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European disparities in the incidence and outcomes of children with end-stage renal disease

Chesnaye, N.C.

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EUROPEAN DISPARITIES IN THE INCIDENCE AND OUTCOMES OF CHILDREN WITH END-STAGE RENAL DISEASE

1. Health expenditures must be seen as an investment, not a cost.
2. Propensity-score matching is a cure for all inherent limitations of observational research.
3. A utilitarian approach to donor organ allocation is more fair than an equity-based approach.
4. Poorer countries have low RRT incidence rates, therefore poorer patients are less likely to start RRT.
5. Paediatric renal care should be centralized to improve patient survival.
6. Health care funding allocated to paediatric RRT is more effective in terms of patient survival compared to funds allocated to adult RRT.
7. “Health ... is a fundamental human right and that the attainment of the highest possible level of health is a most important world-wide social goal whose realization requires the action of many other social and economic sectors in addition to the health sector” - the Declaration of Alma Ata.
8. “Of all of the forms of inequality, injustice in health is the most shocking and inhumane.” - Dr. Martin Luther King, Jr.
9. “Don’t split infinitives” – anonymous reviewer