

With more than 22,000 dialysis and pre-dialysis patients making up our membership, DPC is working to improve the quality of life for all dialysis patients through education and advocacy. We are a nationwide, non-profit, patient-led dialysis organization with membership open only to dialysis and pre-dialysis patients and their families. Our policies and our mission are guided solely by our membership.

Mission and Charter. DPC is a nonprofit patient organization dedicated to improving dialysis patients' quality of life by developing awareness of dialysis issues, advocating for dialysis patients, improving the partnership between patients and caregivers, and promoting favorable public policy.

We believe patients' quality of life is best improved by:

- Advancing self care
- Fostering and strengthening partnerships among patients and caregivers
- Achieving adequate dialysis-related funding
- Ensuring up-to-date, optimal clinical protocols

DPC's Vision. DPC's long-term goals are to be an organization:

- That plays an advisory role to Congress, Medicare (CMS) and dialysis providers.
- That works to achieve superior education for dialysis and pre-dialysis patients.

Patient Driven Organization. The intent of DPC is to reflect the voice of the patients. We rely on input from our membership to determine both our education and advocacy priorities. DPC members are invited to complete education and advocacy surveys indicating on which issues they think DPC should focus. DPC's priorities are based on this member input.

DPC wants to give a voice to dialysis patients. One of DPC's goals is to provide dialysis patients with the education, access and confidence to be their own advocates. Through Washington, DC patient fly-ins, conference calls, and briefings, DPC works to train effective advocates for dialysis related issues. DPC is here to rally patients and have their voices heard.

Some facts about kidney disease and dialysis:

- Twenty six million Americans have chronic kidney disease (CKD) and another 20 million are at risk.
- When kidney disease progresses, it may eventually lead to kidney failure, in which case patients require dialysis or a kidney transplant for survival. Typically, dialysis treatments are three times a week for approximately four hours at each session.
- More than 485,000 people have End Stage Renal Disease, requiring dialysis or a transplant; the number is estimated to double in the next decade.
- Minorities in the United States are two to four times more likely to develop End Stage Renal Disease.
- Chronic kidney disease may lead to complications like high blood pressure, anemia (low blood count), weak bones, poor nutritional health, nerve damage, and an increased risk of heart and blood vessel disease.
- Currently more than 75,000 patients are waitlisted for a kidney transplant; last year, only a little more than 17,000 received transplants.
- Administering quality dialysis costs Medicare approximately \$67,000 per patient, per year.
- Nearly half of people with an advanced form of kidney disease do not know they have weak or failing kidneys, according to recent research published in the American Journal of Kidney Diseases.