

Jumping into Action to Enhance Kidney Transplant Evaluation: Update on the Access to Kidney Transplant in Minority Populations (AKT-MP) Trial

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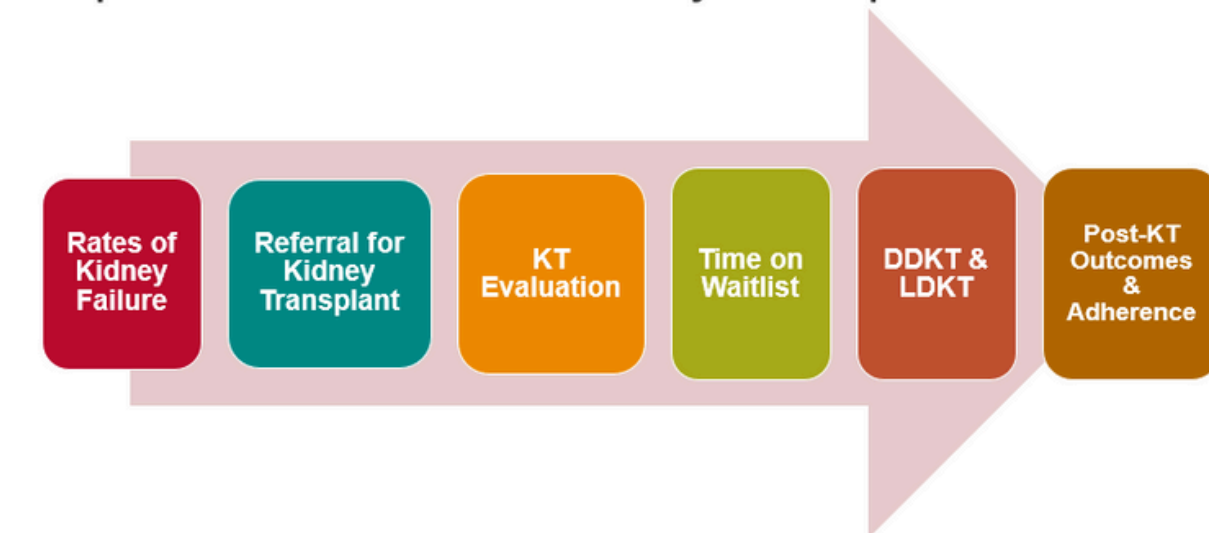
Background

- Kidney transplantation (KT) is the optimal treatment for end-stage kidney disease (ESKD).
- The evaluation process to be considered for a KT is complex and requires clearance from a multitude of medical providers.



- This poster presents an update on the status of this potentially high impact RCT intended to address KT disparities.

