

# SHORT DAILY HEMODIALYSIS: OUTCOMES OF THE FIRST 100 PATIENTS

## A Single Center Brazilian Experience

Simon AHR; Bello VAO; Xavier KR; Lauer JP; Pascoal IJF

Centro Brasileiro de Nefrologia - Brasília, DF

### INTRODUCTION AND OBJECTIVES

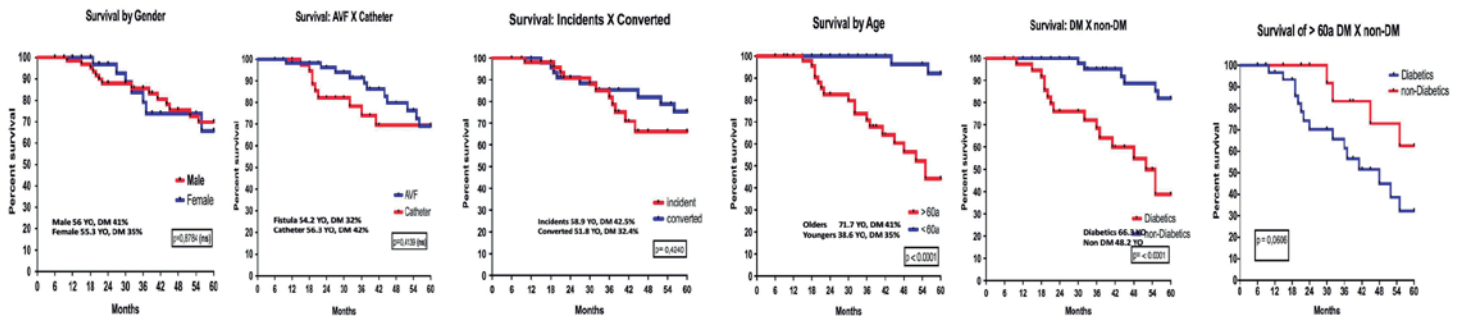
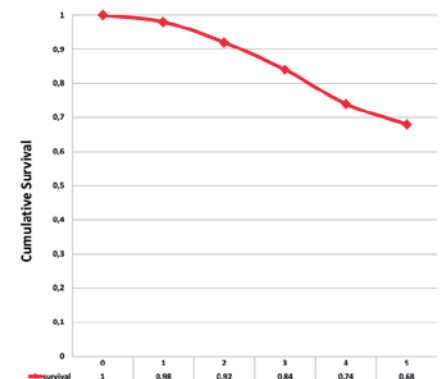
Results from the NIH-Frequent Hemodialysis Network Study, reporting data from 125 patients under In-center Short Daily Hemodialysis (SDHD, 6x/wk), confirmed the clinical superiority and better quality of life afforded by SDHD when compared to Conventional Hemodialysis (CHD, 3x/wk).

In previous reports we evaluated the biochemical impact and the clinical and psychosocial benefits of our SDHD Program. We now present the cumulative survival curve, the hospitalization rate and the rehabilitation profile of the first 100 patients consecutively admitted to this Program.

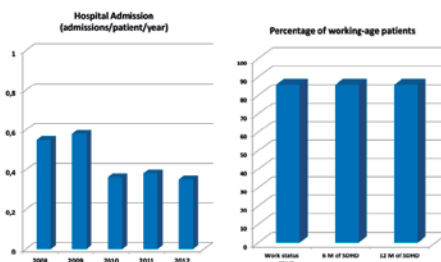
### METHODS

- We followed 100 unselected consecutive patients, mean age  $55 \pm 20.1$  Y.O. (from 8 to 90 Y.O.), undergoing daily HD sessions (6 or 7/week), lasting 120 min (90-180 min), utilizing single-use high-flux dialyzers and ultrapure water and dialysate.
- Forty-two patients were converted from Conventional Hemodialysis (CHD) to Short Daily Hemodialysis (SDHD), while 58 have started dialysis under SDHD (incidents). Thirty-nine were diabetics, 38 have been using Long Term Catheter and 36 were women.
- Patients had flexibility of schedule and 82% were transported by the Clinic, encouraging attendance (no show 2.4% in 2012).
- Survival curves were generated using the Kaplan-Meier method and statistical comparison among subgroup curves were made by Mantel-Cox test using PRISM GRAPHPAD 6 software.

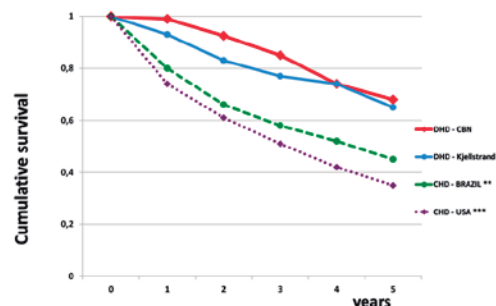
### 5-YEAR SURVIVAL CURVE



### LOW HOSPITALIZATION / HIGH EMPLOYMENT RATES



### SURVIVAL COMPARISON



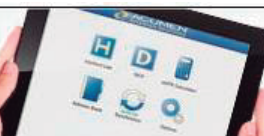
\* Kjelstrand, CM et al - NDT (2008) 23:3283

\*\* Cherchiglia ML et al - Rev Saúde Pública 2010; 44(4):639-49

\*\*\* USRDS 2012

### CONCLUSION

With high survival rate, low hospitalization rate and high employment rate (QOL index), the CBN Exclusive-SDHD Program represents a paradigm shift in the our dialysis patient care and became an irreversible practice in our Unit.



### Clinical

## The impact of short daily HD on outcomes

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*The following abstract was presented at the Annual Dialysis Conference, held March 5-8 in Seattle. It was also published in Hemodialysis International.*

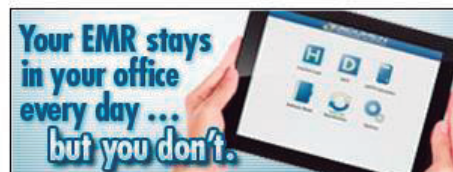
In previous reports, this group of nephrologists from Centro Brasiliense de Nefrologia, Brazil, evaluated the biochemical impact and the clinical and psychosocial benefits of its daily HD program. This abstract, entitled "Short daily hemodialysis: Outcomes of the first 100 patients – A single center Brazilian experience," and prepared by Adolfo Simon, Vilber Bello, Kelia Xavier, Lauar Juliane, and Istenio Pascoal, includes more extensive data on survival, hospitalization, and rehabilitation efforts. The group treated 100 patients with ages ranging from 8 to 90 years undergoing daily hemodialysis six or seven days a week, using ultrapure dialysate and single-use high flux dialyzer. Thirty-two patients were converted from conventional hemodialysis to daily hemodialysis, while 68 started dialysis under daily hemodialysis

### Results

The cumulative patient survival rates were 98%, 92%, 84%, 71% and 64% at 12, 24, 36, 48 and 60 months, respectively. At 60 months, survival rates were 79% and 39% in non-diabetic and diabetic patients and 55% in those who started dialysis before or after 60 years of age, 66% and 57% in patients with fistula and catheter and 68% and 63% in converted and incident patients. Before starting dialysis, 67% of working-age patients were employed and after 12 months of daily hemodialysis their work activities have been fully preserved. The average hospital length of stay was 2.97 days/patient-year.

Twenty-three patients were submitted to kidney transplantation and 21 remain with a functioning renal graft.

"After five years of follow up we observed high survival rates, low hospitalization time and preserved employment status," the authors wrote. "This daily hemodialysis program represents a paradigm shift and became a standard of practice in our center."



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