



PRESS RELEASE

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WAITLIST POLICIES MAY CONTRIBUTE TO RACIAL DISPARITIES IN ACCESS TO KIDNEY TRANSPLANTATION

Putting Black patients on the transplant waitlist at a higher level of kidney function may improve parity.

Highlight

- Racial disparities in access to kidney transplantation persist in the United States. New research indicates that registering Black patients on the kidney transplant waitlist at a slightly higher level of kidney function compared with white patients might lessen racial inequality in patients' wait time prior to kidney failure onset, and ultimately improve racial equity in access to kidney transplantation.

Washington, DC (February 23, 2021) — Despite efforts to address them, racial disparities in access to kidney transplantation persist in the United States. New research published in an upcoming issue of *JASN* indicates that policy changes surrounding patients' eligibility to be put on kidney transplant waitlists might help address these disparities.

There are studies indicating that chronic kidney disease may progress more rapidly in Black individuals, especially during advanced stages of disease. This may disadvantage Blacks compared with whites in terms of the time that could theoretically be used to prepare for transplantation. In addition, Black patients are also referred later for transplant evaluation than white patients.

In this latest study, Elaine Ku, MD (UCSF), Kirsten Johansen, MD (Hennepin Healthcare and University of Minnesota), and their colleagues quantified racial disparities in wait time prior to the onset of kidney failure based on current national policies using different equations that estimate kidney function. They then determined the level of kidney function at which Black patients would need to be referred and waitlisted to equalize the potential wait times among Black and white patients using the different equations.

The investigators found that registering Blacks on the waitlist at a slightly higher level of kidney function compared with whites might lessen racial inequality in patients' wait time

prior to kidney failure onset, and ultimately improve racial equity in access to kidney transplantation.

“Regardless of which equation we used to estimate kidney function, Black patients had less potential time available for waitlist registration than white patients; however, we found that use of a higher kidney function threshold to allow for earlier eligibility for waitlisting in Blacks could theoretically reduce the racial disparity in time spent in the advanced stages of chronic kidney disease,” said Dr. Ku.

Study co-authors include Charles McCulloch, PhD, Libo Li, PhD, and Deborah Adey, MD.

Disclosures: This study was sponsored by the National Institutes of Health. Dr. Ku has received grant funding from CareDX.

The article, titled “Racial Disparities in Eligibility for Preemptive Waitlisting for Kidney Transplantation and Modification of eGFR Thresholds to Equalize Waitlist Time,” will appear online at <http://jasn.asnjournals.org/> on February 23, 2021, doi: 10.1681/ASN.2020081144.

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