

Study reveals more liberal use of dialysis in the US compared with other developed nations

September 23 2016

A new study indicates that a much higher proportion of patients with advanced chronic kidney disease (CKD)—even those ≥ 85 years of age—receive renal replacement therapy (RRT) such as maintenance dialysis or kidney transplantation in the United States than in other developed countries. The findings, which appear in an upcoming issue of the *Clinical Journal of the American Society of Nephrology (CJASN)*, suggest that decisions about RRT in the United States may not be strongly guided by the individual considerations of patients, and instead reflect wider practices favoring interventions to lengthen life.

The US Medicare Program spends more than \$30 billion annually to provide RRT to [patients](#) of any age who have advanced CKD. It's unknown, however, how often US patients with advanced CKD do not receive RRT. In other developed countries, receipt of RRT is highly age-dependent and is the exception rather than the rule at older ages.

Susan Wong, MD (University of Washington) and her colleagues conducted a retrospective study to determine how often patients with advanced CKD do not receive RRT, the characteristics of these patients, and the clinical context in which decisions about RRT occur.

The team identified a national cohort of 28,568 patients with very advanced CKD who were receiving care within the Department of Veteran Affairs (VA) between 2000 and 2009. Using a combination of

linked administrative data from the VA, Medicare, and the United States Renal Data System (the US national registry of RRT), the investigators identified patients who received RRT through October 1, 2010. For the remaining cohort members, the researchers performed an in-depth review of the VA-wide [electronic medical record](#) for a random 25% sample to understand the clinical course and treatment status of their CKD.

Based on administrative data, the researchers found that 67.1% of cohort members received RRT. Based on the results of chart review, the team estimates that an additional 7.5% of cohort members had in fact received at least one dialysis treatment not captured in administrative data, 10.9% were discussing and/or preparing for dialysis but had not yet started dialysis at the end of follow-up, and a decision had been made not to pursue dialysis in 14.5% of patients.

Thus, at most recent follow-up, the overwhelming majority (85.5%) of patients had either received, or were preparing to receive, RRT. Even among members of the oldest age group (≥ 85 years) with the highest burden of comorbidity, most (51.2%) received or were preparing to receive RRT at the last follow-up point.

"Our findings signal more liberal use of dialysis in our study cohort as compared with other developed countries, with differences being especially striking for older age groups," said Dr. Wong. In Canada, investigators estimated that 51.4% of patients with kidney failure, and only 6.8% of those ≥ 85 years, are treated with RRT. In New Zealand and Australia, an estimated 51.2% of patients, and

Citation: Study reveals more liberal use of dialysis in the US compared with other developed nations (2016, September 23) retrieved 5 May 2024 from <https://medicalxpress.com/news/2016-09-reveals-liberal-dialysis-nations.html>

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