

ANALYSIS OF THE CAUSES OF DROPPING OUT FROM A MAINTENANCE DIALYSIS PROGRAM

Observations from a national dialysis cohort in India

By Vivekanand Jha^{1,2}, Rajasekara Chakravarthi¹, Kamal D. Shah¹,

¹NephroPlus Dialysis Network, Dialysis, Hyderabad, INDIA, ²The George Institute for Global Health, India, New Delhi, INDIA.

BACKGROUND:

- Patients drop out from a dialysis program for a variety of reasons.
- In India, HD treatment entails large out-of-pocket expenses.
- Financial reasons force many patients to drop out of dialysis programs.
- The distribution of HD units is not uniform, limiting access in some geographic areas.
- Lack of a robust deceased donor program limits the number of transplants.
- The outcomes of patients starting maintenance HD in India is not known.

AIM:

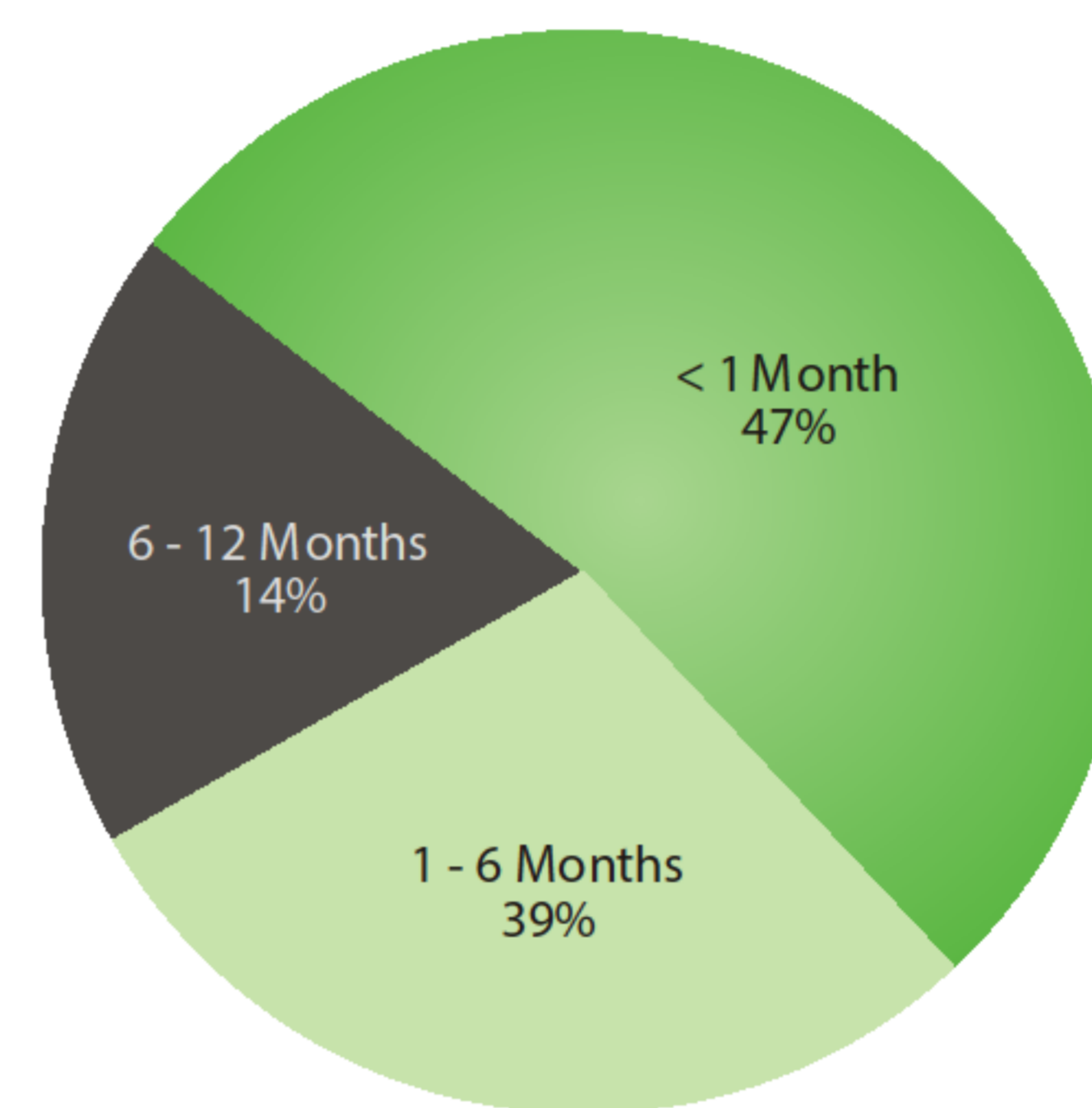
To ascertain the number and causes of drop out amongst ESRD patients who start HD

