

## KSN 2017 Abstract

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### DEATH RISKS OVER TIME FROM 2001 TO 2015 IN INCIDENT PERITONEAL DIALYSIS PATIENTS: A RETROSPECTIVE COHORT STUDY WITH 15-YEAR FOLLOW-UP

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**Background:** Even though previous study has shown that there was no difference for survival between hemodialysis and peritoneal dialysis (PD) since 2002, the incident rate to initiate PD in patients with end-stage renal disease has decreased in developed countries. Hence, we investigated the change in trends and death risk in incident PD patients followed over up to 15 years.

**Methods:** In a 15-year (1/2001–12/2015) cohort of 592 incident peritoneal dialysis patients in our dialysis center, we examined death risk across the year of PD initiation from 2001 to 2014 using Cox proportional hazard models. To account for the competing risk of transplantation across the year of PD initiation, we conducted the competing risk regression to estimate sub-hazard ratios of death risk. Models were adjusted for age, female, and diabetes.

**Results:** Patients were  $50 \pm 13$  years old, 45% female, and 50% diabetic. A total of 178 (30%) all-deaths were reported. 133 (23%) among 592 patients received kidney transplantation. Median follow up period was 2.8 years (IQR 1.4, 4.8 years) Compared with the patients who started PD in 2001, death risk tends to decrease with each subsequent year of PD initiation since 2010, but there was no statistically significant difference across the year of PD initiation (Figure 1). After taking into consideration the impact of kidney transplantation as a competing event, similar trends were for death risks.

**Conclusions :** The survival rates in PD patients did not change until 2010 and then tended to improve since 2010. However, it has not shown significant association with the year of PD initiation over up to 15-year follow-up period. Further studies to understand the conditions influencing these death risks are needed.

**Keywords :** peritoneal dialysis, death risk