

Kidney Disease + Vaccines

LIVE WEBINAR: FRIDAY, MARCH 25, AT 12 P.M. ET



Building sustainable, community-centered health equity by applying pandemic lessons to vaccines and total health with a focus on kidney disease.

Moderator

Kristen Hbbs, MPH, CPH

Senior Project Manager, Quality Improvement and Equity
NMQF - SHC



Microsite Devo

Example:

Improving Stroke Prevention in Atrial Fibrillation through
Screening, Education, and Quality Improvement

AN SHC TOOLKIT



Introduction

Atrial fibrillation (AF) is the most common heart arrhythmia and a leading cause of stroke. While medications can prevent stroke in people with AF, barriers persist including lack of diagnosis, treatment nonadherence, and racial and ethnic disparities. This toolkit assists primary care teams in understanding their patients' risk and promoting evidence-based, patient-centered, equitable treatment with anticoagulants using quality improvement strategies.

About AF

Atrial fibrillation is the most common heart arrhythmia. It is the primary diagnosis for nearly half-a-million

- Basis for infographics, social media graphics, flyers, etc.
- Culturally responsive and linguistically appropriate for ALL audiences
- Important to individuals living with chronic kidney disease

Housekeeping

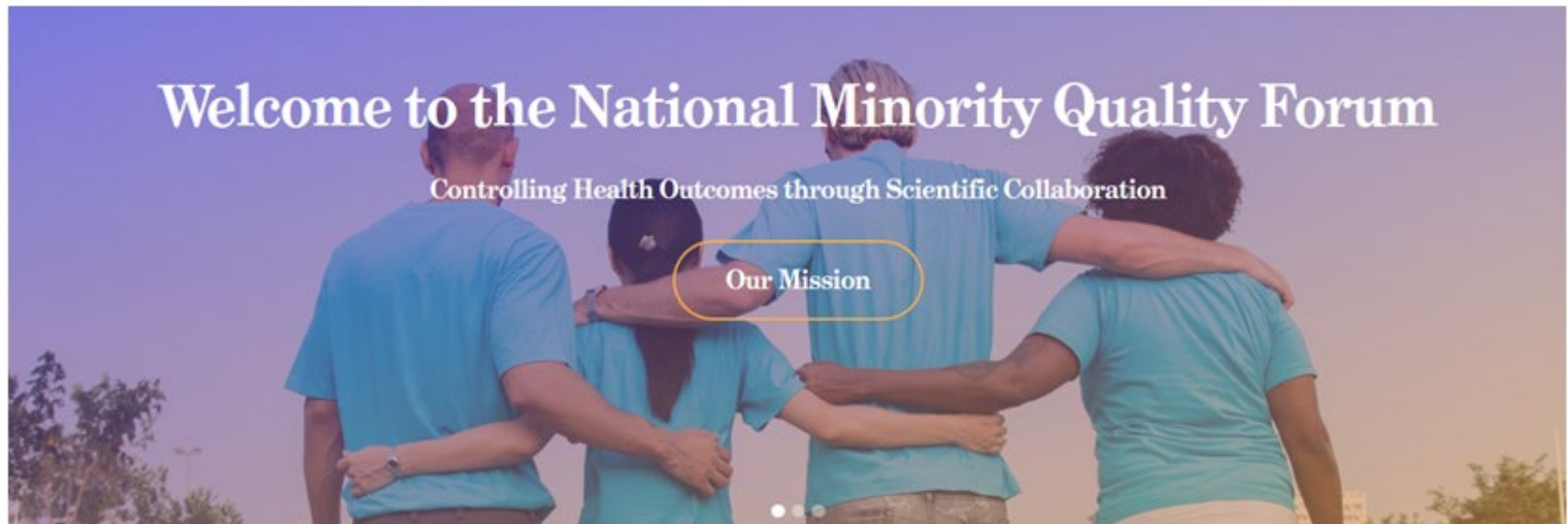
- All attendees are in listen-only mode and videos are turned off
- Place all questions in Q&A box
- Respectful communication in chat box is welcome
- Transcription should appear at the bottom of your screen
- This webinar will be interactive!
- Transparent feedback



Agenda

- NMQF - SHC
- Chronic Kidney Disease in POC
- Vax Data
- ACIP Recommendations
- Panel Discussion
- Microsite Outline Feedback

NMQF



“The National Minority Quality Forum was founded in 1998 to address the critical need for strengthening national and local efforts to use evidence-based, data-driven initiatives to guide programs to eliminate the disproportionate burden of premature death and preventable illness for racial and ethnic minorities and other special populations.”

