

Non-medical factors affect racial disparities in kidney transplant wait-listing

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A new study indicates that certain non-medical factors affect racial disparities in wait-listing for a kidney transplant. The findings will be presented at ASN Kidney Week 2017 October 31-November 5 at the Ernest N. Morial Convention Center in New Orleans, LA.

African Americans have a higher incidence of [kidney failure](#) but lower rates of [kidney transplantation](#) compared with Whites. Because disparities persist even after adjusting for medical factors, Yue-Harn Ng, MD (University of New Mexico), and her colleagues assessed whether non-medical factors might play a role.

In the study of 1057 patients who were referred for [kidney transplant](#) evaluation, there were significant racial differences in baseline demographic characteristics, medical, cultural, and [psychosocial factors](#). African American patients were less likely to be wait-listed than White patients. Having a living donor led to earlier wait-listing, but older age, having a lower-status occupation, and being on dialysis had a negative impact on early wait-listing (100 days). Higher income, more transplant knowledge, and having good social support were positively associated with wait listing, but having more comorbidities, using public insurance, and being African American were negative predictors of wait-listing throughout the transplant evaluation process.

"From this study, we concluded that non-medical factors affect racial disparity in kidney transplant wait-listing," said Dr. Ng. "Our research highlights the need to diversify current interventions to include non-

medical factors such as psychosocial and cultural factors in our goals of achieving equality in kidney transplantation."

More information: Study: "Factors Impacting Racial Disparity in Kidney Transplant Wait-Listing" (Abstract 2770187)

Provided by American Society of Nephrology

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