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Effects Of Temporary Hemodialysis Before Insertion Of A Peritoneal Dialysis Catheter

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Objectives : It is well known that the risk of bleeding is high in patients with chronic kidney disease, and 33-63% of patients receive hemodialysis for the first time. However, there is insufficient data on the effects of temporary hemodialysis, such as reducing uremic bleeding side effects when inserting a peritoneal dialysis catheter. We analyzed the effects of pre-emptive hemodialysis before insertion of a peritoneal dialysis catheter.

Methods : We retrospectively analyzed medical records. Patients were divided into two groups: those who underwent temporary hemodialysis before insertion of the peritoneal dialysis catheter and those who did not. Logistic regression and cox regression analysis were used to analyze risk factors affecting bleeding and catheter survival. Statistical significance was set $P < 0.05$.

Results : Of the 336 patients, 120 patients underwent temporary hemodialysis before PDC insertion and 216 patients did not receive hemodialysis. Bleeding complications occurred in 43 (12.8%) of 336 patients. Logistic regression analysis was performed to analyze the risk factors for total bleeding. In the univariate analysis, there were no risk factors that showed a significant correlation with bleeding. In the multivariate analysis, there was a significant correlation between hemodialysis and bleeding (OR=2.2, 95% CI [1.09-4.43], $P= 0.001$). Hemoglobin and creatinine also showed a significant correlation with bleeding ($P=0.027$, $P=0.017$ respectively). The one-year catheter survival rate was 92.3%. Cox regression analysis was performed to analyze risk factors related to catheter survival. In both univariate and multivariate analysis, only infection showed a significant correlation with catheter survival ($P= 0,002$).

Conclusions : Temporary hemodialysis did not reduce the side effects of bleeding when inserting a peritoneal dialysis catheter. As renal function declines, the risk of uremic bleeding increases. If renal replacement therapy is necessary, it should be performed as soon as possible.