
By: **Delegates Nathan-Pulliam, Benson, Burns, Cane, Carter, Fulton,
Howard, Hubbard, Jones, Kach, Marriott, Menes, Morhaim, Oaks, and
Paige**

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Assigned to: Rules and Executive Nominations

HOUSE JOINT RESOLUTION

1 A House Joint Resolution concerning

2 **Chronic Kidney Disease as a Health Disparity**

3 FOR the purpose of recognizing that chronic kidney disease is a health disparity that
4 requires research and implementation of therapeutic interventions to delay the
5 progression to end-stage renal disease.

6 WHEREAS, Today more than 20 million Americans have a form of chronic
7 kidney disease of which more than 8 million have seriously reduced kidney functions
8 that may progress to a more severe level, called end-stage renal disease, that will
9 require the patient to undergo kidney dialysis several times a week or receive a
10 kidney transplant; and

11 WHEREAS, African Americans suffer from chronic kidney disease at four times
12 the overall rate of chronic kidney disease in the United State of America; and

13 WHEREAS, African Americans make up about 13% of the United States
14 population, but account for 32% of all people treated for kidney failure; and

15 WHEREAS, African Americans make up 28% of Maryland's population but
16 account for 59% of Maryland residents on dialysis; and

17 WHEREAS, End-stage renal disease is usually the result of years of chronic
18 kidney disease caused by diabetes mellitus, high blood pressure, inherited conditions,
19 or other insult to the kidneys; and

20 WHEREAS, Chronic kidney disease is a major health care burden and is
21 projected to cost \$20 billion for the National Health Care System by the year 2010;
22 and

23 WHEREAS, Cost-effective means are available that can determine the level of
24 kidney function and provide information for clinicians about therapeutic
25 interventions that may preserve kidney function, delay progression to end-stage
26 renal disease or renal transplantation, and sustain life; and

1 WHEREAS, For each year that end-stage renal disease is delayed in a
2 Maryland resident who is diagnosed with chronic kidney disease, Maryland saves
3 \$61,000 in direct health care costs; and

4 WHEREAS, Evidence-based clinical guidelines have been developed by
5 scientists and renal experts, are published in numerous peer-reviewed journals, and
6 if implemented, could save the lives of countless Americans; and

7 WHEREAS, Public policy initiatives targeted at early identification of
8 individuals at risk for chronic kidney disease can reduce the serious long-term effects
9 of the disease thereby potentially lowering the significant economic burden on the
10 health care system while improving the quality of life for numerous Americans; now,
11 therefore, be it

12 RESOLVED BY THE GENERAL ASSEMBLY OF MARYLAND, That chronic
13 kidney disease is a health disparity that requires research and implementation of
14 therapeutic intervention to delay the progression to end-stage renal disease; and be it
15 further

16 RESOLVED, That a copy of this Resolution be forwarded by the Department of
17 Legislative Services to the Honorable Robert L. Ehrlich, Jr., Governor of Maryland;
18 the Honorable Thomas V. Mike Miller, Jr., President of the Senate of Maryland; and
19 the Honorable Michael E. Busch, Speaker of the House of Delegates.