Center for Sustainable Health Care Quality and Equity (SHC)

- Sustainable, healthy communities in every zip code
- Communities of color are prioritized
- Quality Improvement and clinical education through the lens of health equity



Laura Lee Hall, PhD
President, SHC



Kristen Hobbs, MPH, CPH
Senior Project Manager, Quality Improvement & Equity



Chinonso "Chinnie" Ukachukwu, MPH
Quality Improvement and Equity Project Manager

Chronic Kidney Disease (CKD)

What is it?:

- The kidneys are damaged and can't filter blood the way they should.
- The main risk factors for developing kidney disease are diabetes, high blood pressure, heart disease, and a family history of kidney failure.

How can one manage CKD?:

- Controlling diabetes and blood pressure.
- Engaging in healthy habits
- Receiving all adult and routine vaccinations

Source: National Institute of Diabetes and Digestive and Kidney Diseases

Kidney Disease + Race & Ethnic

Who is at higher risk for complications?

- African Americans, Hispanics, and American Indians are at high risk for developing kidney failure
- Increased prevalence of diabetes and high blood pressure in communities of color

By the numbers...

- Black patients are 4x more likely to develop kidney failure
- Hispanic patients are 1.3x more likely to develop kidney failure
- Indigenous Americans are 1.2x more likely to develop kidney failure

Source: National Institute of Diabetes and Digestive and Kidney Diseases

Infectious Disease Implications

COVID-19

- Patients living with kidney disease are at higher risk for complications - hospitalization and/or mortality
- Patients on dialysis may have weakened immune systems, making it harder to fight infections
- People with kidney transplants also have weakened immune systems due to anti-rejection meds
- COVID-19 patients at risk of acute kidney injury (AKI) or acute renal failure (ARF)
- COVID-19 vaccines and boosters are best defense + risk mitigation measures

Source: National Kidney Foundation & NKF of Michigan

Infectious Disease Implications

Flu

- Patients living with kidney disease are at higher risk for complications - hospitalization and/or mortality
- Patients on dialysis may have weakened immune systems, making it harder to fight infections
- People with kidney transplants also have weakened immune systems due to anti-rejection meds
- Flu vaccine shown to reduce risk of getting sick with flu or having complications

Source: Centers for Disease Control and Prevention

Panelist

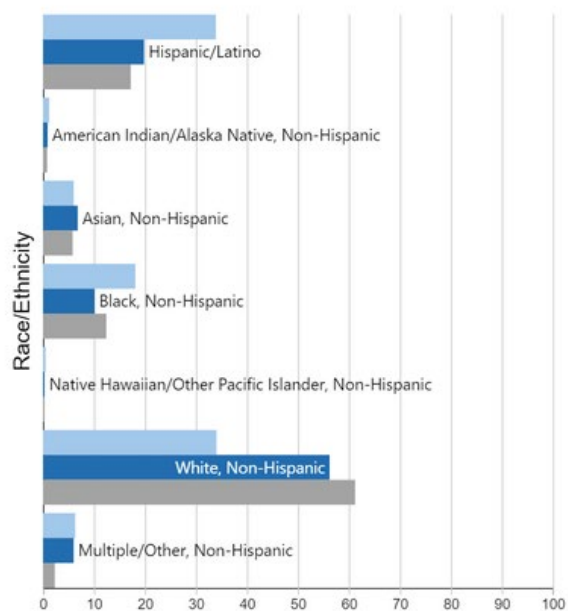


Iyabode Beysolow, MD, MPH
COVID and Flu Immunization Expert
AIM and iREACH Program for CDC

Data: COVIDVax by Race & Ethnicity

Race/Ethnicity of People Fully Vaccinated:

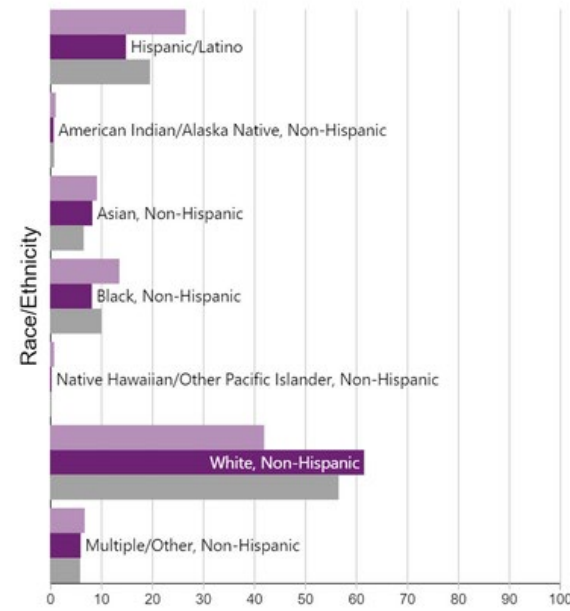
Data from 217,184,868 people fully vaccinated. Race/Ethnicity was available for 168,693,934 (77.7%) people fully vaccinated.



