

Patients Depend On Their Doctors

Chronic kidney disease (CKD) patients depend on their doctors—especially their nephrologist, to tell them what their best options are when it comes to disease progression and end stage renal disease (ESRD) choices. And while most patients receive information about dialysis and transplant, there simply isn't enough time in any given appointment to peel back the layers on the unparalleled difference between the two. Though in-office training sessions are made available, the information only scratches the surface when it comes to revealing patient outcomes, risks and benefits. Moreover, patients are not incentivized to attend these sessions, ask important questions or proactively plan their future. Sadly, this mentality often leads to regret and resentment when eligible transplant patients' wake up to find that their best shot at circumventing dialysis is no longer an option.

Optimal Timing

While the Centers for Medicare and Medicaid Services (CMS) now require all dialysis companies to provide transplant education to their patients, the information is often too brief or ambiguous to inspire the patient to action, especially when delivered while the patient is dialyzing. In order to make CKD patient education more inclusive and powerful, it needs to include (1) Optimal timing of delivery, (2) Risk/benefit comparisons, and (3) Patient empowerment strategies to help transplant candidates end the wait by becoming their own living kidney donor champion.

The Missing Link

The missing link in dialysis patient education model is that it only addresses the needs of those who have already (unknowingly, and of no fault of their own) relinquished their right to receive a transplant before they required dialysis. And though this mandate is vitally important for the future of all transplant eligible dialysis patients, it pales in comparison to the need to deliver patient education long before dialysis would be required. Once the patient understands the incomparable advantage of circumventing dialysis before transplantation, they're instinctively compelled to achieve a better outcome.

The Solution

To solve this dilemma, the TransplantFirst Academy offers nephrology offices, renal groups and transplant centers a patient education platform that targets 4 key areas: (1) Optimal timing of delivery (2) Outcomes, risks and benefit comparisons, (3) Provider partnering and self-advocacy, and a (4) Detailed action plan to help patients achieve their goals and secure optimal outcomes. Through our advanced education modules, CKD patients can take a deeper dive into the unparalleled difference between their option to (1) "Wait to get sicker" and be forced on dialysis *to survive*—or (2) Proactively secure a preemptive (before dialysis is needed) transplantation—and drive their right *to thrive*.

Government Advocacy

Our ongoing initiatives include government engagement to support advanced kidney disease patient education models (beginning in earlier stages of disease progression). We believe government will actualize valuable rewards and incentives by helping end stage kidney disease (ESRD) patients circumvent dialysis due to the fact that transplant costs less than dialysis over (a short period of) time. Hence, the more patients who avoid dialysis, the more dollars saved. It is believed that billions could be saved if dialysis was utilized only by ineligible transplant patients. In essence, this concept could equate into a triple win for government, patients and providers alike, by reducing Medicare spending, expanding quality of life opportunities for patients—and by improving facility and provider outcomes.