

EMBARGOED FOR RELEASE until June 19, 2014 – 5:00 PM (ET)

Contacts: Tracy Hampton • (312) 339-9067 • thampton@nasw.org
Adrienne Lea • (202) 503-6560 • alea@asn-online.org

STUDY DOCUMENTS IMPORTANT DIFFERENCES IN HOSPITALIZATION RATES AMONG RACIAL AND ETHNIC GROUPS ON DIALYSIS

Efforts are needed to reduce hospitalization rates in high-risk patients

Highlights

- During the first year of dialysis, white patients overall had higher hospitalization rates than blacks and Hispanics, but younger black patients, older black patients, and older Hispanic patients had increased hospitalization rates compared with whites of similar ages.
- Both blacks and Hispanics were at greater risk of hospitalization due to dialysis-related infections than whites.

Approximately 400,000 patients with kidney failure undergo maintenance dialysis each year in the United States.

Washington, DC (June 19, 2014) — There are significant racial and ethnic differences in hospitalization rates among kidney failure patients on dialysis, according to a study appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN). The differences are not consistent across age groups and also differ by causes of hospitalization. Additional studies are needed to determine why these differences exist and how to address them in order to reduce hospitalizations among all dialysis patients.

Hospitalization is frequent and costly among maintenance dialysis patients. Across the United States, approximately 400,000 patients with end-stage renal disease (ESRD) receive maintenance dialysis each year and spend an average of approximately 15 days in hospitals. While patients undergoing maintenance hemodialysis have exceptionally high hospitalization rates, our understanding of dialysis patient subgroups at highest risk remains incomplete.

Guofen Yan, PhD (University of Virginia School of Medicine) and her colleagues designed a study to examine hospitalization rates among US hemodialysis patients by both race/ethnicity and age to identify the dialysis patient subgroups at higher risk of hospitalization. The investigators analyzed information on 563,281 patients beginning maintenance hemodialysis between 1995 and 2009.

Among the major findings over patients' first year of dialysis:

- Overall, whites had higher hospitalization rates than blacks and Hispanics, but younger black patients, older black patients, and older Hispanic patients had increased hospitalization rates compared with whites of similar ages.
- Both blacks and Hispanics were at greater risk of hospitalization due to dialysis-related infections than whites.

"Further research is needed to elucidate the biologic and system-level factors in diverse younger and older populations that may influence hospitalizations, mortality, and other clinical outcomes," said Dr. Yan. "Studies are needed to explore in more detail issues such as health beliefs and behaviors, social networks, and other subtleties that may add critical insights to these observations. This could lead to novel interventions to reduce hospitalizations and costs for high-risk subpopulations treated with dialysis."

Study co-authors include Keith Norris, MD (University of California at Los Angeles), Alfred Cheung, MD and Tom Greene, PhD (University of Utah), Alison Yu (University of Southern California), Jennie Ma, PhD, and Wei Yu, MA, MS (University of Virginia School of Medicine).

Disclosures: This work is funded by NIH/NIDDK grant 5R01DK084200-04. In addition, Dr. Keith Norris is supported in part by NIH grants P20-MD000182, 3P30AG021684 and UL1TR000124. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

The article, entitled "Race/Ethnicity, Age, and Risk of Hospital Admission and Length of Stay during the First Year of Maintenance Hemodialysis," will appear online at <http://cjasn.asnjournals.org/> on June 19, 2014.

The content of this article does not reflect the views or opinions of The American Society of Nephrology (ASN). Responsibility for the information and views expressed therein lies entirely with the author(s). ASN does not offer medical advice. All content in ASN publications is for informational purposes only, and is not intended to cover all possible uses, directions, precautions, drug interactions, or adverse effects. This content should not be used during a medical emergency or for the diagnosis or treatment of any medical condition. Please consult your doctor or other qualified health care provider if you have any questions about a medical condition, or before taking any drug, changing your diet or commencing or discontinuing any course of treatment. Do not ignore or delay obtaining professional medical advice because of information accessed through ASN. Call 911 or your doctor for all medical emergencies.

Founded in 1966, and with more than 14,000 members, the American Society of Nephrology (ASN) leads the fight against kidney disease by educating health professionals, sharing new knowledge, advancing research, and advocating the highest quality care for patients.

The American Society of Nephrology®, ASN®, Kidney Week®, CJASN®, JASN®, NephSAP®, and ASN Kidney News® are registered trademarks of ASN

#

Tweet: Study documents differences in hospitalization rates among racial and ethnic groups on dialysis. <http://www.bit.ly/ASN-XXXX>

Facebook: There are significant racial and ethnic differences in hospitalization rates among kidney failure patients on dialysis, according to a study in the *Clinical Journal of the American Society of Nephrology*. The differences are not consistent across the age groups and also differ by causes of hospitalization. Additional studies are needed to determine why these differences exist and how to address them in order to reduce hospitalizations among dialysis patients..