



Dialysis patients in Europe in favor of using their existing health infrastructure for COVID-19 vaccination

Social distancing; self-isolation – for dialysis patients this is not possible. The fear of contracting Corona is their daily companion. For a good reason: Every fourth dialysis patient who suffered from COVID-19 did not survive. With the introduction of vaccines hope returns. It is now essential that we use our existing healthcare infrastructure to get (one of) the most vulnerable patient population(s) vaccinated as quickly as possible so we can turn that hope into reality.

Worldwide around 3.5 million patients with kidney failure regularly undergo dialysis treatment. **There are several reasons at once, why those dialysis patients contracting COVID-19 have an increased risk to suffer serious health complications or even do not survive:**

- **Age: The average dialysis patient is older than 65 years**
- **Multiple co-morbidities: In fact, the average person on dialysis has until five comorbidities (for example: diabetes, hypertension, or cardiovascular diseases)**
- **Impaired immune system: Patients who undergo dialysis treatment have an increased risk for getting an infection**

In numbers that means: Every fourth dialysis patient who suffered from COVID-19 did not survive.

And, dialysis patients do not only have an increased risk for serious health complications, but they are also exposed to a higher risk of contracting COVID-19. In comparison to many other risk groups, dialysis patients cannot isolate themselves. They are dependent on regular dialysis treatment, which means that around 90 percent of patients go to a dialysis center three times a week, (which involves driving to the center, sharing transportation and sharing public dialysis rooms with other patients) to get their life-sustaining 4-5 hours dialysis treatment.

Given the extreme vulnerability of dialysis patients, there should be little doubt that these patients and their care teams deserve to be near the front of the line for vaccination.



Vaccinating patients in dialysis center is the most expeditious and safest approach. Those centers offer a ready-made and proven distribution network that can rapidly help dialysis patients and care teams getting vaccinated against the deadly threat. Dialysis centers are medical facilities staffed with nurses and other medical professionals who are well versed in vaccine distribution. They already regularly deliver influenza, Hepatitis B, and pneumococcal vaccines. The nurses know how to make the injections and the facilities have needed supplies on hand. They are ready to get started immediately.

Another advantage: Vaccinating dialysis patients and their caregivers would not only safeguard this vulnerable population; it would free up critical space in hospitals. With many hospitals already near or at capacity, vaccinating those most at risk for serious complications would ensure more beds remain available.

EKPF President, Daniel Gallego, has said: "dialysis patients have a greater risk of mortality and reverse outcomes of COVID-19 infection; thus, we should be among the priority groups. Moreover, dialysis patients cannot isolate themselves, undergoing three times per week to their treatments in public transportation, means the highest exposure to the virus. Dialysis units are the easiest way to prevent and vaccinate all dialysis patients across Europe".

In some European countries are planning the vaccination of people over 70-80 years old in primary care, this implies an unnecessary risk for people undergoing treatment for hemodialysis of those ages and vaccination in their dialysis units would avoid these risks.

Dialysis centers/providers are ready and able to be part of the solution to accelerate the vaccination of dialysis patients who have entrusted them with their care.

In Europe, countries like Portugal are leading the way by allocating doses directly to their dialysis centers to ensure that dialysis patients and frontline care teams could quickly be vaccinated. In Portugal, dialysis patients and their care teams already received the first dose of vaccination. The second dose is scheduled to be administered within the next days. For dialysis patients and their families, we hope the Portuguese example can be a model for many other European countries.



In the words of Paulo Zoido, secretary APIR´s general assembly (Portuguese Kidney Patients Association) and patient ongoing hemodialysis: "Being a kidney patient attending three times a week to an outpatient hemodialysis unit, not being able to comply with the lockdown, the fear of infecting a colleague or of being infected, and therefore infecting my family, tormented me during this year that the pandemic has lasted, and I realize the anguish it has caused in my hemodialysis colleagues. When I received the surprise news that all hemodialysis patients were going to be vaccinated against SARS-COV 2, the feeling I felt was that of relief. After the first dose, I just felt a slight pain in my arm. After the second dose, besides the pain in my arm, I had a fever, but it was readily solved through antipyretics. "

Professionals who care for kidney patients in Portugal have also expressed themselves in favor of preventive vaccination of these patients:

Press release of portuguese nephrology society:

[https://www.spnefro.pt/noticias/2021/174_esquecemos-de-testar-e-vacinar-os-mais-vulnerveis-e-os-mais-prioritrios](https://www.spnefro.pt/noticias/2021/174_esquecemos_de_testar_e_vacinar_os_mais_vulnerveis_e_os_mais_prioritrios)

Press release of portuguese transplantation society:

<http://www.spt.pt/site/desktop/webpage-87.php>

The sooner the existing resources of dialysis centers are put to work, the sooner we can put this behind us and turn hope into reality.

On Behalf

EKPF EXECUTIVE BOARD

Daniel Gallego