

SP 507

FACTORS AFFECTING LONG-TERM TECHNIQUE SURVIVAL OF PERITONEAL DIALYSIS PATIENTS

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INTRODUCTION AND AIM:

"The aim of the study was to retrospectively evaluate the main possible factors that might influence the long-term technique survival for peritoneal dialysis."

Renal replacement therapy using Peritoneal Dialysis (PD) is a well-known effective treatment. The alterations in peritoneal membrane during the time on PD may lead to ultrafiltration failure or/and inadequate clearance of small solutes.

PATIENTS - METHOD: "This is a single center retrospective study conducted for the time period from 1994 to 2014 (20 years) of 319 PD patients"

Patients' characteristics

N= 319 (169 m + 150 f)	Mean values±SD
Age	67.5±12.9 years
PD duration	39.5±28.5 months
Albumin	3.43±0.47 gr/dl
nPCR	0.74±0.22 gr/Kg/day
CRP	2.43±0.37 mg/dl
total Kt/V	2.07±0.76
creatinine D/P	0.75±0.13
MTAC	14.9±6.04 ml/min
Urine volume	479.6±56.36 ml

Diabetes mellitus (DMT2) was present in 108 out of 310 PD patients, while 111 patients were undergoing APD and 208 CAPD. The patients were divided into two groups according to the presence or not of diabetes, according to the modality of PD (CAPD or APD) and according to their membrane transport status

"The technique survival analysis of the PD patients was calculated by Kaplan Meier while the possible effect of any parameter in technique survival rates was evaluated by using Cox Regression analysis"

RESULTS:

'Cox Regression analysis revealed that diabetes, CRP and PD modality and PD adequacy are statistically important risk factors for long-term technique survival of PD modalities'

