



ASN's Legislative Priorities for 2010

✓ Address Profound Health Care Disparities

- Congress should fund more research to address inequities in treatment of Americans with kidney disease.
- Only 7% of US physicians are minorities. The National Institutes of Health (NIH) should increase support for minority investigators and provide more support to investigators who study disparities in treatment of Americans with kidney disease.

✓ Improve the Success of Kidney Transplants

- When a person receives a transplant, immunosuppressive drugs prevent organ rejection. ASN urges Congress to improve the lives of those Americans who have received transplants by lifting the current 36-month limit on Medicare coverage of these drugs.
- If a transplant fails, Medicare pays for the patient to return to dialysis (\$71,000 annually) or to receive a second transplant (\$100,000). Immunosuppressive drugs cost \$17,000 per year.
- Extended coverage would prolong the lives of Americans, reduce taxpayer costs, and allow more dialysis patients to consider a transplant.

✓ Fund Medical Research that Improves Kidney Health for Americans

- ASN urges Congress to support budgets of \$35 billion for NIH, \$590 million for the Department of Veterans Affairs Medical Research Program, and \$611 million for the Agency for Healthcare Research and Quality in 2011 to sustain ongoing research.
- Congress should include language in the FY 2011 appropriations bill urging NIH to:
 - Increase research on the impact on kidney disease of diabetes, hypertension, and obesity.
 - Fund clinical trials focused on kidney disease.
 - Support the next generation of investigators, including more underrepresented minorities.
 - Fund and conduct research on improving patient care and reducing medical errors.

✓ Fix the Flawed Sustainable Growth Rate Formula

- ASN urges Congress to enact a stable, predictable physician payment system to ensure physicians can provide high-quality patient care and improve health care delivery and outcomes.
- Permanently fixing the SGR formula is vital to protecting access to care for America's elderly, disabled, and military families.

For more information about the ASN or kidney disease, visit www.asn-online.org or call 202-659-0599.



The Kidney and Heart Disease Connection

Nearly 30 million Americans suffer from chronic kidney disease (CKD) and because of this condition are at significantly greater risk of heart disease. More research is needed to understand the kidney-heart connection and prolong the lives of these citizens.

Kidney disease:

- Accelerates the progression of heart disease.
- Increases the risk of heart attacks and heart disease-related death.
- Causes high blood pressure (80% of kidney patients have high blood pressure)
- Dialysis patients are 10 to 30 times more likely to die from heart disease compared to the general population.
- High blood pressure causes extensive kidney damage.

Helping Americans with CKD and Heart Disease.

- How kidney disease causes heart disease is still largely unknown; ASN urges Congress to fund more research investigating the kidney-heart connection.
- Most major cardiovascular disease trials exclude patients with kidney disease.
- Nine out of 10 cardiovascular disease trials provide inadequate information on the kidney function of enrollees.

ASN's Policy Priorities for 2010

- ✓ Address profound health disparities
- ✓ Improve the success of kidney transplants
- ✓ Fund medical research that improves kidney health for Americans
- ✓ Fix the sustainable growth rate formula

50% of people
with kidney failure die
from heart disease.

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Leading the Fight Against Kidney Disease

More than 11,000 physicians and scientists, all committed to preventing kidney disease and making life better for patients, work together as members of the American Society of Nephrology (ASN).

Whether providing expert care to patients, performing cutting-edge medical research, or training the next generation of kidney experts, these nephrologists change lives.

Through advocacy, ASN informs policymakers about issues of importance to kidney doctors and their patients. ASN also funds research, convenes world-renowned meetings and generates educational tools that help nephrologists improve and prolong the lives of 1 in 8 Americans.

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The Kidney Disease and Diabetes Connection

Each year, more than 100,000 Americans are diagnosed with kidney failure. The most common cause for kidney failure is diabetes. More research is needed to prevent premature death and improve quality of life for people with these conditions. Congress must direct resources to kidney screening and kidney disease awareness programs for the 24 million Americans with diabetes.

- African Americans, Native Americans, and Hispanics/Latinos (particularly Mexican Americans) develop diabetes, chronic kidney disease (CKD), and kidney failure at higher rates than whites. Scientists do not fully understand why.
- African Americans with diabetes are 3 to 5 times more likely to develop kidney disease when compared to the general population.
- Mexican Americans and Native Americans with diabetes are 6 times more likely to develop kidney failure than the general diabetic population.
- High levels of blood sugar make the kidneys filter too much blood, and can lead to CKD or kidney failure. When diagnosed early, kidney disease as a result of diabetes can be slowed by nephrologists (kidney specialists). When diagnosed later, kidney failure usually results and dialysis or a transplant is necessary.

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Diabetes (even when controlled) is the most common cause of kidney failure, accounting for nearly **44 percent** of new cases.

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Kidney Disease: A Serious Threat to Public Health

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- Although nearly **30 million** Americans—**13%** of the population—have chronic kidney disease (CKD), most people are unaware they have it.
- CKD progresses and often leads to kidney failure, which is also called end-stage renal disease (ESRD).
- More than **500,000** Americans have kidney failure and need dialysis or a transplant. This number will grow by 50% during the next 20 years.
- Two-thirds of dialysis patients die within five years of starting treatment, a lower survival rate than most cancer patients.
- CKD is **15% more prevalent in African Americans** than Caucasians, and African Americans are four times more likely to develop kidney failure.
- CKD is **17% more prevalent in Hispanics and Latinos** than in Caucasians, and Hispanics/Latinos are twice as likely to develop kidney failure.
- Native Americans are twice as likely as Caucasians to develop kidney failure.
- More than **25% of Medicare spending** (\$42 billion) goes to treating kidney disease.

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