STUDY PROVIDES NEW INSIGHTS ON COVID-19 RISK IN PATIENTS RECEIVING DIALYSIS

Researchers link certain patient and clinic factors with higher risk.

Highlight
- Among individuals with kidney failure who received dialysis at clinics several times each week, COVID-19 risks were higher in patients who were older, had diabetes, lived in local communities with higher COVID-19 rates, and received dialysis at clinics that served a larger number of patients.
- Risks were lower in patients who received dialysis in clinics with a higher number of available side rooms and that had mask policies for asymptomatic patients.

Washington, DC (June 1, 2021) — Many individuals with kidney failure have been unable to self-isolate during the COVID-19 pandemic because they require dialysis treatments in clinics several times a week. New research that will appear in an upcoming issue of CJASN highlights the risks faced by these patients and the factors involved.

For the study, Ben Caplin, MBChB, PhD (University College London) and his colleagues, on behalf of the Pan-London COVID-19 Renal Audit Group, examined information on 5,755 patients who received dialysis in 51 clinics in London. Between March 2 and May 31, 2020, a total of 990 (17%) patients tested positive and 465 (8%) were admitted to hospitals with suspected COVID-19. COVID-19 risks were higher in patients who were older, had diabetes, lived in local communities with higher COVID-19 rates, and received dialysis at dialysis clinics that served a larger number of patients. Risks were lower in patients who received dialysis in clinics with a higher number of available side rooms and that had mask policies for asymptomatic patients. No independent association was seen with sex, ethnicity, or measures of deprivation.

“Taken together, the findings confirm the high rates of symptomatic COVID-19 among patients receiving in-center dialysis and suggest sources of transmission both within dialysis units and patients’ home communities,” said Dr. Caplin. “The work also suggests that in addition to isolation of confirmed cases, addressing factors that might reduce transmission from patients without suspected or confirmed disease might provide an additional opportunity to further modify the impact of COVID-19 in this population.”
Study co-authors include Damien Ashby, Kieran McCafferty, Richard Hull, Elham Asgari, Martin L. Ford, Nicholas Cole, Marilina Antonelou, Sarah A. Blakey, Vinay Srinivasa, Dandisonba C.B. Braide-Azikwe, Tayeba Roper, Grace Clark, Helen Cronin, Nathan J. Hayes, Bethia Manson, Alexander Sarnowski, Richard Corbett, Kate Bramham, Eirini Lioudak7, Nicola Kumar, Andrew Frankel, David Makanjuola, Claire C. Sharpe, Debasish Banerjee, and Alan D. Salama.

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The article, titled “Risk of COVID-19 Disease, Dialysis Unit Attributes, and Infection Control Strategy among London In-Center Hemodialysis Patients,” will appear online at http://cjASN.asnjournals.org/ on June 1, 2021.

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