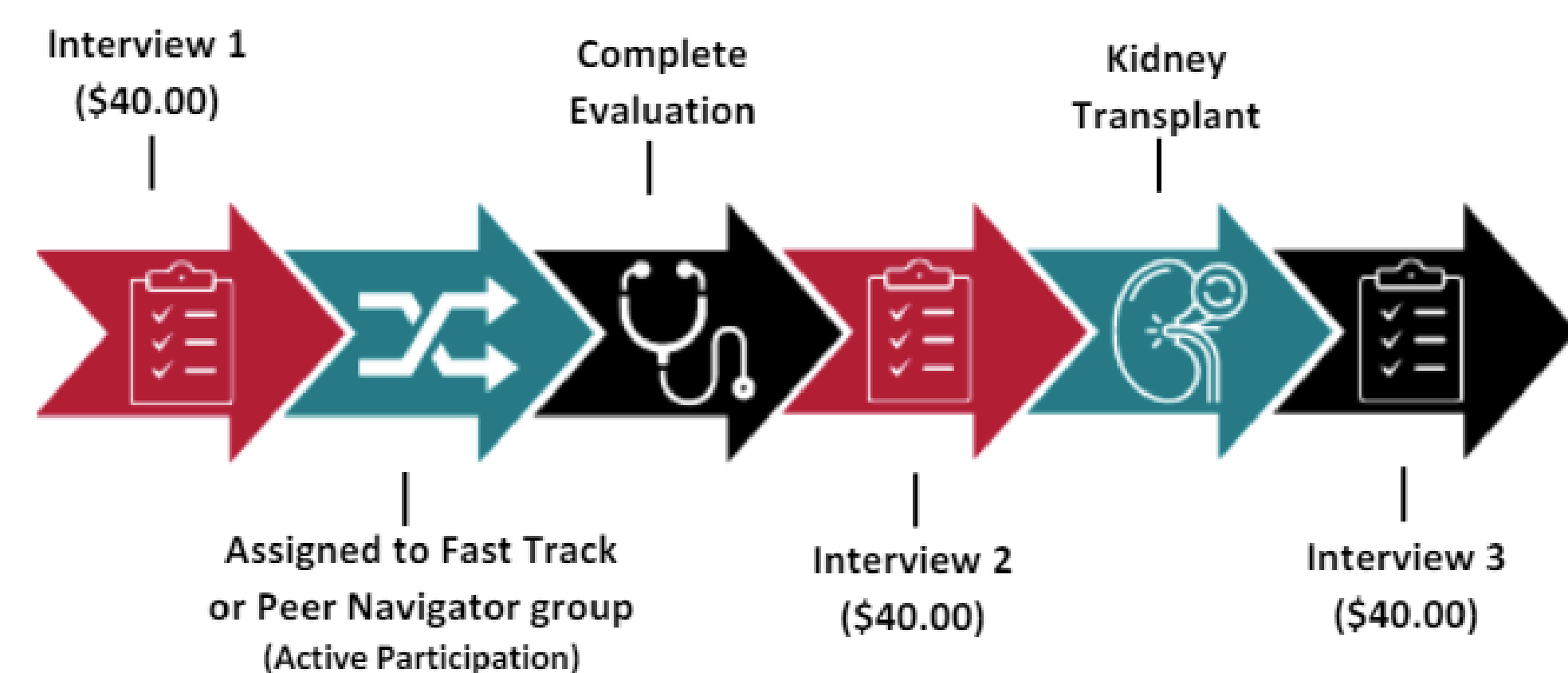
Disparities Across the Kidney Transplant Continuum



Methods

Sample: Patient undergoing kidney transplant evaluation

Intervention Comparative effectiveness trial of fast-track vs. peer navigators	Outcomes • Time to waitlist • Type of txp • Cost • Reduced perceptions of racism or discrimination; more trust
Status Recruitment ongoing since 01/22	



