

EMBARGOED FOR RELEASE until February 4, 2016 – 5:00 PM (ET)

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RACIAL DISPARITIES IN KIDNEY TRANSPLANT OUTCOMES ARE NARROWING

Black recipients are experiencing greater improvements in organ survival following transplantation

Highlights

 From 1990 to 2012, disparities in health outcomes lessened between black and white kidney transplant recipients, including those who received live donor kidney transplants and those who received deceased donor kidney transplants.

A kidney transplant is the best treatment option for patients with kidney failure.

Washington, **DC** (February 4, 2016) — A new study reveals significantly reduced disparities in health outcomes among black and white kidney transplant recipients over the past 2 decades. The findings appear in an upcoming issue of the *Journal of the American Society of Nephrology* (JASN).

While kidney transplantation is the best available therapy for most patients with kidney failure, studies have found that black transplant recipients tend to experience poorer outcomes—such as kidney rejection and premature death—compared with white recipients.

To examine whether this disparity has improved in recent decades, Tanjala Purnell, PhD, MPH, Dorry Segev, MD, PhD (Johns Hopkins University School of Medicine), and their colleagues compared information on 63,910 black and 145,482 white adults who received a first-time live donor kidney transplant (LDKT) or deceased donor kidney transplant (DDKT) in the United States between 1990 and 2012. "We hypothesized that advances in immunosuppression and post-transplant management might differentially benefit black kidney transplant recipients, who were disproportionately burdened by immunological barriers, and contribute to reduced racial disparities in kidney transplant outcomes," said Dr. Purnell.

Among the major findings:

• Over time, 5-year failure rates of the transplanted kidney after DDKT decreased from 51.4% to 30.6% for blacks and from 37.3% to 25.0% for whites; 5-year failure

- after LDKT decreased from 37.4% to 22.2% for blacks and from 20.8% to 13.9% for whites.
- Among DDKT recipients in the earliest group of patients, blacks were 39% more likely than whites to experience 5-year failure, but this disparity narrowed to 10% in the most recent group of patients.
- Among LDKT recipients in the earliest group, blacks were 53% more likely than
 whites to experience 5-year failure, but this disparity narrowed to 37% in the most
 recent group.
- There were no statistically significant differences in 1-year or 3-year failure rates of transplanted kidneys after LDKT or DDKT in the most recent groups.

"Our research demonstrates a dramatic improvement in kidney transplant outcomes for black patients and a significant reduction in the disparity in kidney transplant outcomes between black and white patients," said Dr. Purnell. "This finding is important because it may provide nephrologists and patients with added confidence to aggressively promote access to transplantation in the black community."

Study co-authors include Xun Luo, MD, MPH; Lauren M. Kucirka, PhD; Lisa Cooper, MD MPH; Deidra Crews, MD, ScM; Allan Massie, PhD; and L. Ebony Boulware, MD, MPH.

Disclosures: The authors reported no financial disclosures. The authors were supported by research grants from the National Institute of Diabetes and Digestive and Kidney Diseases and the National Heart, Lung and Blood Institute of the National Institutes of Health.

The article, entitled "Reduced Racial Disparity in Kidney Transplant Outcomes in the United States from 1990 to 2012," will appear online at http://jasn.asnjournals.org/ on February 4, 2016, doi: 10.1681/ASN.2015030293.

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Facebook: A new study reveals significantly reduced disparities in health outcomes among black and white kidney transplant recipients over the past 2 decades. The findings are published in the *Journal of the American Society of Nephrology*.

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