

## LEGISLATOR INTRODUCTION - KIDNEY DIALYSIS U.S.A.

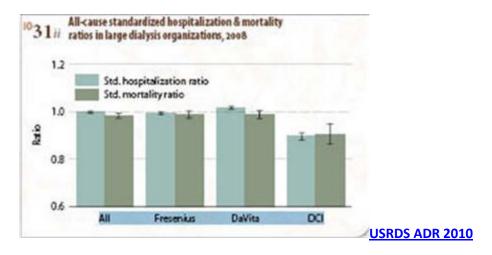
"Italy has one of the lowest mortality rates for dialysis care -- about **one in nine patients dies**each year, compared with **one in five here**. Yet Italy spends about one-third less than we do

per patient."

From Propublica, a national investigative news agency

1

United States Renal Data System sees a difference in providers - Hospitalization and Mortality<sup>2</sup>



Scandal: Colorado Springs Gazette - "Dialysis mix-up prompts discussion over equipment re-use"3

## What can you do as a Legislator? Reforms needed, and Concerns:

- Ban the reuse of dialyzers! (filters used to clean blood see Scandal above)<sup>3</sup>
- Insure minimum treatment times (most patient treatments are at least 4 hours in Germany and Japan)<sup>4</sup>
- Insure safe staff/patient ratios (Dialysis Clinic Inc. uses more nurses-see graph above)<sup>5</sup>
- Question the corporate culture at DaVita the number 1 dismisser of patients<sup>6</sup>
- Ask what dialysis companies are doing to insure good treatments. Remember, good lab results are easy to get, question the fast violent treatments done here<sup>7</sup>

## FOR MORE INFORMATION CONTACT: DIALYSISETHICS.ORG

http://www.dialysisethics2.org/ (see "Contact Us Page)

DIALYSISETHICS IS A NETWORK OF LEADING PATIENT ADVOCATES WHO WORK ON INDIVIDUAL, LEGAL, AND LEGISLATIVE KIDNEY PATIENT CONCERNS (NATIONAL AND STATE)

## **Flyer Sources**

<sup>1</sup>Propublica article: "In Dialysis, Life-Saving Care at Great Risk and Cost"

by Robin Fields, ProPublica, Nov. 9, 2010, 7 a.m.

http://www.propublica.org/article/in-dialysis-life-saving-care-at-great-risk-and-cost

(article from Propublica's expose at:

http://www.propublica.org/topic/diagnosing-dialysis)

<sup>2</sup>United States Renal Data System 2010 Annual Data Report pg. 364 (USRDS gathers data for the federal government) http://www.usrds.org/2010/slides/indiv/1v2index.html

<sup>3</sup>Colorado Springs Gazette Article: "Dialysis mix-up prompts discussion over equipment re-use"

by BARBARA COTTER, THE GAZETTE, August 01, 2010 9:00 AM

http://www.gazette.com/articles/dialysis-102290-three-mix.html#ixzz16zHfeyeo

"Flaxenburg and the other doctors at Pikes Peak Nephrology were so alarmed by the back-to-back incidents at the Springs clinics that they sent a letter to their patients in May to say they could "no longer support dialyzer reuse,"

Anti-reuse studies (a few years old):

http://www.dialysisethics2.org/forum/index.php?topic=58.0

http://www.dialysisethics2.org/forum/index.php?topic=57.0

<sup>4</sup>Home Dialysis Central internet topic: "<u>Dialysis Industry May Expand as Study Sways Medicare</u>": <a href="http://forums.homedialysis.org/showthread.php/2667-Dialysis-Industry-May-Expand-as-Study-Sways-Medicare">http://forums.homedialysis.org/showthread.php/2667-Dialysis-Industry-May-Expand-as-Study-Sways-Medicare</a> "data among 22,000 or so dialyzors (people on dialysis) found a 30% drop in the risk of death for folks who got at LEAST 4 hours of treatment."

<sup>5</sup>Propublica article: "New Study Shows Higher Mortality Risk at For-Profit Dialysis Chains" by Robin Fields, ProPublica, Dec. 9, 2010, 2:02 p.m. <a href="http://www.propublica.org/article/new-study-shows-higher-mortality-risk-at-in-for-profit-dialysis-chains">http://www.propublica.org/article/new-study-shows-higher-mortality-risk-at-in-for-profit-dialysis-chains</a>
"In addition to lower mortality risk, the study found that patients at the nonprofit chain (DCI) had the shortest hospital stays and were most likely to be in the recommended range for anemia, despite being given the lowest doses of anemia-treatment drugs. Its clinics also were staffed differently, with more nurses relative to patient-care technicians, who are unlicensed and, typically, lower paid."

<sup>6</sup>Can contact Arlene Mullin at DialysisEthics.org (see contact info at bottom of flyer)

<sup>7</sup> DialysisEthics article: "<u>Do We Need to Abandon High Ultrafiltration Rates in America</u>?" by Peter Laird MD

http://www.dialysisethics2.org/index.php/More-Featured-Items/pump-speeds-and-mortality.html

" Japan, Europe, Australia and New Zealand have long recognized the survival benefits of longer, slower and gentler dialysis compared to our **American style violent** sessions."

DialysisEthics article: "Recipient of the Annual Award for Lifetime achievement in Hemodialysis" by Dr. Carl Kjellstrand , 2000 keynote address

http://www.dialysisethics2.org/index.php/Our-Concerns/dr-carl-kjellstrand.html

" Just as speed on the road kills, so it does in hemodialysis."