METHODOLOGY:

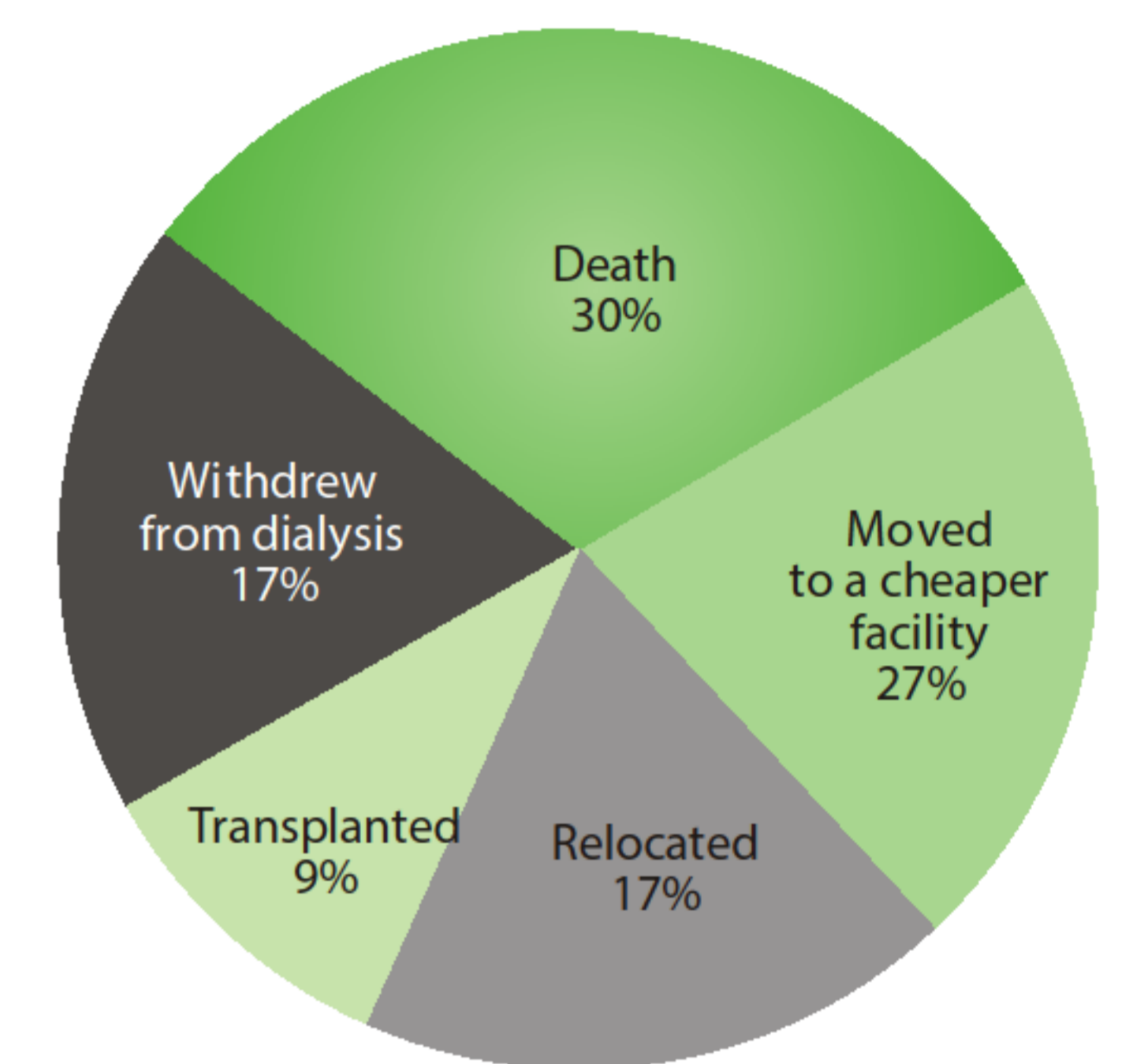
3,508 patients from 31 HD units of a Large, National Dialysis Provider distributed across 25 locations across India (NephroPlus Dialysis Cohort) were monitored and the cause for dropping out noted and analysed

