

Cost of expensive medication in dialysis catheters may be offset by reduced complications

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Using an expensive agent to prevent blood clots in kidney failure patients' dialysis catheters may turn out to be less costly overall due to its ability to reduce medical complications, according to a study appearing in an upcoming issue of the *Journal of the American Society of Nephrology (JASN)*.

Recombinant [tissue plasminogen activator](#) (rt-PA) is a medication used to break up blood clots that occur in the vessels of patients having a heart attack. A recent clinical trial revealed that using rt-PA once per week plus the anticlotting agent heparin twice per week was better than using heparin alone 3 times per week for preventing [blood clots](#) and infections in dialysis catheters. Its significant expense has limited its use in many dialysis programs, however.

Braden Manns, MD, MSc (University of Calgary, in Alberta, Canada) and his colleagues collected detailed costs within this trial to determine how the use of rt-PA affected overall [health care costs](#) over time. The researchers found that the increased cost of rt-PA was partially offset by lower costs for managing complications. Overall, the difference in unadjusted average cost for managing patients with rt-PA/heparin versus heparin alone was \$323 Canadian dollars. When the costs were extrapolated over a 1-year time horizon, assuming ongoing rt-PA effectiveness, the overall costs of the strategies in the trial were similar.

"Our study suggests that for patients at high risk of dialysis line blockage, a higher expense rt-PA may provide reasonable value for the money," said Dr. Manns.

More information: The article, entitled "An Economic Evaluation of rt-PA Locking Solution in Dialysis Catheters," will appear online at jasn.asnjournals.org/ on July 10, 2014.

Provided by American Society of Nephrology

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