

March 19, 2019

The Honorable Nancy Pelosi Speaker of the House U.S. House of Representatives Washington, DC 20515

The Honorable Kevin McCarthy Minority Leader U.S. House of Representatives Washington, DC 20515 The Honorable Mitch McConnell Majority Leader United States Senate Washington, D.C. 20510

The Honorable Chuck Schumer Minority Leader United States Senate Washington, D.C. 20510

Dear Speaker Pelosi, Leader McConnell, Leader McCarthy, and Leader Schumer:

As members of Congress and other federal, state and local policy makers focus more time and attention on addressing the COVID-19 pandemic, we at the American Kidney Fund want to make sure that you keep in mind a vulnerable group of patients: those on kidney dialysis and those with kidney transplants.

Consider these sobering facts:

- More than 726,000 people are living with kidney failure in the United States, an increase of 86 percent since 2000.
- More than 511,000 are on dialysis and 215,000 are living with kidney transplants.
- Each month, about 10,000 new cases of kidney failure are diagnosed, and every day, more than 240 people on dialysis die.ⁱⁱⁱ

People on dialysis often have multiple co-morbidities besides their ESRD and these underlying health condition can put them at a higher risk of becoming seriously ill from COVID-19. Nearly 80 percent of people on dialysis can no longer work full time, so this is also an economically vulnerable population.

Patients who receive in-clinic dialysis must sit in a chair for several hours three times per week while their blood is taken out of their body and cleaned as their kidneys are no longer able to perform that function. They have no choice but to leave their house several times per week. And while expanding the use of home dialysis is one important way to address this challenge, transitioning to home dialysis cannot happen overnight, and for many patients – such as those with unstable home environments or cognitive issues — it is not a viable option.

The CDC has provided guidance to dialysis centers and <u>patients</u> to help them prevent infections and improve dialysis patient safety. The American Society of Nephrology has also developed several <u>resources</u> to address issues affecting patients on dialysis and the COVID-19 pandemic. People with organ transplants are also more vulnerable during this time because their immune systems are repressed. They must take immunosuppressive drugs for the life of the transplanted organ so that their body does not reject it. And while they are better able to stay home than patients on dialysis, they are still at a much higher risk of infection than most people.

We are still gathering information from patients and social workers about how the pandemic is affecting their care. But we do know that providers are facing shortages of basic supplies like masks and paper towels; this is true of patients getting dialysis in clinics and at home. There are also transportation issues – for example, patients who relied on public transportation may no longer be able to do so. Finally, we are concerned that transplants for both living and deceased donors will come to a standstill as hospitals grapple with COVID 19 and the appropriate deployment of their resources.

We at the American Kidney Fund urge you to keep these patients in mind when you considering ways to help patients and health care providers.

Sincerely,

LaVarne A. Burton President and CEO

cc: United States House of Representatives

United States Senate

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ⁱ United States Renal Data System 2018 Annual Report

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Centers for Disease Control National CKD Fact Sheet, 2019