

THE IMPORTANCE OF AGE IN DIALYSIS

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INTRODUCTION

The incidence and the prevalence of elderly people (aged >60 years) receiving hemodialysis (HD) is increasing in the Western-World. Elderly people represent a heterogeneous group of patients, burdened by several comorbidities.

AIM

The aim of our retrospective study is to evaluate the presence of elderly people and their mortality rate during the last 13 years in our Dialysis Centre.

PATIENTS AND METHODS

ENROLLMENT:

- Incident HD patients at "Maggiore della Carità" Hospital, Novara
- 01.01.2000 to 12.31.2012
- Grouped in "young Old" (yO: 60-70 yrs), "common Old" (cO:70-79 yrs) "very Old" (vO: >80 yrs).

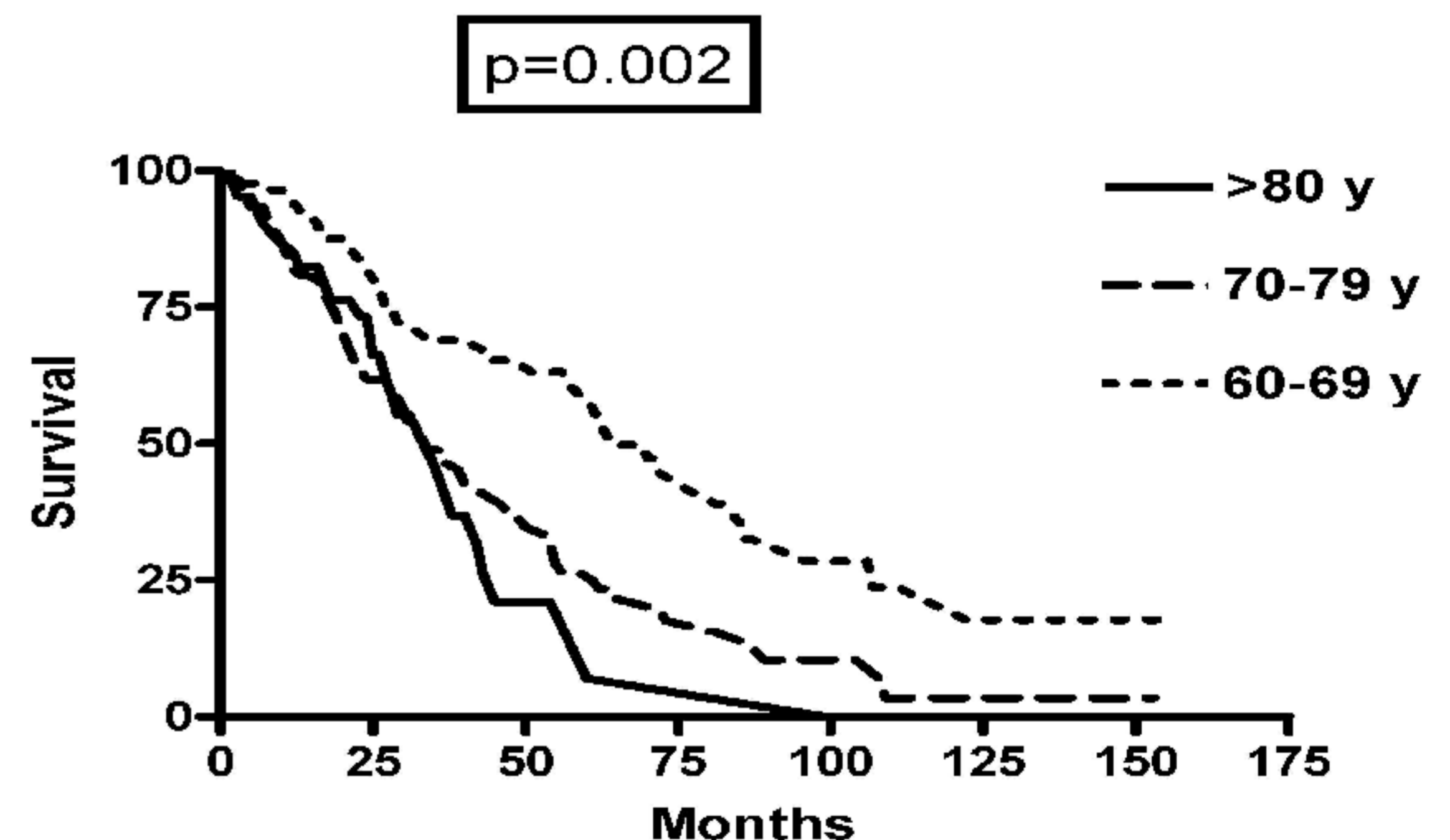
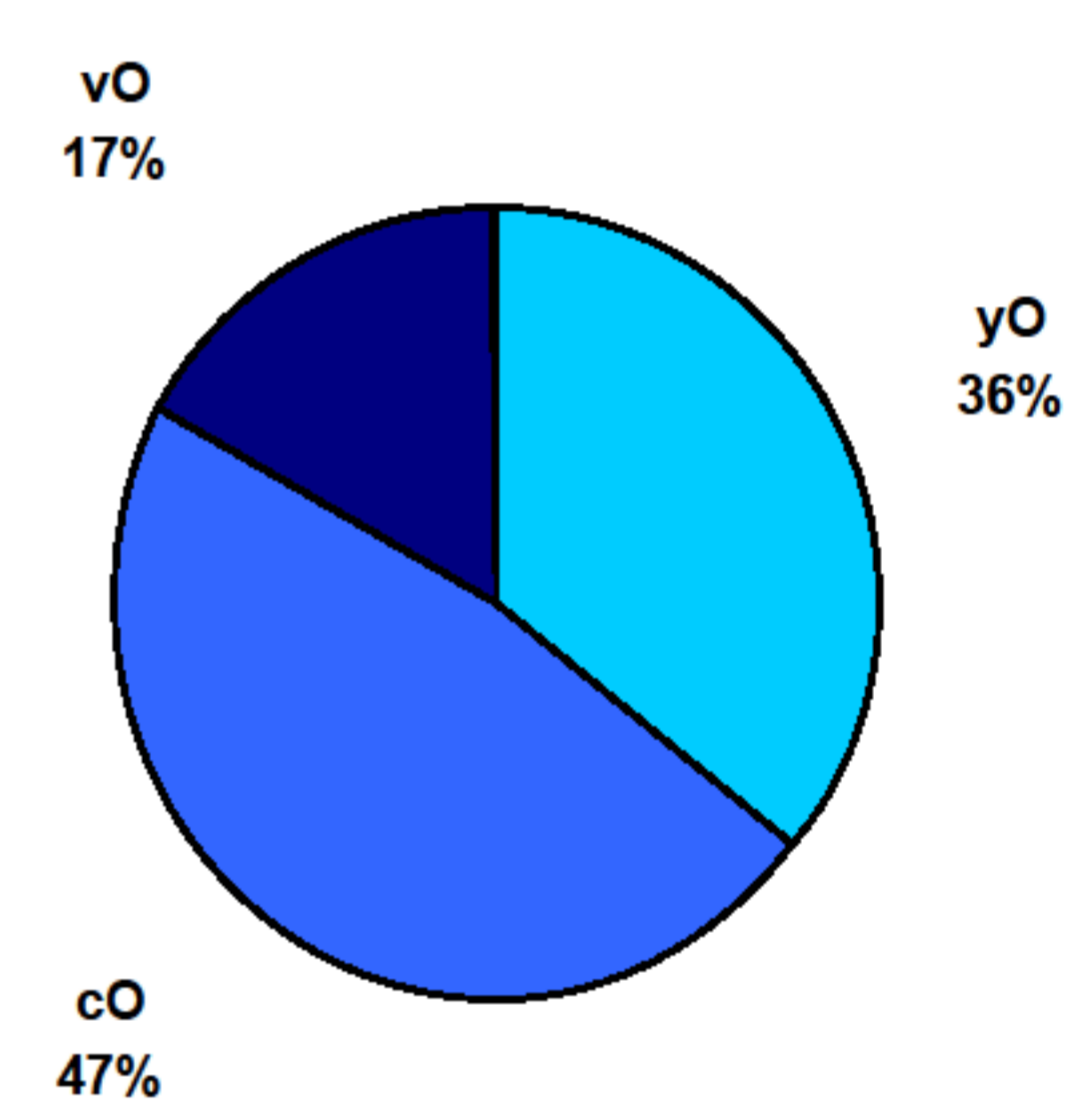
The groups are compared according to:

