

WHICH FACTORS HAVE INFLUENCE ON THE MORBIDITY, INITIATION OF DIALYSIS AND MORTALITY OF PATIENTS WITH CKD STAGE 4 AND 5 NOT ON DIALYSIS?

FINAL RESULTS FROM THE "PECERA STUDY"

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INTRODUCTION

There is little information available in the literature about the course of patients with Chronic Kidney Disease (CKD) Stage 4 and 5 not on dialysis, particularly regarding morbidity and mortality.

OBJECTIVE

The aim of this study was to analyse hospitalization, risk factors for initiation of dialysis and mortality of the patients with CKD stage 4-5 not on dialysis

PATIENTS & METHODS

PECERA (Proyecto de Estudio Colaborativo en pacientes con Enfermedad Renal crónica Avanzada, Estadios K/DOQI 4 -5 no en diálisis) is a prospective, multicentre, observational study of patients with CKD stage 4-5 not on dialysis, who were followed-up for 3 years in the outpatient clinic.

From May 2007 to March 2009 we included 1,022 consecutive patients seen in the outpatient clinics of 11 Nephrology centres from the Valencia Region. After exclusion of non-suitable patients the study consisted of **995 patients** (806 CKD stage 4 – 81%, and 189 stage 5 not on dialysis -19%).

INCLUSION CRITERIA:

- Age > 18 year.
- CKD stage 4-5 not on dialysis (eGFR < 30 ml/min/1.73 m²) by MDRD equation.
- Life expectancy >1 year
- Patients must be able to give consent.
- A systematic, consecutive sampling of patients was conducted during inclusion period until the desired number was reached.

EXCLUSION CRITERIA :

- Acute renal failure.
- Wasting disease, malignancy, incapacitating disease, or active infection/inflammation.
- Inability to give oral or witnessed informed consent

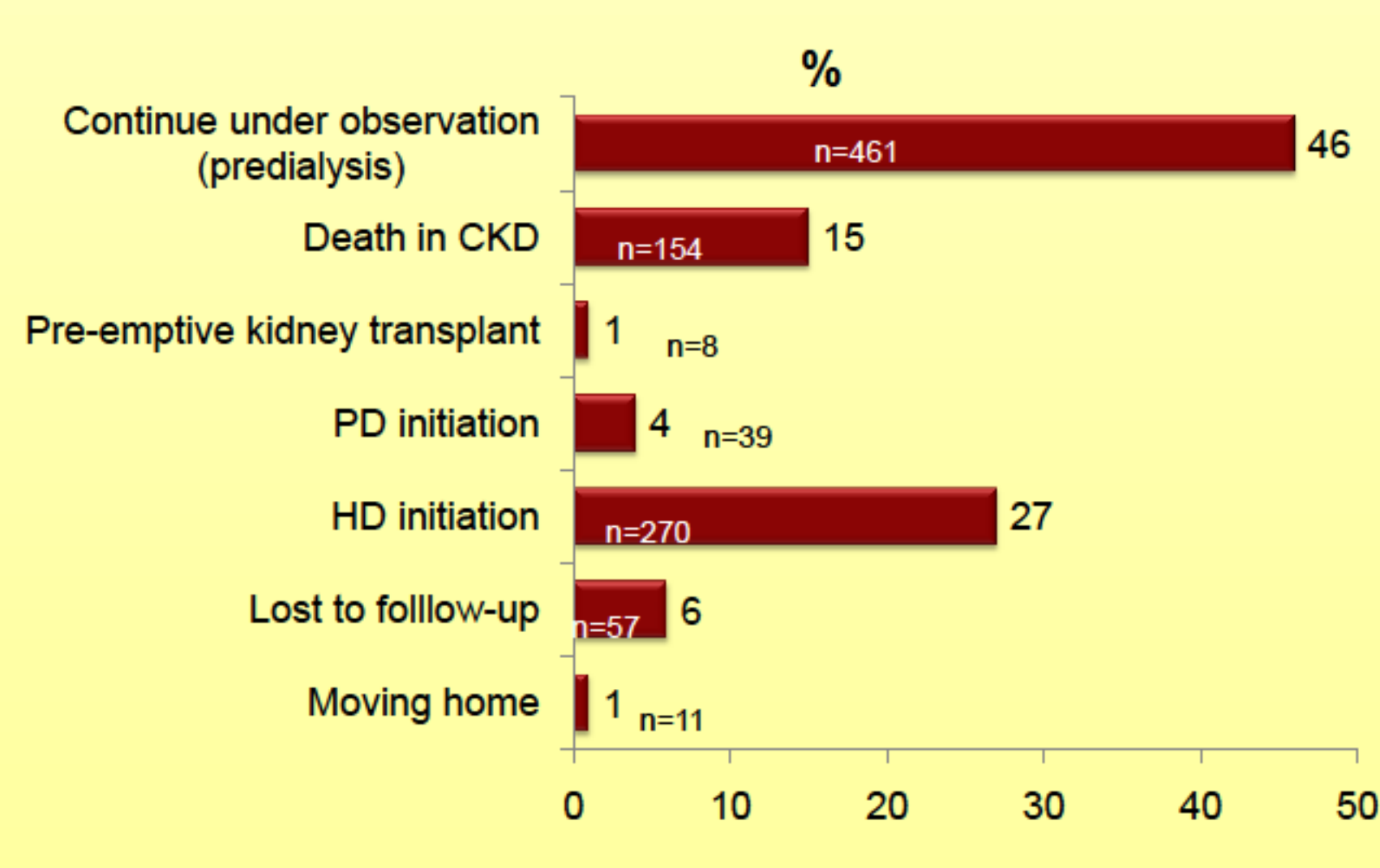
In order to avoid lead-time bias, the analysis of risk factors for initiation of dialysis was calculated based on an initial eGFR of 30 ml/min/1.73. The multivariate analysis was conducted by means of Cox proportional hazards model.

