Newly reported data representing nearly all US outpatient dialysis facilities reveal that most bloodstream infections in dialysis patients continue to occur in those with central venous catheters used for vascular access. The findings, which are published in a recent Clinical Journal of the American Society of Nephrology study, come from the first year of data used by the Centers for Medicare & Medicaid Services to assess facility performance based on bloodstream infections.

Increasing attention is being paid to reducing vascular access–related infections in dialysis patients. “Hemodialysis patients are at high risk for infections, which increase mortality, hospitalization, and healthcare costs. Therefore, surveillance of infectious adverse events among hemodialysis patients is very important,” said the Centers for Disease Control and Prevention’s (CDC’s) Duc Bui Nguyen, MD, lead author of the study. “Tracking infections helps guide intervention and prevention efforts to reduce severe events.”

In the late 1990s, the CDC initiated a system to help facilities track infections. “We still have to teach people to put the patient’s voice first,” Dishman told attendees at the May 2017 Kidney Health Initiative (KHI) meeting in Silver Spring, MD. KHI is a public-private partnership between the American Society of Nephrology, US Food and Drug Administration, and over 75 companies and organizations focused on enhancing patient safety and fostering innovation in kidney disease.

Dishman said his kidney transplant care was the first time he received truly comprehensive care. But if All of Us is successful in its goals, it may help accelerate the shift toward personalized medicine.

Beta testing
Already more than 300 participants age 18 and older have enrolled in the All of Us Research Program, according to Akinlolu Ojo, MD, MPH, PhD, MBA, a nephrologist at the University of Arizona and one of the project’s principal investigators.

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All of Us Research Program

Continued from page 1

tors. Eventually, the program will also enroll children.

"People are excited about the opportu-
nity to understand more about themselves," Ojo said. He noted they were also interested in learning more about disease processes that might affect them and their families.

Participants may enroll through dozens of organizations that provide health care, including regional medical centers, commu-
nity health centers, and US Department of Veterans Affairs Medical Centers (https://al-
lofus.nih.gov/about/program-components/
health-care-provider-organizations). Or they can volunteer directly online at joinal-
lofus.org or by calling the program. Those direct volunteers who are asked to provide biological samples and physical measure-
ments may be directed to a local health clinic at a Walgreens or Quest Diagnostic.

"It’s going to occur very rapidly," Ojo said.

The project is starting with a so-called beta testing phase in which the initial 10,000 participants will help to test and provide feedback on how the program and its systems are working. Such beta testing is a common practice for technology compa-
nies as they begin to roll out new products. It also reflects Dishman’s background in in-
formation technology. He previously served as vice president of the Health and Life Sci-
ences Group at Intel Corporation.

“Our beta testers will help us find problems with our systems and processes, so we can fix them and improve the expe-
rience for everyone going forward,” Dish-
man explained in a statement. “And most importantly, they will help us evaluate and improve our messaging, our engage-
ment approaches, and our relationship building with diverse communities across the country.”

Kidney disease

"It is important to have a diverse popula-
tion to understand the complex pro-
cesses and the pathways that lead to
disease," Ojo said.

The first data from the project should be available within a year. At that time, researchers from many different back-
grounds—from traditional federally funded academic investigators to biotech company researchers and even citizen scientists—may be able to use data from the study, Ojo noted. A national institutional review board will review study proposals as needed.

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Kidney disease

Ojo said he expects the All of Us cohort may include about 50,000 people with kidney diseases, based on the incidence of kidney diseases in the US. The program may help speed the development of kidney disease treatments targeted to specific populations, Ojo said.

"The All of Us program will help us to quickly find the causes of kidney disease in different populations and help us develop new treatments for it and other common diseases," Ojo said.

"It is important to have a diverse population to understand the complex processes and the pathways that lead to disease," Ojo said.

"The study aims to enroll a racially, eth-

All of Us Research Program Announces National Tour to Engage Communities

By Ryan Murray

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he All of Us Research Program, an element of the National Institutes of Health’s (NIH) Precision Medicine Initiative (PMI), will allow researchers, health care providers, and patients to work together and develop individualized care. In a truly historic effort, the All of Us Research Program aims to collect data from more than 1 million people to accelerate health research and medical innovation through precision medicine. This project is a network of US industry and universities that seeks to generate new knowledge on the biological, environmental, and behavioral influences on diseases with the goal of developing more effective therapies to treat them by leveraging the statistical power of a cohort of this significant size.

Currently in beta testing, the All of Us Research Pro-
gram will look to identify and enroll a diverse group of in-
terested and eligible participants later this year. Interested individuals over the age of 18 and living in the US are encouraged to apply when enrollment opens by visiting www.allofus.gov. In order to spread awareness of the program, NIH has announced a 37-week national tour called the All of Us Journey. This traveling exhibit officially kicked off in July 2017 with dates through 2018. Recognizing the value of engaging with trusted health care partners in local com-

munities, the All of Us Journey is looking to coordinate with local community members to participate in events. These events will educate the community on the All of Us Research Program and provide individuals the opportu-
nity to have their questions answered and enroll on-site. In response to the announcement, the Chair of the ASN Policy and Advocacy Committee, Crystal Gadege-
beuk, MD, stated: "ASN appreciates that the National Institutes of Health has recognized the value of individualized care and the benefits it could provide to patients. I am truly excited about the promise that the All of Us Research Program offers for both the broader medical community and minority patients. By placing an empha-
sis on both a diversity of disease modalities and patient demographics, the cohort will serve as an invaluable tool for medical researchers and increase the likelihood of de-
veloping new therapies."

While the All of Us Research Program will collect in-
formation from individuals with a variety of diseases, the American Society of Nephrology recognizes the value of the opportunity for patients with kidney diseases to par-
ticipate in this program and work closely with health care providers to collaborate with the All of Us Journey.

More information, including how to apply to host the All of Us Journey and where and when the tour will be traveling, can be found by visiting https://www.asn-
online.org/policy/webdocs/All_of_Us_Journey.pdf.