

Hospital re-admission high for dialysis patients treated in long-term care hospitals

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A new study by University of Cincinnati (UC) nephrologists shows that most dialysis patients admitted to long-term care hospitals face readmission to acute care facilities, and those with acute kidney failure don't often recover full kidney function.

This study is being published in the advanced online edition of the *American Journal of Kidney Diseases*, the official journal of the National Kidney Foundation.

"Acute kidney failure occurs when the kidneys partly or completely lose their ability to filter water and remove waste from the blood," says Charuhas Thakar, MD, associate professor of medicine at UC and chief of the renal section at the Cincinnati Veterans Affairs Medical Center. "It occurs in about 5 percent of all hospitalized patients and is even more common in those receiving intensive care."

Thakar says it is known that <u>dialysis</u> patients who are discharged from acute care hospitals are more likely to have been critically ill and are good candidates for long-term care hospitalization during the recovery phase of their illness.

A long-term care hospital provides recuperative care after brief (acute care) hospitalizations for medically complex patients who are not stable enough to be discharged home or to be transferred to a nursing home.

Thakar led a two-year study of 206 hemodialysis patients at Drake



Center, a long-term care facility. Forty-five percent of the patients studied had experienced acute kidney failure.

Researchers found that within acute kidney failure cases, only 30 percent of patients recovered enough to come off of dialysis; 70 percent remained dialysis dependent and were deemed to have end-stage kidney failure.

In addition, the majority of these dialysis patients returned to the hospital, died or were placed in a nursing home following their stay at Drake Center.

"We frequently encounter questions from physicians and families of dialysis patients about the outcome of their loved ones during their stay at long-term care facilities," he continues. "This study gives us a clearer idea about what happens to these patients."

He says there has been a tremendous growth in long-term care hospitals within the last decade, contributing to the growing economic burden faced by the health care system.

"Currently, there are over 300 long-term care hospital facilities across the U.S.," he says. "However, there are virtually no detailed studies about the outcomes of dialysis patients in these facilities."

Thakar says doctors are unsure of the role dialysis plays in the recovery of acute kidney injury patients, but he notes that these findings provide a direct link between acute <u>kidney failure</u> and end-stage kidney disease.

"The majority of dialysis patients who come to Drake Center are very ill and often get readmitted to the hospital," he says. "We speculate that finding new avenues to improve dialysis care may help in lowering the morbidity in these patients. For example, if we reduce the rate of re-



hospitalization, it would prove to have a big impact on individual patient care as well as the health care system."

He adds that these findings will give physicians direction for the care of this subgroup of patients.

"This information will allow us to more accurately predict the outcomes for the dialysis patients who are admitted to long-term care facilities like Drake Center," he says, adding that limitations in the study include the fact that the study looks at only those dialysis patients who were discharged from hospitals to a long-term care facility. "But even by looking at this narrow spectrum of patients, we are still examining a huge part of our health care system today and are helping find ways to improve care."

Source: University of Cincinnati Academic Health Center

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