

Quality of care lacking for ESRD in lupus nephritis

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In the United States, minorities and those who lack private insurance are less likely to receive adequate care for end-stage renal disease due to lupus nephritis, according to research published online Feb. 18 in *Arthritis & Rheumatology*.

(HealthDay)—In the United States, minorities and those who lack private insurance are less likely to receive adequate care for end-stage renal disease (ESRD) due to lupus nephritis (LN), according to research published online Feb. 18 in *Arthritis & Rheumatology*.

Laura C. Plantinga, Sc.M., of Emory University in Atlanta, and colleagues analyzed data for 6,594 patients initiating treatment for LN-ESRD, from July 2005 through September 2011, to assess factors associated with quality of care.

The researchers found that, compared with white patients, black and

Hispanic patients were less likely to receive pre-ESRD care (odds ratios [ORs], 0.73 and 0.72, respectively) and less likely to be placed on the waitlist for kidney transplant (hazard ratios [HRs], 0.78 and 0.82, respectively). Compared with patients with private insurance, patients with Medicaid (HR, 0.51) or without insurance (HR, 0.36) were less likely to be placed on the waitlist. Only 24 percent of patients had a permanent vascular access, and uninsured patients were even less likely to have placement of vascular access (OR, 0.62).

"LN-ESRD patients have suboptimal ESRD care, particularly with regard to vascular access placement," the authors write. "Minority race/ethnicity and lack of private insurance were associated with inadequate ESRD care."

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