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# Public Forums Announced to Provide Input to the Joint Task Force to Reassess the Inclusion of Race in Diagnosing Kidney Diseases

A joint statement from the National Kidney Foundation and the American Society of Nephrology

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On behalf of the National Kidney Foundation (NKF) and the American Society of Nephrology (ASN), we thank the trainees, clinicians, and the public—particularly people with kidney diseases, kidney failure, and kidney transplants—for their ongoing support of the <a href="NKF-ASN Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Diseases">NKF-ASN Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Diseases</a>. The task force will issue its interim report in January 2021 and its final report in spring 2021.

When announcing the <u>establishment of the task force earlier this year</u>, NKF and ASN affirmed that race is a social, not a biological, construct. As the largest organizations representing kidney patients and professionals, we remain committed, as we asserted, to ensuring that racial bias does not affect the diagnosis and subsequent treatment of kidney diseases.

For four months, the task force has received expert testimony and assessed the scientific literature (including several articles that were published this fall). The task force is now deliberating to meet its charge and "ensure that GFR estimation equations provide an unbiased assessment of kidney function so that patients, clinicians, laboratories, and public health officials can make informed decisions to ensure equity and personalized care for patients with kidney diseases."

To help the task force draft its final report, **NKF and ASN encourage trainees, clinicians, and the public—particularly people with kidney diseases, kidney failure, and kidney transplants—to testify (or provide written comments) during open forums in January. <u>Sign up</u> before Tuesday, December 29, 2020, at 5:00 p.m. EST to register for one of the open forums. Please note that these forums are not open to members of the press.** 

Health inequities in the United States are present for Black or African American, Hispanic or Latino, American Indian or Alaska Native, Asian American, and Native Hawaiian or Other Pacific Islander people. These inequities are particularly disturbing in kidney medicine:

- People who are Black or African American comprise 13% of the US population but 33% of the nation's population on dialysis for kidney failure.<sup>1</sup>
- Kidney failure prevalence is about 3.7 times greater in Black or African American people, 1.5 times greater in Hispanic or Latino people, 1.4 times greater in American Indian or Alaska Native, and 1.5 times greater in Asian Americans than in White Americans.<sup>2</sup>
- Inequities begin long before kidney failure: Black or African American and Hispanic or Latino people are significantly less likely than their White counterparts to receive any kidney care before kidney failure, missing key opportunities for intervention.<sup>3</sup>
- Black or African American and Hispanic or Latino people on dialysis are significantly less likely than their White counterparts to receive a kidney transplant and are also less likely to receive a living donor kidney transplant (the optimal type of transplant) than Whites.<sup>4,5</sup>
- Black or African American people have disproportionately high rates of kidney transplant (allograft) failure compared to Whites, with up to a 60% higher risk of allograft failure.<sup>6</sup>
- When compared to White Americans, people who are Black or African American are less likely to be placed on the transplant waiting list and, once on it, experience disparities in the time it takes to receive a kidney.<sup>7,8</sup>
- Every racial/ethnic minority group in the United States is significantly less likely to be treated with home dialysis than White Americans, and demographic and clinical characteristics are insufficient to explain this differential use: Home dialysis is 40% to 50% lower amongst Black or African American and Hispanic or Latino people compared to Whites.<sup>9,10</sup>

NKF and ASN are committed to reversing these longstanding inequities, through efforts that address both health care delivery and social determinants of health. Working with other members of the kidney community, other patient and health professional organizations, entities focused on ending racism, and government, we will address the overall health of the entire population, tackle health disparities and social determinants of health, and confront racism (which includes tackling how the COVID-19 pandemic has exacerbated racism). To eliminate disparities, NKF, ASN and other stakeholders must develop multi-faceted initiatives beyond an examination of estimating equations.

### **About Kidney Diseases**

In the United States, 37 million adults are estimated to have chronic kidney disease (CKD)—and approximately 90 percent don't know they have it. 1 in 3 adults in the U.S. is at risk for chronic kidney disease. Risk factors for kidney disease include: diabetes, high blood pressure, heart disease, obesity, and family history. People who are Black or African American, Hispanic or Latino, American Indian or Alaska Native, Asian American, or Native Hawaiian or Other Pacific Islander are at increased risk for developing the disease. Black or African American people are almost 4 times more likely than Whites to have kidney failure. Hispanic or Latino people are 1.3 times more likely than non-Hispanic or non-Latino people to have kidney failure.

<sup>&</sup>lt;sup>1</sup> https://www.niddk.nih.gov/health-information/health-statistics/kidney-disease

<sup>&</sup>lt;sup>2</sup> https://www.niddk.nih.gov/health-information/health-statistics/kidney-disease

<sup>&</sup>lt;sup>3</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5469551/

<sup>&</sup>lt;sup>4</sup> https://jamanetwork.com/journals/jama/fullarticle/2667722

<sup>&</sup>lt;sup>5</sup> https://jasn.asnjournals.org/content/27/7/2123

<sup>&</sup>lt;sup>6</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5373991/

<sup>&</sup>lt;sup>7</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5827936/

<sup>&</sup>lt;sup>8</sup> https://jamanetwork.com/journals/jamasurgery/fullarticle/2729436

<sup>9</sup> https://jasn.asnjournals.org/content/27/7/2123

<sup>&</sup>lt;sup>10</sup> https://jasn.asnjournals.org/content/27/7/2123

# **About National Kidney Foundation**

The <u>National Kidney Foundation (NKF)</u> is the largest, most comprehensive, and longstanding patient-centric organization dedicated to the awareness, prevention, and treatment of kidney disease in the U.S. For more information about NKF, visit <u>www.kidney.org</u>.

## **About American Society of Nephrology**

<u>ASN</u> leads the fight to prevent, treat, and cure kidney diseases throughout the world by educating health professionals and scientists, advancing research and innovation, communicating new knowledge, and advocating for the highest quality care for patients. ASN has more than 21,000 members representing 131 countries. For more information, please visit <u>www.asn-online.org</u> or contact the society at 202-640-4660.