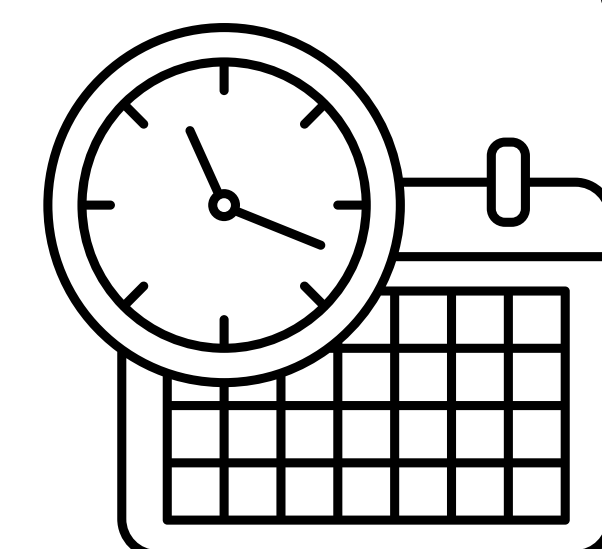
Intervention Arms

Peer Navigator



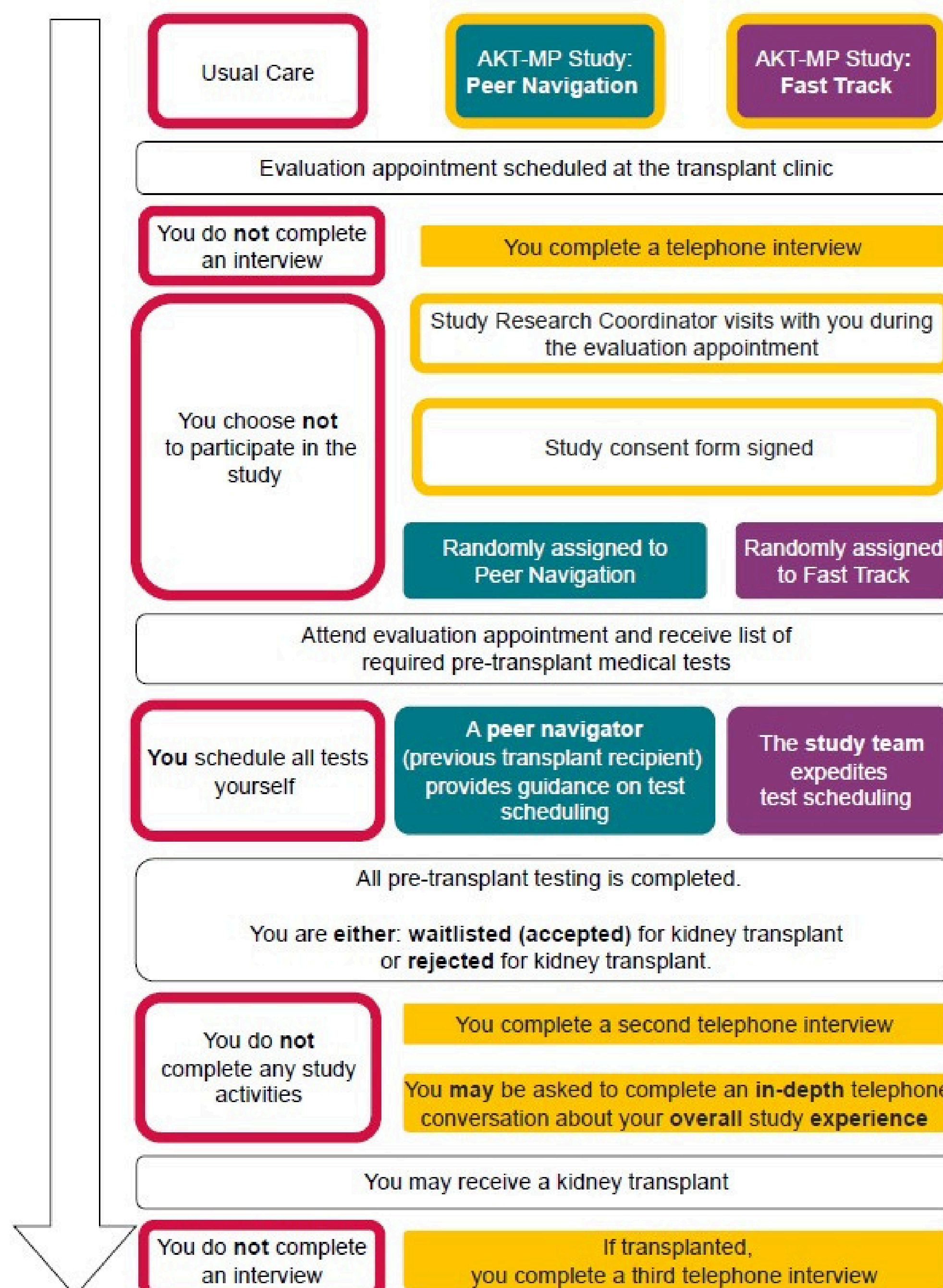
- PNs are previous kidney transplant recipients.
- PNs meet once per month with each patient and provide support using motivational interviewing (MI) techniques.

