

December 18, 2020

José R Romero, MD
US Centers for Disease Control and Prevention
Chair, Advisory Committee on Immunization Practices (ACIP)
Center for Disease Control and Prevention
1600 Clifton Rd.
Atlanta, GA 30329-4027

Dear Dr. Romero:

Thank you for your service, and the service of all the members of Advisory Committee on Immunization Practices (ACIP) and experts at the Center for Disease Control and Prevention (CDC), in this difficult period. The 21,000 kidney care professionals of the American Society of Nephrology (ASN) pledge their support of your efforts in responding to Coronavirus Disease 2019 (COVID-19) and their ongoing commitment to protecting patients with kidney diseases. People with kidney failure receiving dialysis are some of the very most vulnerable to COVID-19. ASN, therefore, respectfully requests the Advisory Committee prioritize people on dialysis and staff who work in the dialysis environment for receiving vaccination for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and place them in Tier 1a.

More than 800,000 people in the United States have kidney failure, with more than 550,000 receiving dialysis. People dependent on dialysis are extremely vulnerable to the effects of COVID-19, with COVID-associated mortality exceeding 20%, comparable to or even higher than COVID-associated mortality in long-term care facilities.

Across all people receiving dialysis, mortality was 37% higher during April 2020 as compared to the same calendar-weeks of 2017 to 2019 and 16% higher in subsequent months. This persistent upsurge of mortality is ascribed to documented SARS-CoV-2 infections, undocumented viral infections, and decreased access to necessary non-dialysis-related medical care. V

Nearly 90% of people on dialysis in the United States receive their treatments at incenter dialysis facilities. These individuals typically go to dialysis facilities three times a week, where they are treated for, on average, just under four hours in each session, and their life depends on their ability to receive dialysis treatments. Notably, people on dialysis have limited ability to physically distance, heightened vulnerability to infection, and poor outcomes if infected.

ASN believes that it is imperative that the following two groups be prioritized for vaccination: 1) Dialysis facility staff, and 2) Dialysis-dependent patients. Critically, all

dialysis facility staff must be included with other frontline healthcare workers as priority vaccine recipients. Notably, most dialysis facilities are congregate settings not affiliated with hospitals; therefore, vaccination strategies for these frontline, essential health care workers must extend beyond hospital-administered vaccine programs. To overcome these barriers and protect our vulnerable patient population and the essential workers who care for them, ASN and its more than 21,000 members are ready to help however needed in the protection of this vulnerable patient population.

The consideration of the Advisory Committee is greatly appreciated. ASN Executive Vice President Tod Ibrahim stands ready discuss this request or provide more information at your convenience. Mr. Ibrahim may be reached at tibrahim@asn-online.org or (202) 640-4676.

Sincerely,

Anupam Agarwal, MD, FASN President

CC: ADM Brett P. Giroir, MD Sharon Novosad, MD Anne Rohall Stephanie Thomas Nick Uehlecke Seema Verma

¹ United States Renal Data System. 2020 USRDS Annual Data Report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2020. https://adr.usrds. org/2020

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^{iv} Watson TH, Weiner DE, Yee J, Silberzweig J, for the Outpatient Dialysis Subcommittee of the American Society of Nephrology CIVID-19 Response Team. Prioritizing COVID-19 Vaccination in Dialysis. ASN Kidney News. Available at https://www.kidneynews.org/policy-advocacy/leading-edge/prioritizing-covid-19-vaccination-in-dialysis