- Percent among People who completed all recommended doses in last 14 days
 - Percent among People who are Fully Vaccinated
 - Percentage of the US Population in this Demographic Category
- Show Percentage of the US Population that is in this demographic category

Race/Ethnicity of People 12 Years and Older with a Booster Dose:

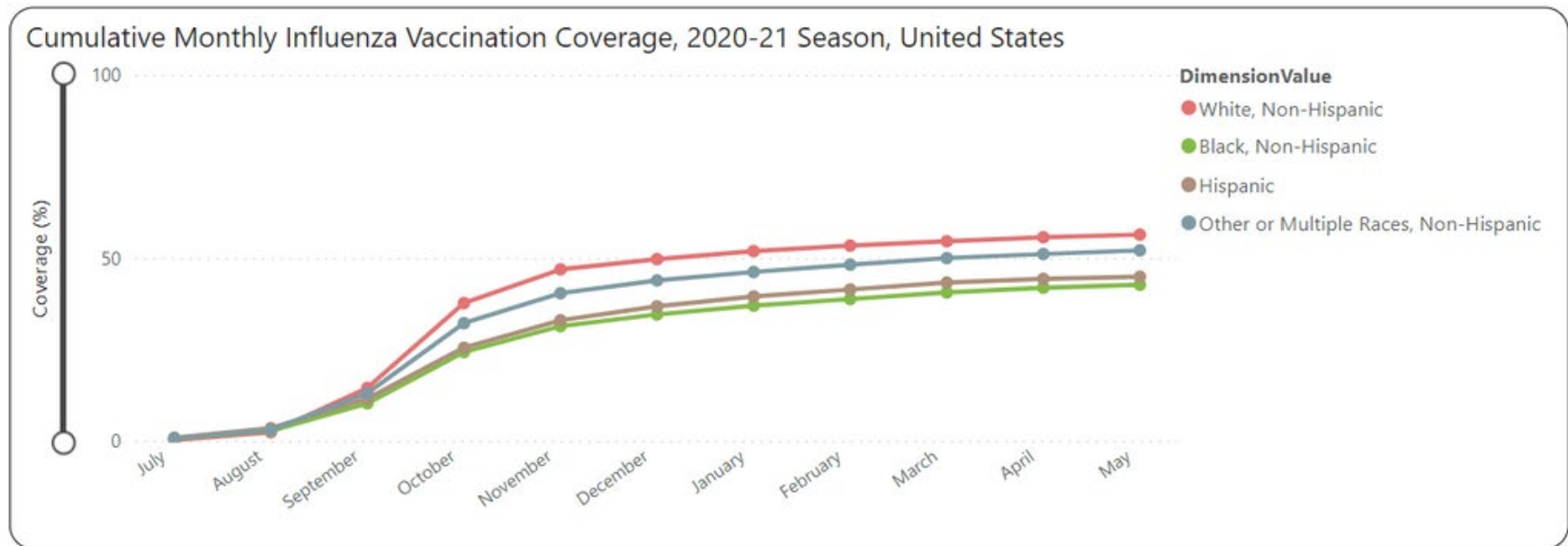
Data from 96,852,970 people aged 12 years and older with a booster dose administered. Race/Ethnicity was available for 86,478,815 (89.3%) people with a booster dose administered.



- Percent among People who received a booster in last 14 days
 - Percent among People with a booster dose
 - Percentage of the Fully Vaccinated 12+ Population in this Demographic Category
- Show Percentage of the US Population Fully Vaccinated

As of March 23, 2022
Source: Centers for Disease Control and Prevention



Data: Flu Vax by Race & Ethnicity



Source: Centers for Disease Control and Prevention

Data: COVIDVax in Patients

COVID-19 vaccination schedule for people with moderate or severe immunocompromise

Primary vaccination	Age group	Number of primary vaccine doses	Number of booster doses	Interval between 1st and 2nd dose	Interval between 2nd and 3rd dose	Interval between 3rd and 4th dose
Pfizer-BioNTech (mRNA)	5-11 years	3	N/A	3 weeks	4 weeks or more	N/A
Pfizer-BioNTech (mRNA)	12 years and older	3	1	3 weeks	4 weeks or more	3 months or more
Moderna (mRNA)	18 years and older	3	1	4 weeks	4 weeks or more	3 months or more
Janssen	18 years and older	1 Janssen, followed by 1 mRNA	1	4 weeks	2 months or more	N/A

