STUDY ESTIMATES DURATION OF EMPLOYMENT LOSS EXPERIENCED BY ADULTS WITH KIDNEY FAILURE

Highlights

• Adults with kidney failure are employed for fewer years during their lifetime than others in the general population.
• This “lower lifetime employment duration” was mainly due to their loss of life expectancy.

Washington, DC (April 15, 2021) — A new study estimates the years of employment loss experienced by working-aged adults with kidney failure. The study, which will appear in an upcoming issue of CJASN, notes that most of this lost time is due to patients’ loss of life expectancy.

Individuals with kidney failure who are undergoing long-term dialysis face many challenges that can negatively affect their employment and their ability to work. A team led by Chang-Ching Lin, PhD (National Cheng Kung University) examined aspects of lost employment among dialysis patients until 65 years of age.

The researchers analyzed information on patients initiating dialysis in Taiwan during 2000–2017. Among 83,358 patients with kidney failure under age 65 years, men had a higher rate of employment than women. The lifetime duration of lost employment for men with kidney failure was 11.8, 7.6, 5.7, 3.8, 2.3, 1.0, and 0.2 years for those in the age range of 25–34, 35–40, 41–45, 46–50, 51–55, 56–60, and 61–64 years, respectively, while that of women was 10.5, 10.1, 7.9, 5.6, 3.3, 1.5, and 0.3 years, respectively.

Additional analyses revealed that the lower lifetime employment duration was mainly driven by patients’ loss of life expectancy. “This highlights the phenomenon that many patients with kidney failure in Taiwan remain as productive as those without kidney failure throughout their lifetime, and their contributions should be appreciated from a societal perspective,” said Dr. Lin.

An accompanying Patient Voice provides a personal account of how kidney failure and its treatment have affected the employment and family dynamics of one particular patient.
Study co-authors include Yu-Tzu Chang, MD, PhD, Fuhmei Wang, PhD, Wen-Yen Huang, MSc, Hsuan Hsiao, BA, and Jung-Der Wang, MD, ScD.

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