Disparities exist in kidney transplant timing

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African-Americans and individuals without private health insurance are less likely than others to receive a kidney transplant before requiring dialysis, according to a study appearing in an upcoming issue of the Clinical Journal of the American Society of Nephrology (CJASN). The findings indicate that efforts are needed to ensure the equitable distribution of donor kidneys and the timing of transplantation.

While kidney transplantation is the best available therapy for kidney failure, demand for donor kidneys far exceeds the supply. The longer transplant candidates wait while on dialysis, the worse they do after receiving a transplant. In some areas of the country, the average kidney transplant candidate can wait six years on dialysis before receiving a deceased donor organ. Elsewhere, patients can receive transplants preemptively, or before dialysis is even required.

Morgan Grams, MD (Johns Hopkins University School of Medicine) and her colleagues examined information from all adult first-time deceased donor kidney transplant recipients in the US between 1995 and 2011, classifying them as preemptive, early (on dialysis for one year or less), or late recipients.

Among the major findings:

- Preemptive recipients were 9% of the total recipient population.
- Patients with private insurance or a previous (nonkidney) transplant were more likely to receive a preemptive deceased
African Americans were 66% less likely than Caucasians to receive a preemptive deceased donor kidney transplant. Overall, patients transplanted preemptively had similar survival compared with patients transplanted within one year after initiating dialysis.

"We found that, while some regions performed deceased donor preemptive transplants more than others, region was not a big factor in determining preemptive transplant rates," said Dr. Grams. "Rather, we were struck by the disparities by race and insurance type: African American were much less likely to receive kidney transplantation prior to requiring dialytic support, as were those with public or no insurance," she added.

The authors noted that given the long wait times for deceased donor kidneys and the fairly comparable survival between patients transplanted preemptively and those transplanted within one year after initiating dialysis, the value of preemptive transplantation from a societal standpoint may be low.
