

African-Americans on Medicaid are far less likely to receive living kidney transplants

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African-Americans with Medicaid as their primary insurance were less likely to receive a living kidney transplant (LKT) than patients with private insurance, according to a new study by researchers at Wake Forest Baptist Medical Center.

The study is published on the Early View online edition of *Clinical Transplantation*.

"Living kidney transplantation is the optimal treatment for patients with end-stage [renal disease](#), offering the best quality of life and longest survival," said Amber Reeves-Daniel, D.O., assistant professor of nephrology at Wake Forest Baptist and lead author of the study.

African-Americans comprise 12.6 percent of the U.S. population and approximately one-third of the dialysis population. However, they received only 13.5 percent of the living kidney transplants performed in 2011, Reeves-Daniel said.

To try to determine the causes of this discrepancy, the researchers examined differences in LKT based upon ethnicity in 447 privately insured individuals and Medicaid recipients at Wake Forest Baptist from July 2008 through December 2010. As opposed to prior reports from other institutions, primary and secondary payers were included in the analyses, providing a more detailed and accurate picture of insurance coverage for [kidney transplant patients](#).

Most patients had more than one payer, including Medicare, Medicaid, private insurance, Medicare supplements and Medicare replacement policies. Analysis was limited to [Caucasians](#) and African-Americans because there were too few Hispanic and Asian recipients to permit meaningful comparisons.

The researchers found that a higher proportion of patients with private insurance, relative to those without private insurance, received LKT – 22 percent versus 7.6 percent. Among ethnic groups, 27.5 percent of Caucasians with private insurance received LKT recipients versus 12.4 percent without private insurance. African- Americans with [private insurance](#) were 14 times more likely to receive a live donor kidney than African-Americans without private medical insurance (0.9 percent). African- Americans with Medicaid were unlikely to receive a living [kidney transplant](#), the study found.

"An alarming finding is that despite apparent access to [kidney transplantation](#), no African-American Medicaid recipients received a living [donor kidney](#) transplant during the two-and- a-half year study period," Reeves-Daniel said. "It is intuitive that insured patients would be more likely to have donors with sufficient resources to facilitate the processes of living donation. However, it is difficult to explain why individuals with Medicaid, particularly African-Americans, were so much less likely to receive living kidney transplants."

Provided by Wake Forest University Baptist Medical Center

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