

Abstract Submission No.: A-0448**Medication Prescribing Practices and Appropriateness in Pediatric Chronic Kidney Disease**

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Objectives : This study aims to describe the overall medication profile of pediatric CKD patients through a multicenter study and whether appropriate medications are prescribed.

Methods : This is a cross-sectional analysis of individual medication profiles prescribed at baseline visit among patients enrolled in the KNOW-Ped CKD (Pediatric Chronic Kidney Disease Patient Cohort Study).

Results : We collected individual medication prescriptions for 432 patients. The median age was 9.34 years (IQR 4.96, 14.30) and 68% (n=294) were male. When divided into CKD stages 2-4, the proportion of patients taking 1-2 CKD medications was the highest among all groups, followed by CKD stages 2 and 3 patients not taking any medications (41.0% and 20.3%, respectively) and CKD stage 4 patients taking 3 or 4 CKD medications (27.4%). CKD stage 2 and 3 patients also had the lowest proportion of patients taking 5 or 7 CKD medications (0.6% and 5.2%, respectively) compared to 20.2% of CKD stage 4 patients. When analyzing treatment status for CKD complications, 73.7% of patients with a diagnosed with hypertension (n=105) were receiving antihypertensive medication at the time of the survey, and only 12.0% of patients diagnosed with anemia (n=281) were receiving iron supplements or recombinant erythropoietin stimulating agents. Of the 205 patients diagnosed with vitamin D deficiency, 62.9% (n=129) were not taking active vitamin D or vitamin D supplementation therapy, and of the 234 patients diagnosed with dyslipidemia, 72.7% (n=170) were not taking lipid-lowering medication at the time of the survey.

Conclusions : We have identified medication prescribing practices for pediatric patients with CKD. In light of these findings, it is important to have a system in place to ensure that healthcare providers are aware of the medications they are prescribing to their patients and are prescribing them appropriately.