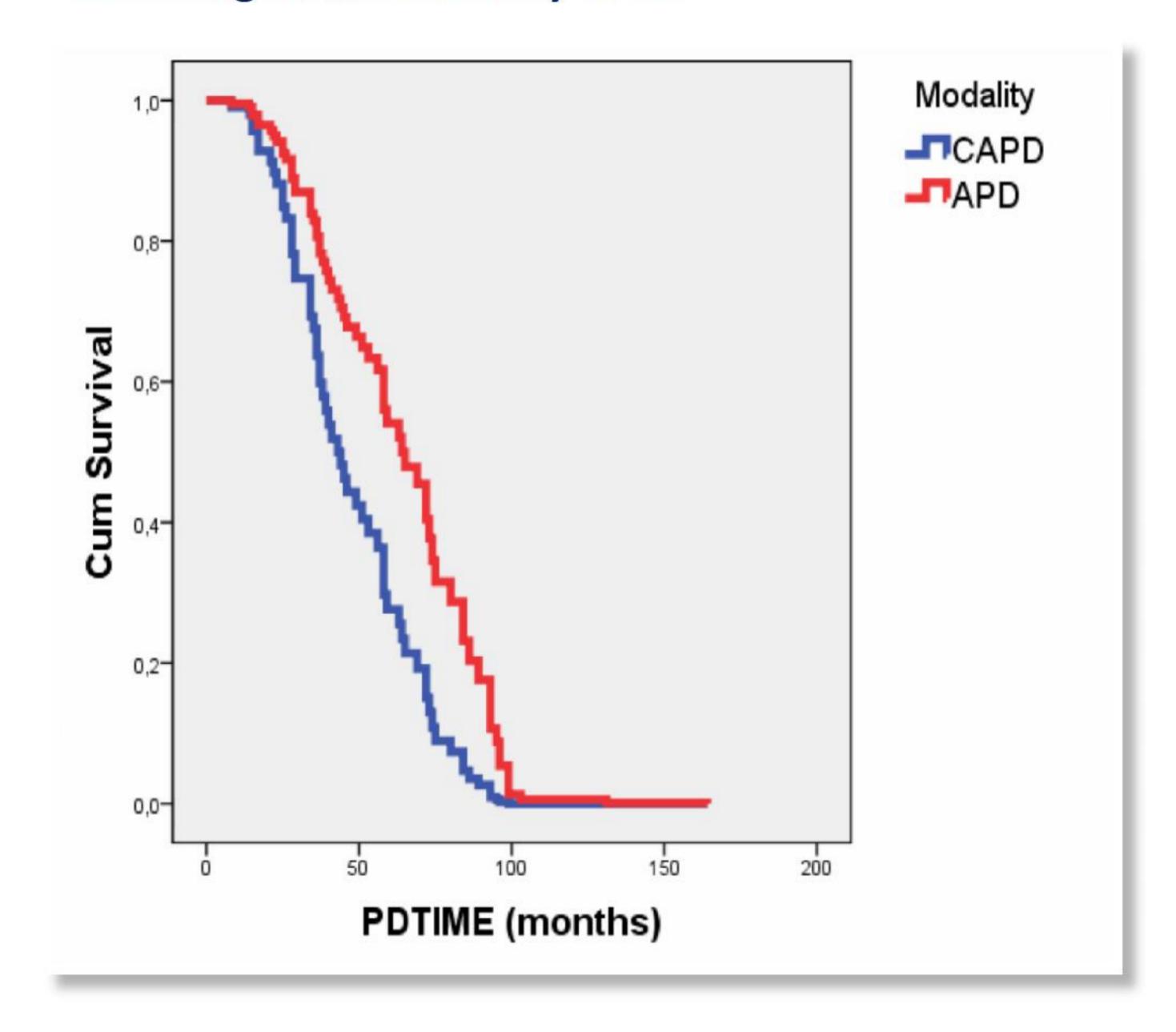
Cox Regression results

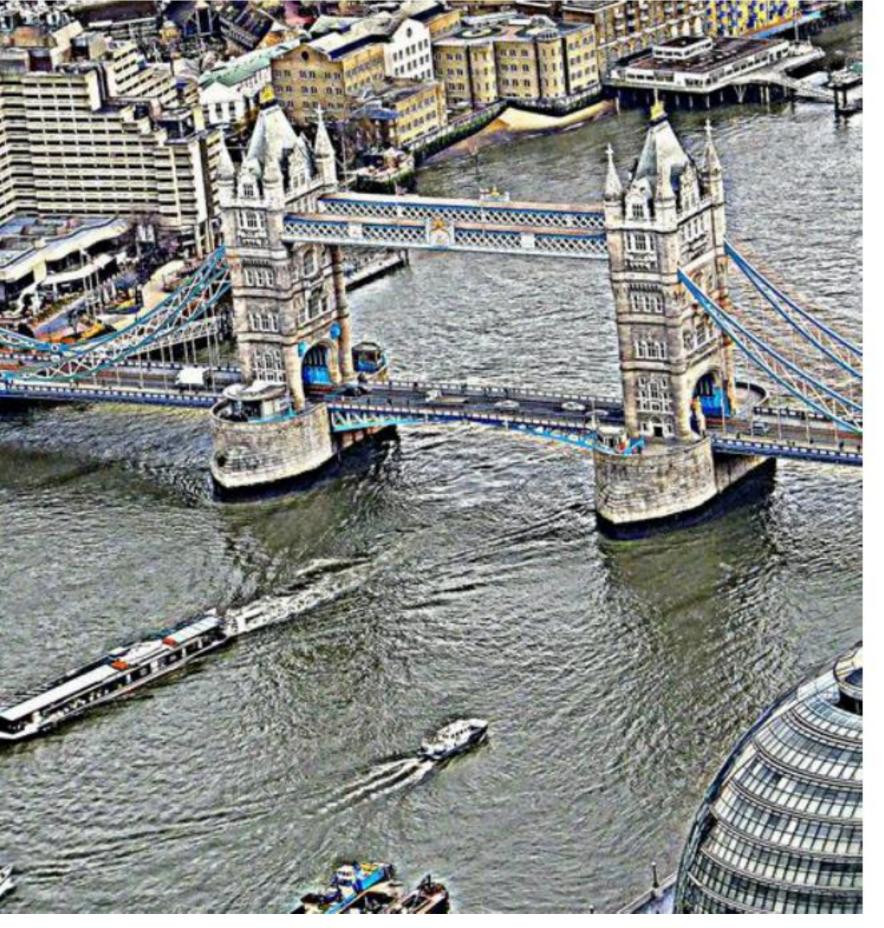
Sig	Exp (B)	
.000	3.417	
.000	1.186	
0.509	0.920	
0.442	0.641	
0.016	2.635	
0.112	2.535	
0.625	1.526	
0.539	1.000	
0.001	3.926	
0.197	0.018	
	.000 .000 0.509 0.442 0.016 0.112 0.625 0.539 0.001	

The cumulative survival using Kaplan-Meier analysis was better in the group with no-diabetic patients when compared with group with diabetic PD patients

(Log Rank test p<0,01)
as well as in patients using APD instead of CAPD
(Log Rank test p<0,01)

Table 1: Kaplan Meier technique survival according to the modality of PD





CONCLUSIONS:

These results indicate that the presence of diabetes and the existence of chronic inflammation as indicated by CRP values have a negative impact on the long-term technique survival rates of peritoneal dialysis, while patients undergoing APD might have better technique survival rates than those undergoing CAPD