CHARACTERISTICS OF THE PATIENTS AT BASELINE

N= 995 PATIENTS	n (%), x ± SD
Age, years (± SD)	69 ± 13 (r: 19-95)
Gender (Male/ female)	60.2 % / 39.8 %
BMI, kg/m ²	28.2 ± 5.1 (16-52)
Diabetes	359 (35.4 %)
Stage (MDRD):	
- 4 K/DOQI (15-29 ml/min/1.73 m ²)	189 (19 %)
- 5 K/DOQI (< 15 not on dialysis)	806 (81 %)
Etiology	
- Glomerular	6.3 %
- Interstitial	17.0 %
- Vascular	58.5 %
- Polycystic renal disease	4.4 %
- Diabetic nephropathy	13.0 %
- Unknown	11.7 %
- Other	12.5 %
Congestive heart failure	20.1 %
Coronary heart disease	21.8 %
Cerebrovascular disease	13.3 %
Peripheral vascular disease	17.3 %
Current smoking	10.9 %
Former smoking	33.8 %
Serum creatinine, mg/dl	3.1 ± 1.1
eGFR (MDRD, ml/min/1.73 m ²)	20 ± 5
Proteinuria (gr/day)	1.4 ± 2.6
Systolic blood pressure, mmHg	132 ± 17
Diastolic blood pressure, mmHg	72 ± 9
Pulse pressure	59 ± 15
Waist circumference, cm	100 ± 15

RESULTS

Causes of completion of the study at 5-year follow-up n= 542 (48 %)

