



PRESS RELEASE

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STUDY UNCOVERS RACIAL AND ETHNIC DISPARITIES IN FLU VACCINATION RATES AMONG U.S. DIALYSIS FACILITIES

Highlight

- Among US patients undergoing dialysis, those visiting dialysis facilities with higher proportions of minorities are less likely to be vaccinated against influenza, and the disparity seems to be increasing.

Washington, DC (August 13, 2020) — New research indicates that seasonal flu vaccination rates are lower among dialysis facilities with larger proportions of minority patients, and the gap seems to be widening over time. The findings appear in an upcoming issue of *JASN*.

Vaccination must be widespread and uniform to maximize protection against viral illnesses, and understanding vaccination barriers will help to better prepare for large-scale vaccination campaigns, such as those that will be need for COVID-19. Although research has uncovered racial and ethnic disparities in vaccination rates for illnesses such as the seasonal flu, it's unclear whether such disparities extend to patients with kidney failure, who simultaneously are at risk for complications of infection and have extensive contact with health care providers.

To determine whether vaccination rates at dialysis facilities differ according to the facilities' racial and ethnic composition, John Danziger, MD, MPhil (Beth Israel Deaconess Medical Center) and his colleagues examined information on influenza vaccinations in 2014–2017 that 6,735 dialysis facilities reported to the Centers for Medicare & Medicaid Services.

“The population of patients with kidney failure is important to study because these patients are uniformly covered by Medicare, all have an assigned kidney doctor, and often attend their dialysis facilities—which have a central role in coordinating vaccination administration—several times per week,” said Dr. Danziger. “Thus, they are well-situated to receive influenza vaccination uniformly, and disparities in receipt of vaccination must reflect systemic factors above and beyond insurance coverage or access to care.”

The team found that the average percentage of patients vaccinated during the influenza season was 72.1%. Facilities with higher proportions of Black and Hispanic patients had significantly lower vaccination percentages than less diverse facilities.

Also, the average proportion of patients vaccinated at each facility decreased by 1.05% from 2014 to 2017, and rates decreased to a greater extent among facilities with higher proportions of minorities. In facilities with the highest proportions of Black patients, the share of vaccinated patients decreased 1.21% per year, compared with a decrease of only 0.88% per year in facilities with the lowest proportions of Black patients. The investigators found similar trends for Hispanic patients.

“The failure to uniformly vaccinate patients seen in facilities with larger minority populations has important implications for those individuals and for their communities, and is a missed opportunity to protect the most vulnerable,” said Dr. Danziger. “This study is particularly relevant since the COVID-19 epidemic will almost certainly require a large-scale vaccination campaign. By highlighting the disparities in vaccination facing minorities, who are at highest risk of COVID-19 complications, our study underscores which populations are at greatest need for vaccination outreach programs.”

Study co-authors include Eric Weinhandl, PhD, MS, David Friedman, MD, and Kenneth J. Mukamal, MD, MPH.

Disclosures: The authors reported no financial disclosures.

The article, titled “Racial and Ethnic Disparities in Seasonal Influenza Vaccination among Dialysis Facilities in the United States,” will appear online at <http://jasn.asnjournals.org/> on August 13, 2020, doi: 0.1681/ASN.2020040483.

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