	Drop outs	Continuing on HD	Total
No. (%)	1,225 (35%)	2,283 (65%)	3,508 (100%)
Patient-months	4,038	10,979	15,017
Age (Mean ± SD) in years	52.7 ± 14.4	52.3 ± 14.2	52.5 ± 13.9
Sex ratio (M:F)	70:30	68:32	69:31
CAUSE OF KIDNEY DISEASE			
Diabetic Nephropathy	2%	20%	15%
Hypertensive nephrosclerosis	3%	27%	20%
ADPKD	1%	1%	1%
Others	2%	8%	8%
Unknown	92%	42%	56%

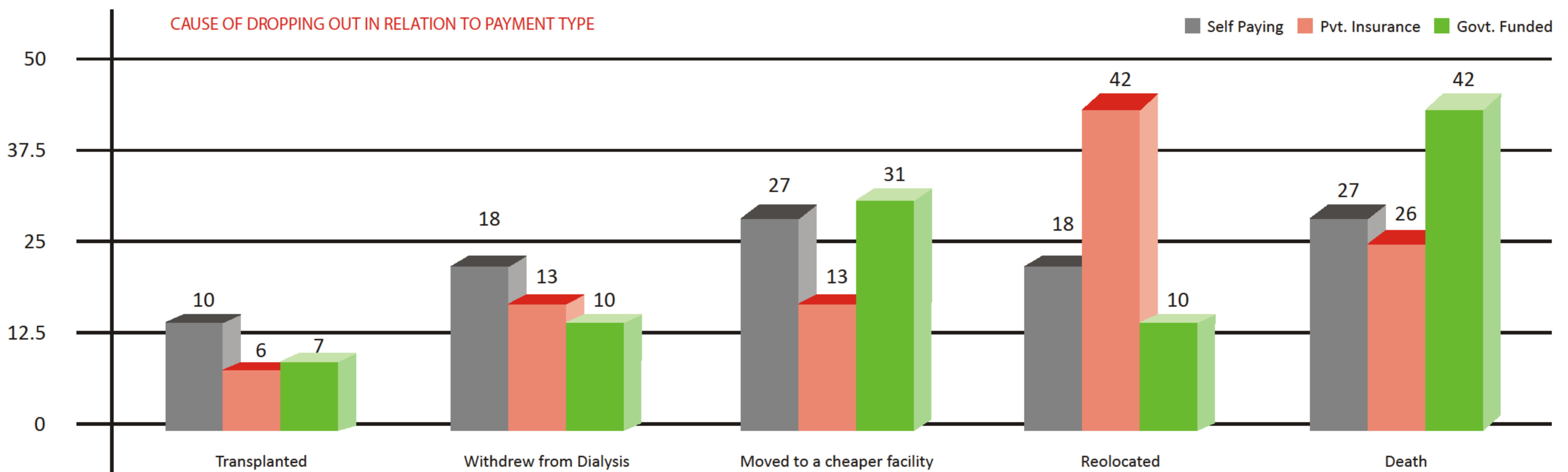
TIME TO DROP OUT



CAUSE OF DROPPING OUT

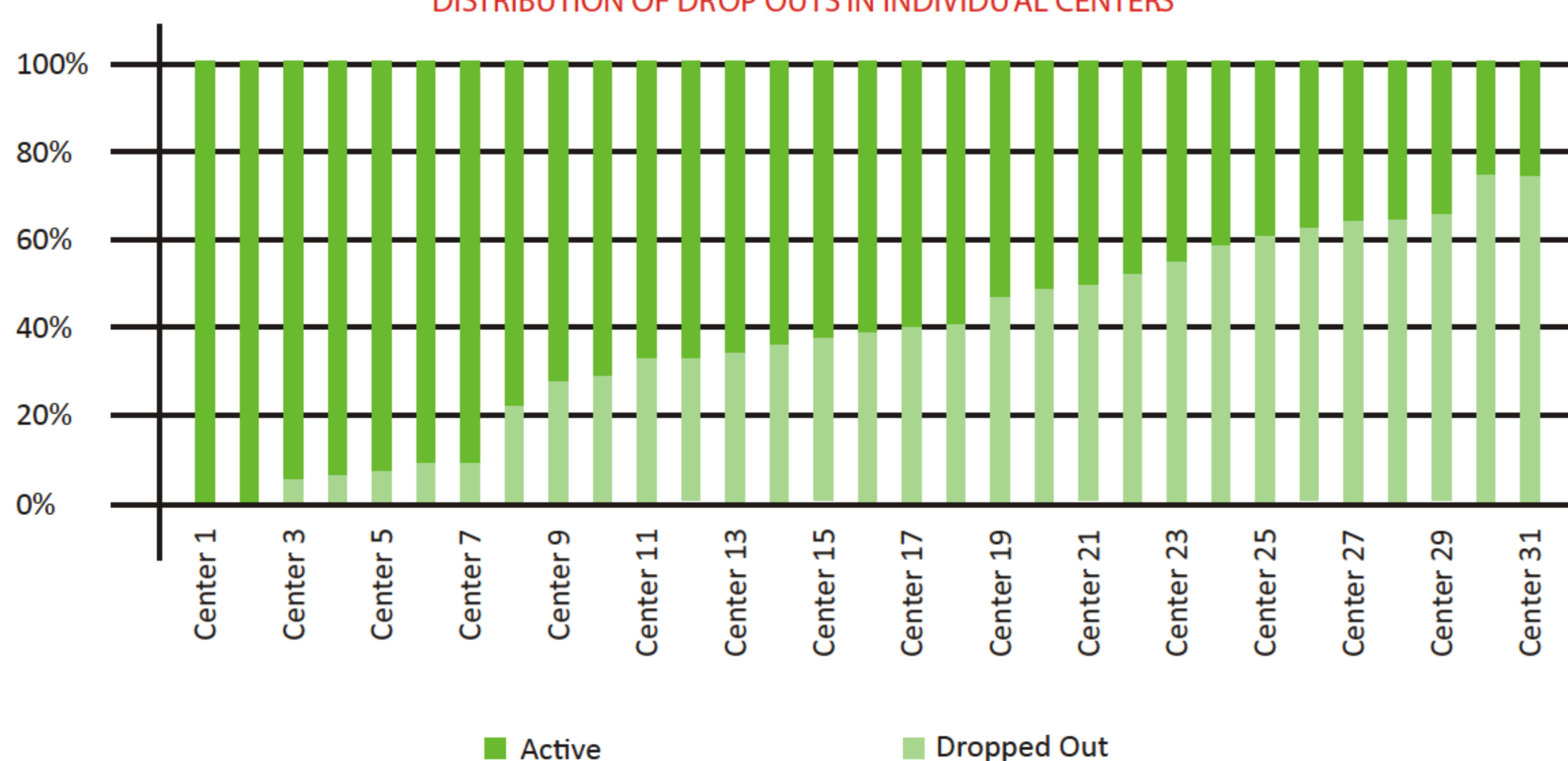


CAUSE OF DROPPING OUT IN RELATION TO PAYMENT TYPE



A CHI-SQUARED TEST OF THE CAUSE OF DROPPING OUT IN RELATION TO PAYMENT TYPE YIELDED A CHI-SQUARE STATISTIC OF 39.9151 WITH A P-VALUE OF < 0.00001.

DISTRIBUTION OF DROP OUTS IN INDIVIDUAL CENTERS



CONCLUSIONS:

- Financial considerations force about 35% patients to either stop or look for a cheaper option.
- Most drop outs are in the first month of starting HD.
- Mortality is higher in patients covered by government sponsorship compared to self-paying patients.
- Private insurance patients have the lowest mortality rates.
- A prospective study of all HD patients is needed to analyze the factors associated with drop outs.

ADVANTAGES: Largest such study using a pan-India cohort of patients initiating HD in centers with standardized dialysis practice

LIMITATIONS: Details of causes of drop out were not analyzed

