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New Policy Will Remove Race, Improve Equity in Transplantation

Washington, DC (July 08, 2024)— The following is a joint Statement from the National Kidney Foundation (NKF) and American Society of Nephrology (ASN) on the Organ Procurement and Transplantation Network (OPTN) plans to remove the African American/Black race coefficient from the Kidney Donor Profile Index (KDPI) calculation.

“ASN applauds the revision of the KDPI without race,” said ASN President Deidra C. Crews, MD, ScM, FASN. “The revised formula will better reflect the likelihood of graft failure for kidneys from deceased donors, and appropriately reflects the fact that race is a social, and not a biological, construct.”

“NKF has been a leader in advancing health equity in kidney care,” said Dr. Sylvia E. Rosas, MD, MSCE, and NKF President. “We collaborated with ASN to establish the Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Diseases and joined forces with ASN again on a joint letter to the OPTN urging for the removal of race from the KDRI calculation. We believe all patients deserve equal access to kidney care and will continue to work towards that goal. Removal of the African American/Black race coefficient from the score used to evaluate the suitability of the kidney for transplantation is likely to improve transplant equity.”

“This has been a dishonor to African American/Black donors and a disservice to patients waiting for a life-saving kidney transplant,” said Kevin Longino, CEO of the NKF and a kidney donation recipient. “We applaud OPTN for advancing this change and are optimistic that this policy will promote equity and increase the number of kidneys available for transplant now.”

In addition to removing race, the updated KDPI no longer includes whether or not the donor was Hepatitis C Virus positive. Thanks to therapeutic advances, post-transplant outcomes for HCV positive deceased donor kidney transplants are similar to that of HCV negative donor kidneys.

“With the new approach, some kidneys that may have otherwise been considered unsuitable for transplantation due to the inclusion of race in the formula will now receive more favorable scores, including some that will now be classified with scores that make them more appropriate for transplant,” said Cynthia Delgado, MD, who participated in the Organ Procurement and Transplant Network task force that led efforts to reconsider the use of race and HCV in the formula.

Additional Background:

The KDRI is a mathematical formula that estimates the quality of a donated kidney. Under the old equation, kidneys from Black donors were graded as having poorer organ function than kidneys from White donors. The proposed change was included in OPTN’s 2024 [winter public comment period](#) and was approved for adoption by the OPTN board in June 2024.

Nearly 90,000 individuals are on the national kidney transplant waitlist, and both NKF and ASN have long advocated for this change through ongoing correspondence with OPTN. Last September, NKF also launched a nationwide petition

calling on OPTN to remove the African American/Black race coefficient from the KDRI as part of its KIDNEY EQUITY FOR ALL initiative, a patient-focused community minded movement dedicated to ensuring that all kidney patients have access to high-quality, patient-centered kidney care from the moment of diagnosis to transplantation. The petition was signed by more than 2,000 NKF advocates.

About American Society of Nephrology (ASN)

Since 1966, ASN has been leading the fight to prevent, treat, and cure kidney diseases throughout the world by educating health professionals and scientists, advancing research and innovation, communicating new knowledge and advocating for the highest quality care for patients. ASN has nearly 22,000 members representing 141 countries. For more information, visit www.asn-online.org and follow us on [Facebook](#), [X](#), [LinkedIn](#), and [Instagram](#).

About National Kidney Foundation

The National Kidney Foundation is the largest patient-centric organization dedicated to the awareness, prevention, and treatment of kidney disease. It is revolutionizing the fight to save lives by eliminating preventable kidney disease, accelerating innovation for the dignity of the patient experience, and dismantling structural inequities in kidney care, dialysis, and transplantation. For more information about kidney disease, please visit www.kidney.org/.

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