**South Carolina General Assembly**

125th Session, 2023-2024

**H. 3973**

**STATUS INFORMATION**

Concurrent Resolution

Sponsors: Rep. Alexander

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Introduced in the House on February 16, 2023

Introduced in the Senate on February 21, 2023

Adopted by the General Assembly on March 16, 2023

Summary: Chronic Kidney Disease Awareness Month

**HISTORY OF LEGISLATIVE ACTIONS**

 Date Body Action Description with journal page number

 2/16/2023 House Introduced, adopted, sent to Senate (House Journal‑page 11)

 2/21/2023 Senate Introduced (Senate Journal‑page 13)

 2/21/2023 Senate Referred to Committee on **Medical Affairs** (Senate Journal‑page 13)

 3/15/2023 Senate Recalled from Committee on **Medical Affairs** (Senate Journal‑page 6)

 3/16/2023 Senate Adopted, returned to House with concurrence (Senate Journal‑page 23)

View the latest  [legislative information](https://www.scstatehouse.gov/billsearch.php?billnumbers=3973&session=125&summary=B)  at the website

**VERSIONS OF THIS BILL**

[02/16/2023](https://www.scstatehouse.gov/sess125_2023-2024/prever/3973_20230216.docx)

[03/15/2023](https://www.scstatehouse.gov/sess125_2023-2024/prever/3973_20230315.docx)

Recalled

March 15, 2023

H. 3973

Introduced by Rep. Alexander

S. Printed 03/15/23--S.

Read the first time February 21, 2023

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A concurrent RESOLUTION

TO RECOGNIZE MARCH 2023 AS “CHRONIC KIDNEY DISEASE AWARENESS MONTH” IN SOUTH CAROLINA in order to raise awareness for the need for research, screening programs, and access to care for individuals who suffer from chronic kidney disease.

Whereas, March is recognized as National Kidney Month, which makes this month an important time for raising public awareness and understanding about chronic kidney and rare kidney diseases; and

Whereas, more than one in seven (fifteen percent of adults in the United States or thirty-seven million people) are estimated to have chronic kidney disease (CKD), and as many as nine in ten adults with CKD do not know they have CKD; and

Whereas, kidney disease disproportionately affects communities of color. African Americans are almost four times more likely, and Hispanics are 1.3 times more likely, to have kidney failure compared to White Americans; and

Whereas, ninety percent of patients with CKD stages 1-3 are undiagnosed, and less than three percent of Black patients believe that they are at high risk for CKD; and

Whereas, CKD, when diagnosed, is often diagnosed in late stages of the disease when irreversible damage to the kidneys has already occurred; and

Whereas, fifteen percent of people diagnosed with CKD are unaware of the cause of their disease; and

Whereas, recent scientific advancements have shown that some of the health disparities in CKD have a genetic basis; and

Whereas, this genetic risk factor for CKD was discovered in 2010 when scientists learned that people who inherit two variants of the Apolipoprotein L1 (APOL1) gene are at significantly increased risk of developing kidney disease; and

Whereas, while everyone has the APOL1 gene, only people with African ancestry inherit certain genetic variants; and

Whereas, thirteen percent of African Americans carry two APOL1 risk variants, and estimates suggest that up to one in five people with two APOL1 risk variants will develop kidney disease; and

Whereas, APOL1 mediated kidney disease causes high levels of protein in the urine, or proteinuria, and can lead to various symptoms, including swelling in the legs and/or feet, fatigue, and weight gain; and

Whereas, research has also shown that the course of kidney disease is more rapidly progressive in individuals with two APOL1 risk variants than in patients without them; and

Whereas, the disease may eventually lead to kidney failure, requiring dialysis or a kidney transplant; and

Whereas, there are simple tests to diagnose chronic kidney disease, including blood and urine tests, and a genetic test exists to identify presence of APOL1 risk variants; and

Whereas, it is imperative to improve diagnosis and treatment of CKD through community-based programs that address racial disparities in the awareness, diagnosis, and treatment of chronic kidney disease. Now, therefore,

Be it resolved by the House of Representatives, the Senate concurring:

That the members of the South Carolina General Assembly, by this resolution, recognize March 2023 as “Chronic Kidney Disease Awareness Month” in South Carolina in order to raise awareness for the need for research, screening programs, and access to care for individuals who suffer from chronic kidney disease.

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