Fast Track



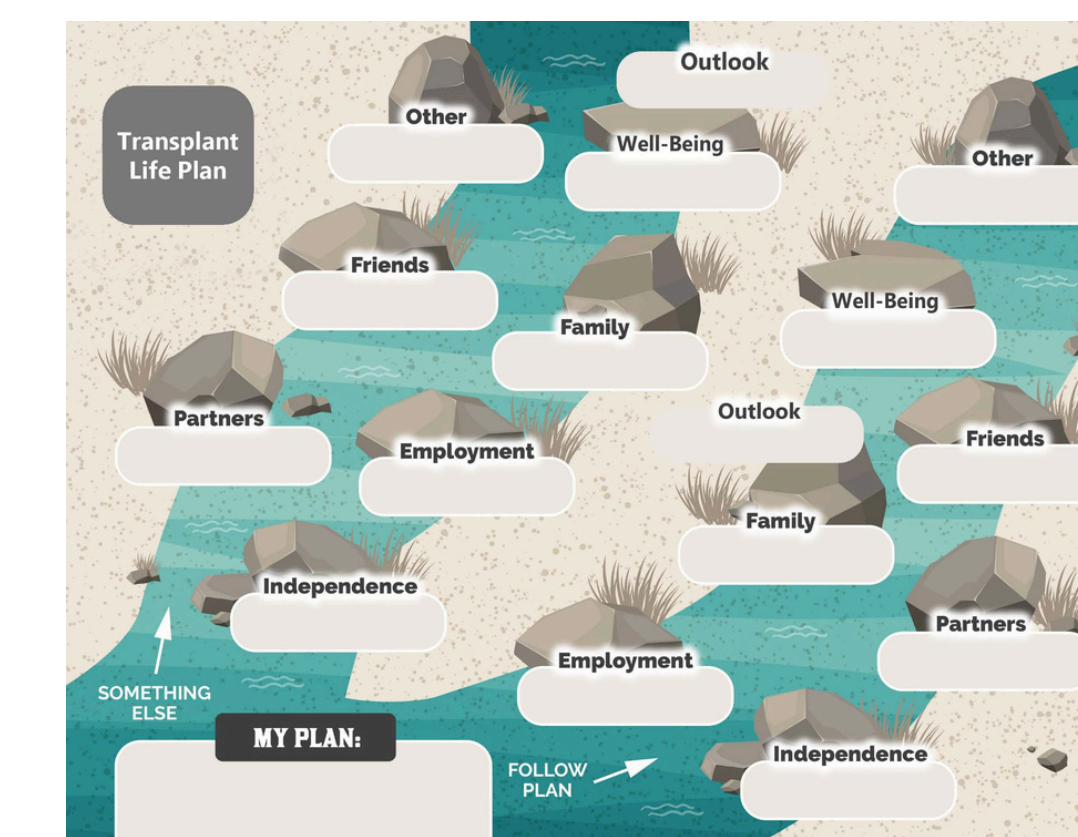
- The research team facilitates the scheduling of all required medical appointments.
- Various departments set aside appointments for AKT-MP study participants to expedite the process.

Study Flow Diagram



Results

- 431 patients have verbally consented.
- 378 patients completed a T1 interview.
- **256 have been randomized to either PN or FT**
 - 50.7% are Hispanic
 - 32.8% are American Indian
 - 14.1% have been Spanish speaking only
- 116 completed a T2 interview. Not all patients who complete a T2 interview are eligible for randomization.
- 150 patients are actively undergoing evaluation.
- 4 editions of the semi-annual study newsletter have been sent to study participants.



- Tool used by PNs to help guide MI conversations with patients.
- Available in English and Spanish.

Next Steps

- 13 months of enrollment remain.
- In-depth interviews will be conducted to qualitatively assess participant satisfaction with the intervention.
- Planned survival analyses include:
 - Time to index evaluation completion
 - Time to waitlisting
 - Time to transplant
- We will conduct a cost-effectiveness analysis to compare PN and FT and related personnel costs.

The authors have no conflicts of interest to report.
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