

Two day break in treatment for dialysis patients could be fatal, study finds

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Patients who have kidney dialysis three times a week are more likely to be admitted to hospital or die after a two day break, according to a study by a leading kidney researcher at the University of Sheffield.

Dr James Fortheringham from the Sheffield Kidney Institute has found there is a 69 per cent increase in hospital admissions and a 22 per cent increase in deaths after a two day break in three times a week haemodialysis.

To help reduce [hospital admissions](#) and boost the survival prospects of [kidney dialysis](#) patients, Dr Fotheringham has now been awarded a five year fellowship by the National Institute of Health Research (NIHR) Clinician Scientist Award panel – one of only six researchers to be awarded the fellowship this year.

Building on this study, James will now continue his work to understand and reduce the harm being caused by the two day break.

"I'm trying to identify who it is that is getting admitted to hospital and dying after this two day break and why. Harnessing existing data including the valuable UK Renal Registry I will examine if wider use of some of the care techniques we already use here in the UK can combat the two day break problem," Dr Fotheringham said.

"Doing more dialysis might tackle the two day break problem, but some of what we have learned from existing clinical trials and observational

studies don't always agree. If more dialysis is needed, I want to know who to give this dialysis to and if they will accept it. My research fellowship is designed to answer these and other questions."

The initial study, funded by Kidney Research UK, was conducted at the University of Sheffield's School of Health and Related Research (ScHARR) – one of the largest and most dynamic schools of health research in the UK.

Its findings, together with the NIHR Clinician Scientist award, will help Dr Fotheringham and the continuing collaboration between the University of Sheffield and Sheffield Teaching Hospitals NHS Foundation Trust to improve treatment for patients with chronic [kidney](#) disease.

"In addition to identifying and beginning to understand the two day break problem in haemodialysis, I'm very fortunate that my research has yielded some other important results: The UK Renal Registry is developing a new way of reporting survival following dialysis or kidney transplants based on my work.

"Some of my analyses also helped secure funding for a study to find the optimal setup for kidney units to insert a peritoneal [dialysis](#) catheter – a treatment given to patients with severe [chronic kidney disease](#)," James added.

More information: James Fotheringham et al. The mortality and hospitalization rates associated with the long interdialytic gap in thrice-weekly hemodialysis patients, *Kidney International* (2015). [DOI: 10.1038/ki.2015.141](#)

Provided by University of Sheffield

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