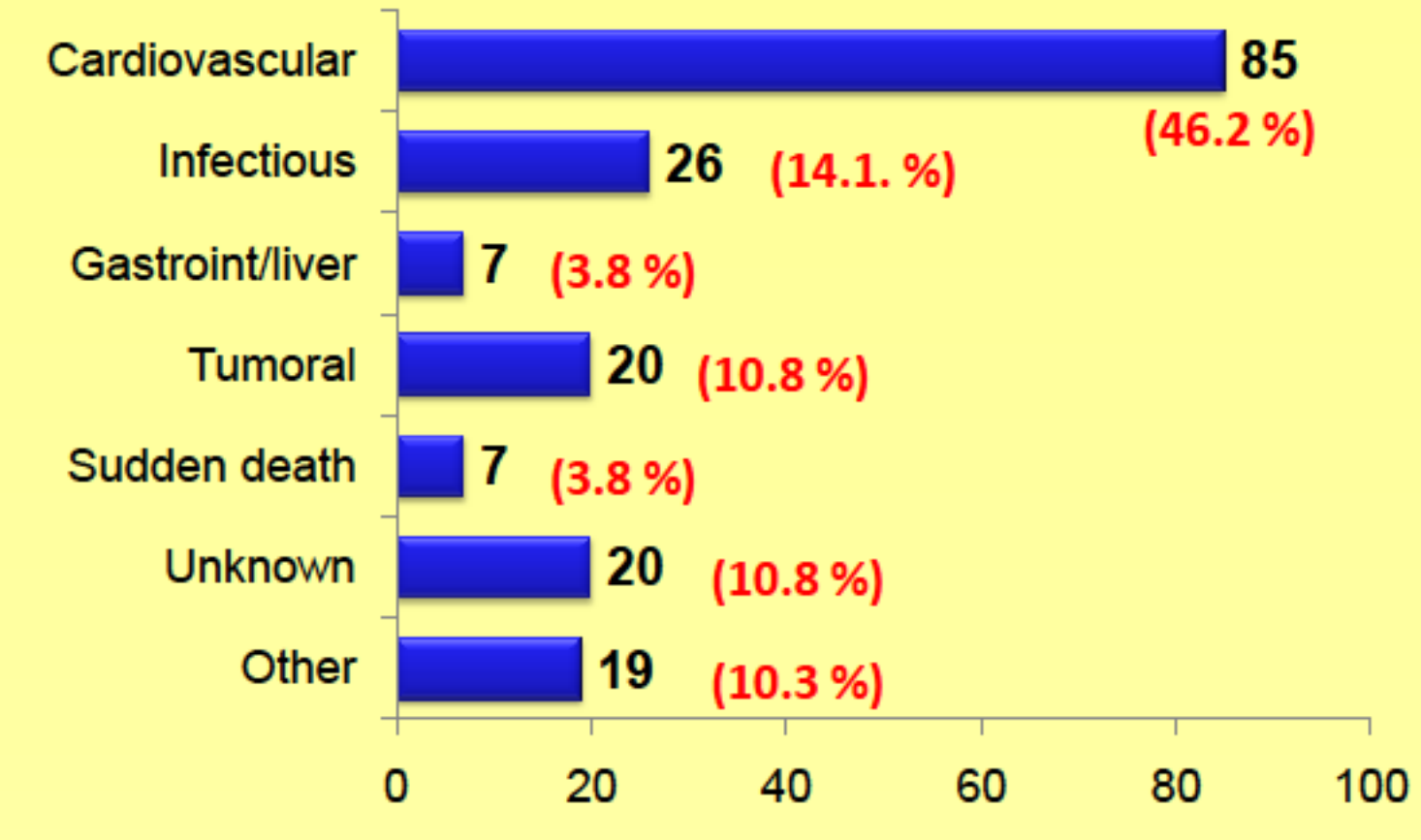


Hospitalization causes

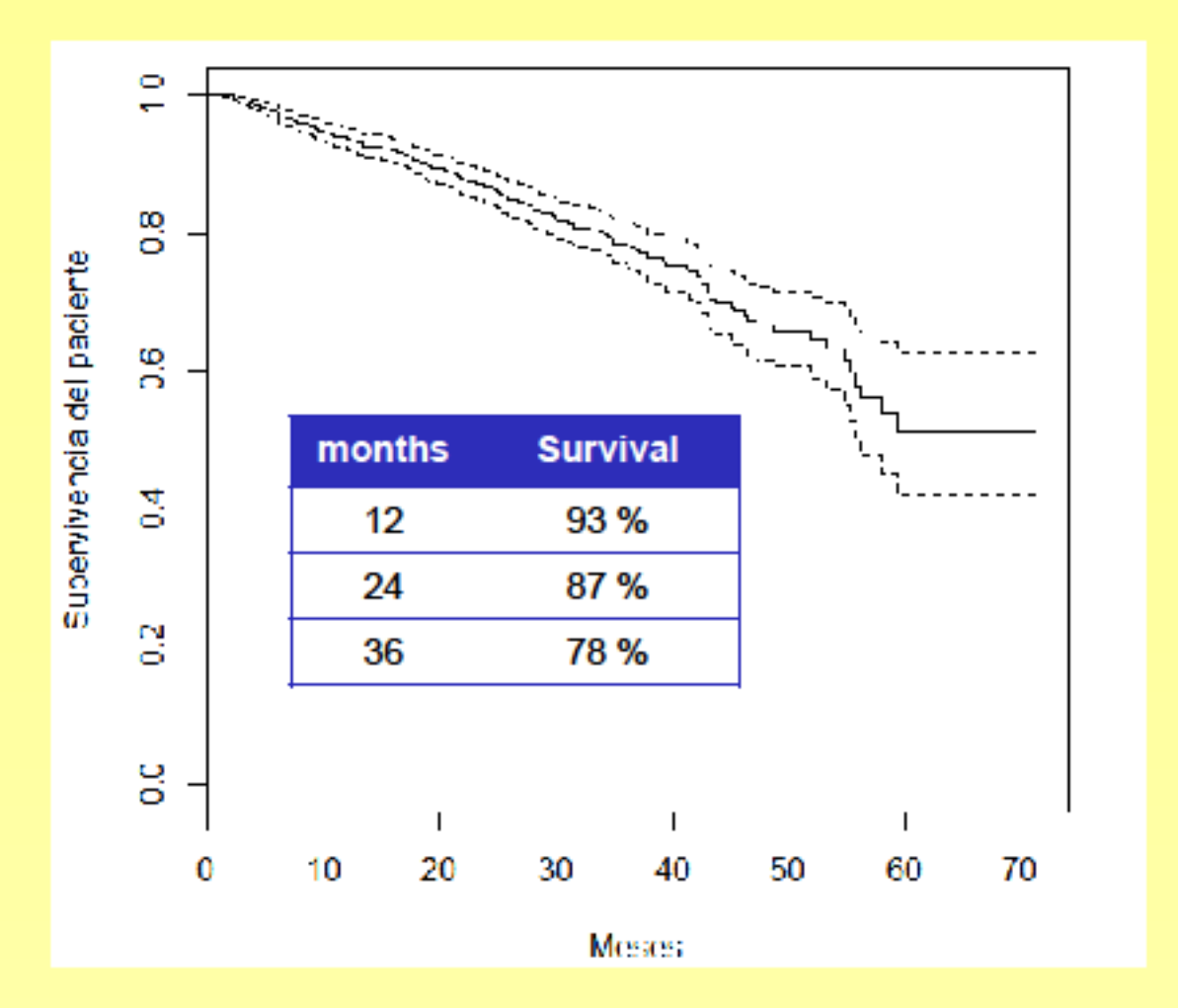
	%	N=457*
Cardiovascular (163)	32.5 %	90
Congestive heart failure	17.9	90
Angina	2.6	13
Acute myocardial infarction	1.6	8
Other cardiovascular	4.0	20
Coronary revascularization	1.8	9
Transient ischaemic attack	1.4 %	7
Cerebrovascular disease (stroke)	1.6 %	8
Peripheral vasc disease (amputation included)	1.6 %	8
Infectious	16.3 %	82
Neoplasias	5.2 %	26
Surgery	7.8 %	39
Gastrointestinal / hepatic	13.4 %	67
Vascular access	4.4 %	22
Other	20.5 %	103

*457 hospitalizations in 305 patients (30.7 %), 1 hospitalization in 198 patients, 2 in 57, 3 in 30 and ≥4 in 20 patients

Causes of death



Mortality during the series



Risk factors for initiating renal replacement therapy

Cox regression model adjusted by age (Considering baseline when eGFR was 30 ml/min/1.73m²)

Factor	HR	95% CI	P
Age	0.96	0.95 – 0.98	0.001
Proteinuria	1.09	1.01 – 1.16	0.012
Serum phosphate	1.28	1.01 – 1.16	0.034
Unknown etiology	2.86	1.29 – 6.32	0.009

Risk for mortality (multivariate analysis)

Cox model, adusted by Age and eGFR)

Factor	OR	CI 95%	P
Age	1.03	1.01 – 1.06	0.006
Diabetes mellitus	1.58	1.06 – 2.35	0.0001

Risk factors for hospitalization

(Cox regression model adjusted by age)

Factor	HR	95% CI	P
Diabetes Mellitus	1.60	1.20 – 2.12	0.01
Previous congestive heart failure	2.12	1.53 – 2.95	0.001
Haemoglobin	0.86	0.77 – 0.95	0.009

Risk for cardiovascular mortality

(Cox regression model adjusted by age)

Factor	OR	95% CI	P
Age	1.06	1.02 – 1.09	<0.001
Diabetes mellitus	1.77	1.09 – 3.20	0.045

CONCLUSIONS

In our series the principal factors influencing mortality in CKD 4-5 patients not on dialysis were non-modifiable factors (age and diabetes). In the case of hospitalization, non-modifiable factors were also the principal influence (diabetes and previous congestive heart failure). Nevertheless, the initiation of dialysis was correlated with modifiable factors (proteinuria and serum phosphate).

Study sponsored by:

