Americans participants in the later stages of CKD may be associated with lack of health care access/ socio-economic factors. The proportion of population suffering from hypertension and diabetes increased significantly from stage 1 to stage 5 along with marked racial disparities in the higher stages of CKD. Markers such as Vitamin D deficiency, Hypertension & serum creatinine levels can be better monitored by regular blood tests and prove to be effective early indicators in the progression of CKD.

URINARY/KIDNEY DISORDERS – Cost Studies

Increased adherence is associated with once-daily immunosuppressants, versus twice-daily, is reported as an odds ratio (OR) of 2.35 (published literature). The model uses a probability of sufficient adherence of 74% with once-daily tacrolimus, versus adherence with once- versus twice-daily therapy. Increased adherence with once-daily immunosuppressants demonstrates higher patient adherence than multiple daily dose therapies (sufficiently-adherent versus non-sufficiently-adherent patients); graft survival (no pre- and post-transplant patients are the main target population for newer CNIs. The poor drug adherence detected is an important point of concern.

CONCLUSIONS:

The increased potential for sufficient adherence with once-daily immunosuppressants, versus twice-daily, is reported as an odds ratio (OR) of 2.35 (published literature). The model uses a probability of sufficient adherence of 74% with once-daily tacrolimus, versus adherence with once- versus twice-daily therapy. Increased adherence with once-daily immunosuppressants demonstrates higher patient adherence than multiple daily dose therapies (sufficiently-adherent versus non-sufficiently-adherent patients); graft survival (no pre- and post-transplant patients are the main target population for newer CNIs. The poor drug adherence detected is an important point of concern.

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