

Center for Healthcare Equity in Kidney Disease

December 15, 2021

Dear Colleagues,

On behalf of the University of New Mexico's Center for Healthcare Equity in Kidney Disease (CHEK-D), I am pleased to inform you of our most recent publication, "Medication, Healthcare Follow-up and Lifestyle Nonadherence: Do They Share the Same Risk Factors?" in *Transplantation Direct*. The article may be accessed online by clicking this [link](#).

This publication involved several UNM faculty and staff, including: Yue-Harn Ng, Igor Litvinovich, Yuridia Leyva, C. Graham Ford, Yiliang Zhu, Mark Unruh, and Larissa Myaskovsky. It was produced at UNM with the collaboration of several colleagues from the University of Pittsburgh including, Kellee Kendall, Emilee Crosswell, Chethan Puttarajappa, Mary Amanda Dew, and Mount Sinai's Recanati/Miller Transplantation Institute, Ron Shapiro.

Brief Summary: We assessed the association between pre-kidney transplantation factors with nonadherent behaviors in 3 different domains post-transplant including, medications, healthcare follow-up, and lifestyle behavior changes. We conducted a prospective cohort study with telephone interviews at patients' initial transplant evaluation. Baseline measures included sociodemographic, condition-related, health system, and patient-related cultural and psychosocial factors. We interviewed the patients again at 6 months post-transplant to assess adherence. In our analysis with 173 transplant recipients, we found that different nonadherence behaviors may stem from different motivation and risk factors. We found that Black race and higher income was associated with lower medication adherence. Experience of racial discrimination predicted lower adherence to healthcare follow-up, but having an internal locus of control predicted better adherence healthcare follow-up. For lifestyle adherence behavior, we found that higher education and lower body mass index predicted better adherence to dietary recommendations, but no risk factors predicted exercise adherence. Thus, adherence interventions should be individualized to target specific risk factors.

Thank you very much for your ongoing support of our Center and its mission.

Sincerely,



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