

**Abstract Submission No.: A-1229****The Current Trend of Chronic Kidney Disease-Mineral Bone Disorder Management in Korean Patients on Maintenance Hemodialysis: The Movement of Past 10 Years**

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**Objectives :** The management of chronic kidney disease-mineral bone disorder (CKD-MBD) in hemodialysis patients (HD) is complex, and is complied with guidelines and reimbursement. The recent key pharmaceutical agents are non-calcium containing phosphate binder (NCCPB), vitamin D receptor activators (VDRA), and calcimimetics. Korean reimbursement and pricing policies of the above drugs in HD patients were changed in 2018. Our aim is to analyze the change of management of CKD-MBD for past ten years in Korea.

**Methods :** We compared the CKD-MBD parameters and medication in three published studies: the multicenter cohort of 1018 HD patients in 2009 ('2009'), Korean Society of Nephrology registry data of 21433 HD patients from 2012 to 2017 ('KSN'), and the multicenter, prospective, observational study of 755 HD patient enrolled from 2019 to 2021 (ORCHESTRA).

**Results :** Mean serum calcium (Ca) and phosphorus (P) level were decreased, and intact PTH (iPTH) level was increased, compared to the past years: serum Ca (2009, 9.1±0.7 mg/dL; KSN, 9.0±0.8 mg/dL; ORCHESTRA, 8.9±0.8 mg/dL), serum P (2009, 5.3±1.4 mg/dL; KSN, 4.9±1.6 mg/dL; ORCHESTRA, 4.9±1.4 mg/dL), and iPTH (2009, 262.1±298.8 pg/mL; KSN, 213.2±231 pg/mL; ORCHESTRA, 359.8 ±434.1 pg/mL). The use of NCCPB, VDRA, and cinacalcet was increased: NCCPB (2009, 40%; KSN, 12.4%; ORCHESTRA, 56.4%), VDRA (2009, 45.9%; KSN, 27%; ORCHESTRA, 53.9%), and cinacalcet (2009, 0%; KSN, 2.3%; ORCHESTRA, 20.4%).

**Conclusions :** The current trend in management of CKD-MBD was tend to follow the 2017 KDIGO guidelines, and the prescriptions of NCCPB, VDRA, and calcimimetics were increased after changes of reimbursement. We suggest that the minimum dose of CCPB needs to be prescribed not to increase iPTH.