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Community health indicators tied to transplant outcomes

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(HealthDay) -- In the community setting, health indicators are significantly associated with post-kidney-transplant mortality, according to a study published online Feb 20 in the *Archives of Surgery*.

Jesse D. Schold, Ph.D., of the Cleveland Clinic, and colleagues conducted a retrospective observational cohort study of 100,164 adult living and deceased donor kidney transplant recipients, aged 18 years or older, in the United States, using data from the Scientific Registry of Transplant Recipients and other databases. The risk-adjusted time to post-transplant mortality and graft loss was assessed.

The researchers found that a variety of health indicators were independently associated with transplant outcomes, including low birth

weight, preventable hospitalizations, inactivity rate, and the prevalence of smoking and obesity. In the highest-risk counties, recipients had an increased likelihood of being African-American (adjusted odds ratio [OR], 1.59), being younger (age 18 to 39; OR, 1.46), having lower education attainment (less than high school; OR, 1.84), and having public insurance (OR, 1.46). There was significant variation at the center and region level with respect to the proportion of recipients from higher-risk counties. An independent graded effect was observed between health indicators and post-transplant mortality, including an increased hazard in the highest risk counties (adjusted hazard ratio, 1.26).

"The principal findings of our study are that community health indicators are significantly associated with transplant recipient outcomes. These indicators are independent of traditional clinical risk factors and are highly variable across the country," the authors write.

More information: Abstract
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