



18th January 2021

Mr Stephen Donnelly TD,
Minister for Health,
Department of Health,
Block 1, Miesian Plaza,
50 – 58 Lower Baggot Street,
Dublin D02 XW14.

Re Vaccination priorities for kidney patients

Dear Minister,

We appreciate your onerous responsibilities and that many stakeholders are requesting re-prioritisation for vaccinations. However, while patients with chronic kidney disease are specifically included on the list of those who are extremely vulnerable to the Covid-19 virus, having a potential mortality rate of 25%,ⁱ that fact is inconsistent with the COVID-19 Vaccine Allocation Strategy priority list developed by the National Immunisation Advisory Committee (NIAC) and your Department.

We support the HSE's National Renal Office (NRO) in calling for Chronic Kidney Disease (CKD) patients to be re-prioritised in relation to the roll-out of any Covid-19 vaccine. They are advocating that CKD patients receive the same priority allocation as nursing home residents. There are more than 4,800 patients with CKD in Ireland, and many of them are currently only 7th on the provisional priority list for a vaccine (People aged 18-64 with certain medical conditions), with the under 18s (many of whom are school goers, unable to attend school) in 15th position.

Over 2,200 CKD patients currently receive dialysis treatment. Approximately 90% of these have to attend a hospital or dialysis centres (entering the front line) three times a week every week for a treatment that usually lasts 3-4 hours each time. This has obviously been a source of extreme anxiety for many as it means that they have not been able to cocoon to the extent advised or that they would like.

The 2,600+ people living with a functioning kidney transplant, just like patients who have received other organ transplants (heart, lung, liver, pancreas), are on life-long immune-suppressant medication and are as a consequence extremely vulnerable. Prior to the pandemic they were viewed as 'healthy', and many were actively engaged in the world of work. Their vulnerability has been extremely difficult to manage (mentally but also practically), as on the one hand society expects them to engage to the same extent as the general population, whilst on the other hand they are medically advised to cocoon.



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We note there is some early evidence that the virus may be mutating amongst immune compromised patients, thus suggesting early vaccination of immune compromised patients may become a public health issue.

The American Society of Nephrology and the British Transplantation Society (both medical Societies) have issued statements clearly advising the importance of prioritising people on dialysis and transplant recipients because of the extremely high mortality rate (25% amongst renal patients). In a press release issued on 17th December 2020, the National Kidney Foundation (NKF) which represents 37 million adults in the US with kidney disease, states that it “believes that the key principle of ethical allocation must be that the vaccine is made available to patients at the highest risk of severe outcomes from Covid-19 infection”

We hope and trust that in Ireland our extremely medically vulnerable CKD patients will also be afforded ethical vaccine allocation recognition.

Given the known potential impact of Covid-19 on the kidneys, there is a concern that if a kidney transplant recipient survives the virus, they could end up losing their transplanted kidney resulting in a return to dialysis, an uncertainty around a possible subsequent transplant, and increased cost and pressure on the health service.

Finally, we concur with the Irish Platform for Patient Organisations, Science & Industry (IPPOSI), that one of the reasons patients at high risk in the community have been overlooked is the lack of patient and public involvement on key decision-making forums.

In the light of the foregoing, with a current potential mortality rate of 25% in chronic kidney disease patients, the 4,800 CKD patients in Ireland are in grave danger, and we request that they receive the highest possible priority.

We look forward to hearing from you.

Yours sincerely

Colin Mackenzie
Chairperson
Irish Kidney Association
For and on behalf of the Board



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References

- i *European Renal Association COVID-19 Database - COVID-19-related mortality in kidney transplant and dialysis patients: results of the ERACODA collaboration - Nephrol Dial Transplant (2020) 35: 1973–1983.*
 - ii <https://www.sciencemag.org/news/2020/12/uk-variant-puts-spotlight-immunocompromised-patients-role-covid-19-pandemic>
 - iii <https://www.kidney.org/news/statement-kidney-patient-prioritization-covid-19-vaccines-and-therapeutics> .
 - iv https://www.ipposi.ie/wp-content/uploads/2020/12/Joint-letter-from-patient-organisation-and-vulnerable-group-representatives_final2.pdf
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Copy to:, Mr Robert Watts, Secretary General DOH; Mr Paul Reid, CEO HSE; Prof. Karina Butler, Chair National Immunisation Advisory Committee; Professor Brian MacCraith, High-Level Task Force on Covid-19 Vaccination; Prof. George Mellotte, Clinical Director NRO; Ms Dilly Little, Surgical Director NKTS; Dr Liam Plant, President Irish Nephrologist Society, Mr. Colm Burke, Spokesperson for Health, Fine Gael; Mr. Alan Kelly, Spokesperson for Health, Labour; Mr. David Cullinane, Spokesperson for Health, Sinn Fein; Ms. Róisín Shortall, Spokesperson for Health, Social Democrats.



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