

Racial disparities exist in access to kidney transplantation

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A new study published in the *American Journal of Transplantation* reveals that racial disparities exist in both the early and late steps in access to kidney transplantation. This study is part of the February special themed issue of the journal on racial disparity.

Provided by Wiley

Led by Rachel E. Patzer, PhD, MPH, of the Emory Transplant Center in Atlanta, Georgia, researchers examined 2,291 adult patients referred for renal transplant evaluation at a single transplant center in the Southeastern U.S. from 2005-2007, followed through May 2010. Demographic and clinical data were assessed and Cox models were used to examine the effect of race on referral, evaluation, waitlisting, and organ receipt.

Of the 2,291 patients, 64.9% were black, the mean age was 49.4 years, and 33.6% lived in poor neighborhoods.

Racial disparities were observed in access to referral, transplant evaluation, waitlisting, and organ receipt. Socioeconomic factors, including health insurance and access to care, explained almost 1/3 of the lower rate of transplant among black vs. white patients.

However, even after adjusting for demographic, clinical, and [socioeconomic factors](#), blacks had a 59% lower rate of transplant than whites.

"Despite near-universal [health care coverage](#) for end stage renal disease (ESRD) patients through the Medicare ESRD program, black ESRD patients are at a disadvantage to receive a [kidney transplantation](#)," Patzer notes. "Socioeconomic status really accounts for about 30% of this observed racial disparity in transplant access. Further research is needed to identify what may be explaining the [racial disparities](#) that still exist in access to kidney transplantation."

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