

## Introduction

- Excellent outcomes have been reported among HIV+ kidney transplant (KT) recipients
- HIV-associated nephropathy is the third leading cause of end-stage renal disease in African-Americans (AA)
- OPTN currently does not collect HIV-status at time of listing
- No study has examined rates of transplantation, waitlist mortality, or racial differences among HIV+ KT candidates on a national level

## Methods

- **Study population** Adult HIV+ KT listings between 1/1/2001 and 10/1/2012 (obtained from SRTR, n=1000)
- **Analysis Design**
  - IMS pharmacy fills (01/01/2001-10/01/2012) were linked with SRTR data
  - Candidates with  $\geq 1$  antiretroviral fill unique to HIV treatment prior to or while on kidney waitlist were identified
  - 94% of candidates had  $>1$  HIV+ medication fill, and simultaneous listings were collapsed
  - Candidates were followed from time of listing to KT, death, or administrative end of study
  - Descriptive statistics were used to characterize rates of transplantation and waitlist mortality

## Results

	White (N)	AA (N)	Hispanic (N)	Other (N)
<b>Median Time to Transplant (years)</b>				
2001-2004	3.6 (31)	3.8 (194)	3.5 (22)	6.1 (2)
2005-2008	1.9 (113)	3.6 (342)	3.3 (44)	1.7 (6)
2009-2012	1.2 (50)	2.3 (178)	1.7 (14)	0.8 (4)
<b>Waitlist Mortality Rate (per 100 patient-years)</b>				
2001-2004	6.7 (31)	7.9 (194)	1.2 (22)	0.0 (2)
2005-2008	16.6 (113)	9.2 (342)	12.1 (44)	30.5 (6)
2009-2012	29.5 (50)	15.4 (178)	5.6 (14)	0.0 (4)

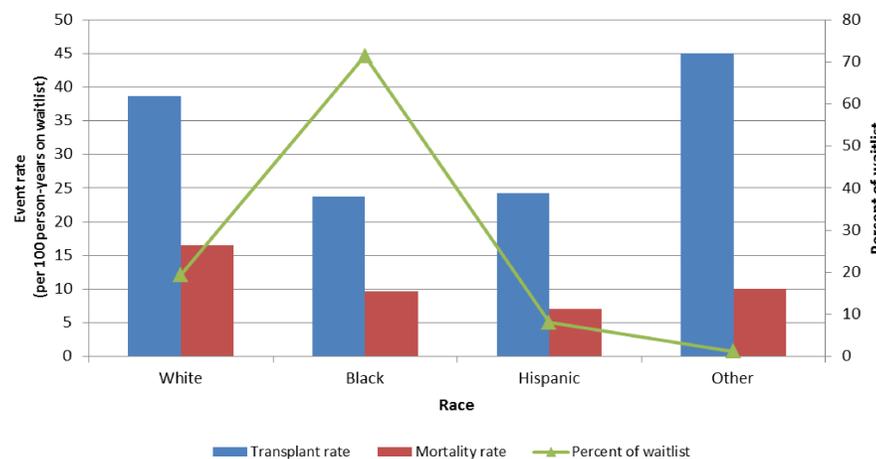


Figure 1. Percent of waitlist, transplant rate, and mortality rate by ethnicity

- Median time to transplant among HIV+ candidates has decreased from 3.66 to 1.85 years during the last decade; this trend holds within race groups (Table 1)
- Waitlist mortality has increased over time for most races (Table 1; Figure)
- Transplant rates are lower among AA, and waitlist mortality is increased among whites in comparison to other racial groups which is consistent with the general HIV-uninfected waitlist population

Characteristics	HIV positive (n=1,000)
<b>Number (%)</b>	
<b>Age at listing (years)</b>	
18-34	93 (9.3%)
35-49	555 (55.5%)
50-64	326 (32.6%)
65+	26 (2.6%)
<b>Gender</b>	
Male	777 (77.7%)
Female	223 (22.3%)
<b>Race</b>	
White	192 (19.2%)
African-American	715 (71.5%)
Other	93 (9.3%)
<b>Cause of kidney disease</b>	
Diabetes	144 (14.4%)
Hypertension	326 (32.6%)
GN	99 (9.9%)
Other	431 (43.1%)
<b>Dialysis Status at listing</b>	
Pre-emptive	75 (7.5%)
On dialysis	925 (92.5%)
PRA > 80%	106 (10.6%)
Willing to accept HCV+ kidney	133 (13.3%)

- AAs comprise a majority of HIV+ waitlist candidates yet have longer waiting times and lower transplant and mortality rates (Table 2)

## Conclusion

- AAs have the longest waiting times despite comprising the majority of the HIV+ waiting list and have lower rates of transplantation
- These findings suggest that racial disparities observed in general uninfected population persist in the HIV+ population

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