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## **Patient Selection and Prescription of Hemodiafiltration in Japan**

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In Japan, more than 190000 patients with renal failure were treated by hemodiafiltration therapy (HDF), accounting for majority of all maintenance dialysis patients. (JRDR,2022,12,31). The reasons for selecting HDF therapy were "prevention of hemodialysis amyloidosis", "prevention of dialysis hypotension", "prevention of pruritus" and "improvement of medium molecular weight solute removal", according to the JSDT statistical survey report as at 31 December 2013 (JRDR 2013 ,12,31) . In addition to these factors, the high reimbursement price of HDF may also be a reason. On the other hand, a report from the Dialysis Outcome Practical Pattern Study (DOPPS) reported that the reasons for choosing HDF were "prevention of hemodynamic instability," "prevention of dialysis-related amyloidosis" "longer life expectancy" and "long dialysis vintage "(Nephrol Dial Transplant (2018) 33: 683-689). HDF prescriptions include treatment mode (including dilution mode), replacement fluid volume, blood flow rate and choice of filter. Online HDF accounted for 69% and I-HDF for 29.7% (JRDR,2022,12,31). In terms of dilution mode for online HDF, 95.6% is pre-dilution mode and 4.4% was post-dilution mode (JRDR,2017,12,31). The replacement fluid volume averaged 39.9 L in pre-dilution mode and 10.2 L in post-dilution mode (JRDR, 2017,12,31). The blood flow rate in the HDF group was 224 mL/min, higher than 206 ml/min in the HD group (JRDR, 2017,12,31). In Filter selection, the HDF filter was selected, and the mean pre-treatment blood  $\beta$ 2-MG concentration was 27.0 mg/L in the HD group and 27.1 mg/L in the HDF group, without significant differences (JRDR, 2017,12,31). This presentation will describe the characteristics of HDF therapy in Japan and the factors contributing to it and will also report on the latest initiatives in Japan.

**Keywords:** Hemodiafiltration, Dilution mode, Prescription