipients in 2020, 34% were Black and 20% were Hispanic, compared to 27% Black and 18% Hispanic for the general kidney transplant population.

Sources:

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