- vascular accesses
- comorbidities
- therapies
- survival

RESULTS

PATIENTS	Young Old 60-69 years	Common Old 70-79 years	Very Old >80 years	p
Number (%)	91 (35.7%)	121 (47.5%)	43 (16.9%)	NS
Months of HD (SD)	43.4±35.6	32.9±26.4	25.7±18.9	0.009
Early referral N(%)	72 (79.1%)	99 (81.8%)	34 (79.1%)	NS
AVF preHD N(%)	63 (69.2%)	89 (73.5%)	29 (67.4%)	NS
AVF as first access N(%)	59 (64.8%)	86 (71.1%)	26 (60.4%)	NS
AVF as last access N(%)	84 (92.3%)	86 (71.1%)	30 (69.8%)	0.003
N. AVF/pts	1.4±0.6	1.3±0.6	1.2±0.7	NS
N. catheter/pts	0.9±0.9	1.3±1.4	1.1±1.2	NS
Cause of renal disease				
Hypertension	24 (26.4%)	44 (36.4%)	22 (51.2%)	0.011
Diabetes	28 (30.7%)	38 (31.4%)	10 (23.2%)	
Glomerulopathies	7 (7.7%)	10 (8.3%)	5 (11.6%)	
Urological disease	3 (3.3%)	12 (9.9%)	1 (2.3%)	
Other/unknown	29 (31.9%)	17 (13.9%)	5 (11.5%)	
Hypotensive drugs N(%)	53 (58.2%)	66 (54.5%)	23 (53.5%)	NS
Diabetes N(%)	34 (37.4%)	49 (40.5%)	17 (39.2%)	NS
Cardiac disease N(%)	32 (35.2%)	46 (38%)	22 (51.2%)	NS
Arrhythmias N(%)	16 (17.6%)	31(25.6%)	18 (41.9%)	0.01
Foot ulcerations N(%)	24 (26.4%)	34 (28.1%)	11 (25.6%)	NS
Neoplasia N(%)	17 (18.7%)	29 (23.9%)	15 (34.8%)	NS
Previous kidney graft N(%)	1 (1%)	3 (2.5%)	0	NS
Vitamin K Antagonist N(%)	14 (15.4%)	24 (19.8%)	4 (9.3%)	NS
ACEI/ARB N(%)	24 (26.4%)	11 (9.1%)	4 (9.3%)	0.002
0-CVC N(%)	44 (48.3%)	51 (42.1%)	17 (39.5%)	NS
1-CVC N(%)	24 (26.3%)	39 (32.2%)	12 (27.9%)	NS
0-AVF N(%)	1 (1%)	9 (7.4%)	5 (11.6%)	0.03
1-AVF N(%)	58 (63.7%)	77 (63.6%)	27 (62.8%)	NS
1 HD con FAV	57 (62.6%)	86 (71.1%)	26 (60.4%)	NS

Elderly Dialysis Patients



CONCLUSIONS

Our study demonstrates that, when old pts are referred early to the nephrologists:

- the vascular access presents a good outcome, since the native AVF is the main access and the catheter's use is restricted to 10% in yO and 30% in vO;
- the prevalence of the comorbidities is high but similar with aging;
- the survival rate in vO is similar to cO and it is becoming similar to non HD old people.