Data: Flu Vax in Patients

CDC Recommendations

- Flu vaccine is the best protection against the flu
- The nasal spray is contraindicated in people who are immunocompromised
- Among people with CKD, flu vaccination has been associated with reduced hospitalizations
- Pneumococcal pneumonia is an example of a serious flu-related complication that can cause death.
- Get a pneumococcal vaccine

Source: Centers for Disease Control and Prevention

ACIP Recommendations

Advisory Committee on Immunization Practices

- A routine annual flu vaccination is recommended for all individuals aged 6 months+ who do not have contraindications.
- Speak with your doctor if you have questions



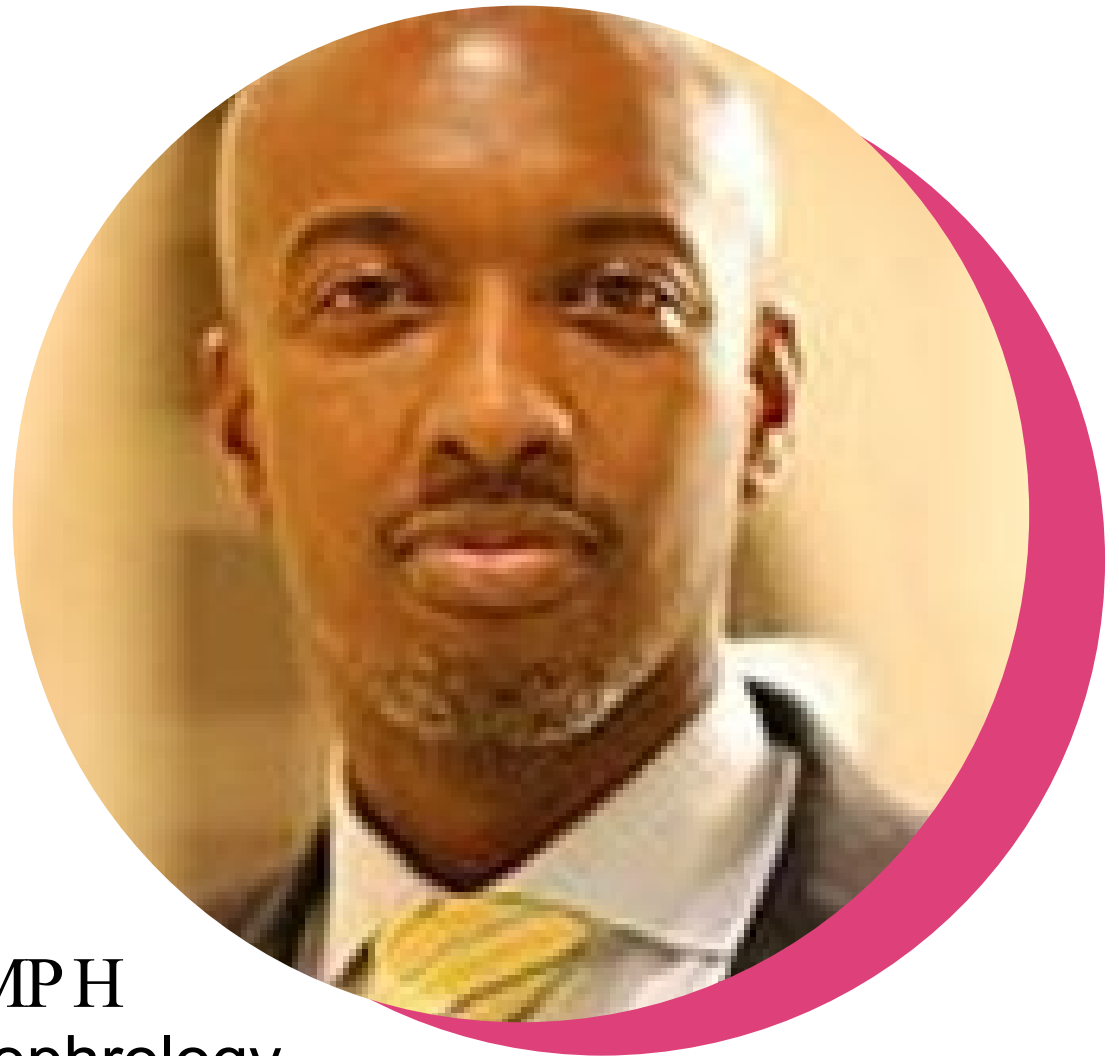
Source: Centers for Disease Control and Prevention

Panelist



Cynthia Nichols-Jackson
Patient and Program Coordinator
National Kidney Foundation of Michigan

Panelist



Silas Norman, MD, MPH
Associate Professor, Nephrology
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THANK
YOU