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MANY DIALYSIS PATIENTS ARE UNPREPARED FOR NATURAL DISASTERS

Study finds patients' disaster preparedness lacking in the wake of Hurricane Sandy

Highlight

- Among patients scheduled to have dialysis during the landfall of Hurricane Sandy at clinics where electricity had been deprived, 26.3% missed dialysis sessions and 66.1% received dialysis at non-regular dialysis units.
- The percentage of patients who carried their insurance information and detailed medication lists with them were 75.9% and 44.3%, respectively.

Washington, DC (July 28, 2015) — Patients on dialysis are very vulnerable during emergencies or disasters due to their dependence on technology and infrastructure such as transportation, electricity and water to sustain their lives. A study appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN) shows that many are unprepared for such situations.

James Winchester, MD, Naoka Murakami, MD, PhD (Mount Sinai Beth Israel), and their colleagues assessed the preparedness of 357 adults receiving outpatient dialysis during the landfall of Hurricane Sandy in New York City in October 2012 at 5 facilities where electricity had been deprived.

The researchers found that 26.3% of patients missed dialysis sessions and 66.1% received dialysis at non-regular dialysis units. The percentage of participants who carried their insurance information and detailed medication lists were 75.9% and 44.3%, respectively.

Patients whose dialysis centers distributed a “dialysis emergency packet”—which includes information on a patient’s medications, dialysis schedule, comorbid conditions, and geographical/contact information for dialysis centers—after the storm were more likely to later have copies of their medical records stored at home.

“Disasters affect all of the population, but patients with specific needs such as dialysis are especially vulnerable, dialyze in buildings often above the ground floor, and underline the need for emergency generators,” said Dr. Murakami. “There is a need to strengthen both

patients' and dialysis facilities' awareness and preparedness to improve outcomes in natural disasters," she added.

In an accompanying editorial, Michael Davis, CRNP and Jeffrey Kopp, MD (National Institutes of Health) noted that the study also pointed to various factors—such as having access to alternate dialysis in an integrated system, getting access to transportation, and having a stable social situation—that could be important for avoiding missed dialysis treatments. “The list includes both socio-demographic factors that indicate which dialysis patients will require particular attention and factors that can be addressed with new intervention strategies,” they wrote.

Study co-authors include Nikolas Harbord, MD, David Lucido, PhD, and Hira Babu Siktel, MD.

Disclosures: The authors reported no financial disclosures.

The article, entitled “Disaster Preparedness and Awareness of Hemodialysis Patients following Hurricane Sandy,” will appear online at <http://cjasn.asnjournals.org/> on July 28, 2015.

The editorial, entitled “Disaster Nephrology: Impact of Early Dialysis Treatments and Missed Dialysis Treatments,” will appear online at <http://cjasn.asnjournals.org/> on July 28, 2015.

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