KSN 2021
FULLY VIRTUAL MEETING
September 02 (Thu) - 05 (Sun)

Abstract Submission No. : 9068

What is the best for my patients? Online hemodiafiltration (HDF)

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End-stage renal disease (ESRD) have a shortened life expectancy as compared to their peers without kidney disease. The mortality rates were 166 for hemodialysis (HD) patients and 154 for peritoneal dialysis (PD) patients, per 1,000 patient-years, and 47 for non-chronic kidney disease (CKD). Even though between 2001 and 2016, adjusted mortality rates decreased for dialysis patients by 29%, the mortality rate of dialysis patients is still more than triple compared to no kidney disease (USRDS report, 2016).

There have been various and consistent trials to decrease the mortality of those dialysis patients such as anemia correction, vascular calcification reduction, and changes in dialysis membrane from low flux to high flux. Unfortunately, there was no specific single method to improve the survival of dialysis patients. The reason is that the current improvement of survival in dialysis could be related to the multi-directional efforts that include promoting healthy lifestyle habits, improving water quality, delaying CKD progression, and preventing cardiac structural changes from the early CKD.

According to several retrospective and prospective reports that high volume HDF reduces mortality in dialysis patients, it is important to try and confirm this result in the clinical field. In this talk, I will cover the mechanism of action in high volume HDF in terms of improving survival and how to maintain high volume HDF by the post-dilution method in Asian dialysis patients with real experiences and practical ways.