

# Kidney News

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## New Tool Predicts Risk of Experiencing Second Kidney Stone



*American Society of Nephrology* accomplishes just that.

“We developed the Recurrence of Kidney Stone (ROKS) nomogram that uses 11 questions about the patient to calculate the probability of having another symptomatic kidney stone at 2, 5, or 10 years after the first stone,” said lead author Andrew Rule, MD, of the Mayo Clinic in Rochester, Minnesota. The nomogram is available on the Internet at <http://www.qxmd.com/calculate-online/nephrology/recurrence-of-kidney-stone-roks>.

### Characteristics linked with recurrence

Although several studies have identified predictors for recurrence after a first stone episode, clinicians don’t have access to a formal prediction tool for routine use in patients. “Kidney stones are common and affect about 6 percent to 9 percent of the population. Of greatest concern to the patient after a symptomatic kidney stone is whether this excruciating

painful event will ever happen again,” said Rule. To develop a tool that might address this concern, Rule and his colleagues performed a general population cohort study of all validated incident kidney stone formers in Olmsted County, Minnesota, from 1984 to 2012. As they followed up patients for a second episode the investigators hoped to develop a predictive tool that used only characteristics commonly available at the time of the first episode.

The team found that 4908 residents of Olmsted County received a new diagnosis of kidney stones during the study period. After reviewing the patients’ charts, the researchers excluded patients in the following categories: prevalent stone formers, asymptomatic only, suspected stone only, no evidence of kidney stone disease, age younger than 18 years, no research authorization, and never a resident of Olmsted County. This left 2239 patients as validated first-time symptomatic stone formers. These patients were followed up for a total of 20,548 person years, with a

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**K**nowing which first-time kidney stone patients are likely to experience another symptomatic kidney stone could help physicians advise patients on whether to follow stone prevention diets or take medications. A new tool described in the *Journal of the*

## Kidney Donation Costs: Too High for Potential Donors with Low Income?

By Tracy Hampton

**A**lthough living kidney donation increased 125 percent between 1990 and 1999, the rates have been declining since 2005 for unknown reasons. A new study indicates that the financial implications of donation may play a role.

“This study identifies socioeconomic

status—specifically income—as an important barrier to living donation, and more importantly, implies that this barrier is becoming more difficult to overcome over time,” said lead author Jagbir Gill, MD, MPH, of the University of British Columbia in Vancouver. The findings are published in the *Journal of*

*the American Society of Nephrology*.

### Decline in donations

Beyond the obvious benefits of improved survival and quality of life for transplant patients, each living kidney donation is estimated to result in a net health care savings of \$100,000. For donors, however, the reported costs of living donation have been as high as \$20,000, with an average estimated cost of \$5000, which means that living donation amounts to more than one month’s salary for most donors. These costs usually relate to trav-

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