DO MEDICAL-ALERT BRACELETS BENEFIT PATIENTS WITH CHRONIC KIDNEY DISEASE?

Study finds lower rates of kidney failure, but no reductions in safety events.

Highlights

- In a study of patients with chronic kidney disease who did or did not wear medical-alert bracelets or necklaces, the frequency of safety events—or unintended harm from medical therapy—reported at annual visits was not different in the 2 groups.
- Wearing a medical-alert accessory was linked with a 62% lower risk of developing kidney failure, after adjustments.
- There was no significant difference in rates of hospitalization or death in those who did and did not wear medical-alert accessories.

Washington, DC (June 6, 2019) — In a pilot study of patients with chronic kidney disease (CKD), wearing a medical-alert bracelet or necklace was associated with a lower risk of developing kidney failure compared with usual care. The findings, which appear in an upcoming issue of CJASN, call for a randomized trial to fully evaluate the promise of medical-alert accessories for individuals with kidney dysfunction.

Medical-alert accessories—typically a bracelet—can help transmit critical information to a healthcare providers, especially when the wearer is not able to reliably communicate. No studies have examined the role of a medical-alert accessory in changing providers’ awareness of CKD, their delivery of care, or the health outcomes of patients with CKD.

To investigate, Jeffrey Fink MD (University of Maryland School of Medicine) conducted a study of 350 patients with stage 2-5, pre-dialysis CKD. “Since CKD is not often apparent to providers without appropriate blood testing, we thought providing patients with a medical-alert accessory with indication of their CKD might serve as an alert to their special care needs,” said Dr. Fink.

The first (pilot) 108 participants were given a medical-alert bracelet or necklace indicating the diagnosis of CKD and displaying a website with safe CKD practices. A subsequent (observation) group of 242 patients received usual care. All participants underwent annual visits to determine the frequency of safety events and adverse outcomes.
The median follow-up of pilot and observation groups were 4.3 and 3.1 years, respectively. The frequency of safety events—or unintended harm from medical therapy—reported at annual visits was not different in the pilot vs. observation groups. Wearing a medical-alert accessory was linked with a 62% lower risk of developing kidney failure, after adjustments. There was no significant difference in rates of hospitalization or death in the medical-alert accessory users and the observation group.

“We were hoping to show that provision of the accessory might show a reduction in adverse safety events but this was not the case in this relatively small sample. So any potential reduction in poor outcomes associated with the medical alert accessory did not appear to be mediated through a reduction in safety events,” said Dr. Fink. “However, this pilot study suggests that provision of the medical-alert accessory has the potential to lead to improved outcomes like reduced incidence of end-stage kidney disease.”

Study co-authors include Eli Farhy, BA, Clarissa J. Diamantidis, MD, MSc, Rebecca Doerfler, MPH, Wanda J. Fink, MS, BSN, RN, and Min Zhan, PhD.

Disclosures: Medical alert accessories for the study were donated by American Medical ID®.


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