

혈액 투석 시작 후 조기 입원이 사망률에 미치는 영향

가톨릭대학교 의과대학 내과학교실¹, 중앙대학교 의과대학 내과학교실², 경북대학교 의과대학 내과학교실³
서울대학교 의과대학 내과학교실⁴, 연세대학교 의과대학 내과학교실⁵
전남대학교 의과대학 내과학교실⁶, 가톨릭대학교 세포사멸질환연구센터

이경수¹, 김수현², 김영옥¹, 진동찬¹, 송호철¹, 최의진¹, 김용림³
김연수⁴, 강신욱⁵, 김남호⁶, 양철우¹, 김용균¹

The Association between Early Hospitalization after Initiation of Dialysis and All-cause Mortality in Incident Hemodialysis Patients

Kyungsoo Lee¹, Su-Hyun Kim², Young Ok Kim¹, Dong Chan Jin¹, Ho Chul Song¹, Euy Jin Choi¹
Yong-Lim Kim³, Yon-Su Kim⁴, Shin-Wook Kang⁵, Nam-Ho Kim⁶, Chul Woo Yang¹, Yong Kyun Kim¹

Department of Internal Medicine¹, College of Medicine, The Catholic University of Korea
Department of Internal Medicine², College of Medicine, Chung-Ang University
Department of Internal Medicine³, Kyungpook National University School of Medicine
Department of Internal Medicine⁴, College of Medicine, Seoul National University
Department of Internal Medicine⁵, College of Medicine, Yonsei University
Department of Internal Medicine⁶, Chonnam National University Medical School
Cell Death Disease Research Center, The Catholic University of Korea

Background: Hospitalization rate is high within several months after initiation of hemodialysis (HD) in end-stage renal disease (ESRD). Limited data are available about the association early hospitalization after initiation of dialysis and clinical outcomes in ESRD patients.

Methods: A total of 1,493 incident HD patients were enrolled from the Clinical Research Center registry for ESRD cohort in Korea. Early hospitalization was defined as all-cause hospitalization within 90 days after initiation of HD. The primary outcome was all-cause mortality.

Results: Two-hundred forty two patients (16.2%) were admitted within 90 days after initiation of HD. Most common cause of hospitalization was vascular access complications (18.6%). The median follow-up period was 17 months. Kaplan-Meier analysis showed that the all-cause mortality rate was significantly higher in patients with early hospitalization ($p < 0.001$, Log-rank). In the multivariate Cox regression analyses, early hospitalization was significantly independent risk factor for all-cause mortality (HR 2.56, 95% CI, 1.65-3.96, $p < 0.001$).

Conclusions: Our data demonstrated that hospitalization within 90 days after initiation of HD were an independent risk factor for all-cause mortality in HD patients, which suggest that careful attention for HD patients with early hospitalization is needed.

Key Words: 혈액투석, 사망률
Hemodialysis, Mortality