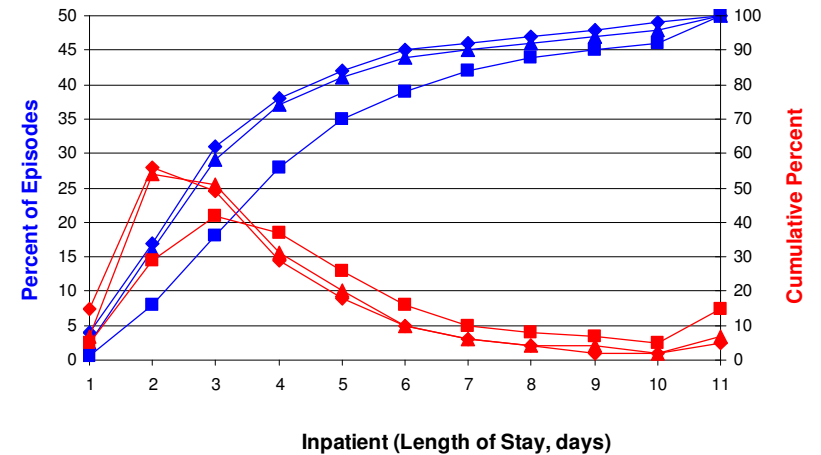


<b>Title</b>	<b>Hospital treatment for fluid overload in the Medicare haemodialysis population</b>
<b>Author(s)</b>	<b>TJ Arneson, J Liu, Y Qiu, DT Gilbertson, RN Foley, AJ Collins, USA</b>
<b>Journal</b>	<i>Clin J Am Soc Nephrol</i> 5 (6): 1054 - 1063, 2010
<b>Introduction</b>	Fluid overload is relatively common in dialysis patients and is associated with adverse outcomes including hypertension, exacerbation of congestive heart failure, and increased risk of death. It is well-known that fluid overload sometimes results in a need for emergent dialysis outside of regularly scheduled dialysis sessions.
<b>Material and Methods</b>	To estimate the magnitude of fluid overload treatment episodes in hospital settings, including emergency departments, data of the Centers for Medicare & Medicaid (CMS) Renal Management Information System (REMIS) were used by the Chronic Disease Research Group. Fluid overload treatment episodes were defined by claims for care in inpatient, hospital observations, or emergency department settings with primary discharge diagnoses of fluid overload, heart failure, or pulmonary oedema, and dialysis performed on the day of or after admission.
<b>Results</b>	<ul style="list-style-type: none"> <li>• In 25,291 HD patients, 41,699 care episodes occurred over a mean follow-up of 2 years.</li> <li>• Heart failure was the primary diagnosis in 83% of episodes, fluid overload in 11%, and pulmonary oedema in 6%.</li> <li>• Characteristics associated with more frequent events included younger age (&lt; 45 years), female sex, African American race, causes of ESRD other than diabetes, dialysis duration 1 to 3 years, smaller average number of dialysis sessions per month at baseline, hospitalizations during baseline, and all comorbid conditions except dementia, which was associated with less frequent events.</li> <li>• Average cost was \$ 6,372 per episode; total costs for the episodes over the follow-up were \$ 266 million.</li> </ul>

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Graph adapted to original: Distribution of hospital lengths of stay for fluid overload treatment episodes

**Comment**

Long-term continuous volume monitoring is necessary to avoid acute complications in HD patients. E.g. the Body Composition Monitor from Fresenius Medical Care is a quick, simple and non-invasive tool to determine the dry weight in dialysis patients.