

# Frequent and longer patient-doctor contact key to dialysis patients' health

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Both the frequency and duration of patient-doctor contact during dialysis care vary appreciably across countries, and facilities with more frequent and longer contact had fewer patient deaths and hospitalizations, according to a study appearing in an upcoming issue of the *Journal of the American Society of Nephrology* (JASN). The findings indicate that the physician's role in the multidisciplinary team of healthcare professionals in dialysis facilities is important for improving the health of dialysis patients.

While it is generally believed that regular patient-doctor contact contributes to better long-term health for patients on dialysis, the actual frequency and duration of patient-doctor contact have not been reported in many countries. Also, there is little direct evidence that more frequent and longer patient-doctor contact contributes to better health for [dialysis patients](#).

To get a better understanding of the impact of patient-doctor contact for kidney failure patients, Takehiko Kawaguchi, MD, MPH, PhD (National Hospital Organization Chiba-East Hospital, in Japan) and his colleagues analyzed the associations between a facility's typical frequency and duration of patient-doctor contact with clinical outcomes in 24,498 chronic hemodialysis patients. The study involved information from 1996 to 2008 from 778 dialysis facilities in the international Dialysis Outcomes and Practice Patterns Study.

Among the major findings:

- The frequency of patient-doctor contact was high (more than once per week) for 55% of facilities, intermediate (once per week) for 24% of facilities, and low (less than once per week) for 21% of facilities.
- In Belgium, France, Germany, Spain, and Japan, more than 75% of dialysis facilities had a high frequency of patient-doctor

contact. In Australia/New Zealand, Sweden, the United Kingdom, and the United States, less than 30% of facilities had a high frequency of contact.

- In the United States, the percent of facilities with high frequency patient-doctor contact declined from 23% in 1996-2001 to 5% in 2005-2008. Use of non-physician practitioners (such as physician assistants and nurse practitioners) may account for some of this decline.
- Compared with patients in facilities having frequent patient-doctor contact, those with intermediate contact had a 6% higher risk of dying during the study, and those with infrequent contact had an 11% higher risk of dying during the study.
- Each 5 minutes shorter duration of contact was linked with a 5% higher risk of dying.
- There were also inverse associations between both the frequency and duration of contact with patients being hospitalized.

"Through this research, we found that more frequent and longer patient-doctor contact in the hemodialysis care setting was inversely associated with mortality and hospitalization. The results suggest that policies supporting more frequent and longer duration of patient-doctor contact may improve patient outcomes in hemodialysis," said Dr. Kawaguchi.

**More information:** *Journal of the American Society of Nephrology* [doi: 10.1681/2012080831](https://doi.org/10.1681/2012080831)

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