April 27, 2018

DOPPS Practice Monitor: Trends in Ultrafiltration Rate and New Medications, Findings in Pruritus and Vascular Access

Researchers from the Dialysis Outcomes and Practice Patterns Study (DOPPS) Practice Monitor (DPM) will host a web conference on Thursday, May 3, 2018 at 3 p.m. EDT. The conference will be moderated by Bruce Robinson, MD, MS, FACP, Principal Investigator of the DOPPS Program. Registration for this web conference is available at DOPPS.org/DPM.

Researchers will present an overview of US hemodialysis trends from the DPM through February 2018, including:

- **(New in 2018!) Ultrafiltration rate (UFR):** Ultrafiltration rate, or UFR, denotes how quickly excess water is removed during a dialysis session. UFR values ≥13 ml/kg/hr have been associated with increased cardiovascular morbidity and mortality (Flythe, et al. Kidney Int 2011). The reporting of UFR values will be a new ESRD Quality Incentive Program (QIP) measure beginning in Program Year 2020. Trends in UFR from August 2010 through February 2018 will be presented.

- **(New in 2018!) Patiromer and etelcalcetide:** Prescription of patiromer, a new potassium-binding agent approved in 2015, was first observed within DPM data in April 2016. Use of etelcalcetide, a new intravenous calcimimetic approved in 2017, was first observed within DPM data in May 2017. Recent data on percent use will be presented.

The following research will also be presented:

Hugh Rayner, MA, MD, FRCP, DipMedEd, Country Investigator for the DOPPS in the United Kingdom, will present findings on pruritus in hemodialysis patients from a recent publication in the Clinical Journal of the American Society of Nephrology. Although the percentage of patients on hemodialysis very much or extremely bothered by itching has been decreasing over the last two decades, it remains underestimated by a majority of clinicians. 18% of patients nearly always or always bothered by itching used no treatment for pruritus, and 17% did not report itching to health care staff. The discussion will focus on how awareness and treatment of pruritus can be improved.

Ronald Pisoni, PhD, MS, Deputy Principal Investigator for the DOPPS, will present findings about a trend of concern in US arteriovenous fistula (AVF) placement from a recent publication in the American Journal of Kidney Diseases. Generally, placing the AVF in the lower arm is preferred as there is less risk of exhausting available sites for future AVFs. Yet between 1996 and 2015, researchers saw a large shift in the US from lower to upper arm AVFs, raising serious concerns about the long-term implications for dialysis care for these patients. The discussion will address important questions regarding what is best practice and how it is best achieved to optimize vascular access outcomes.

**About the DPM:** The DPM covers a wide range of topics presented in the form of more than 1,500 regularly updated charts, figures, and data tables. The DPM is based in the United States on a sample of over 9,000 patients in more than 160 hemodialysis facilities, and has now expanded to provide data from Canada, Germany, and the Gulf Cooperation Council (GCC) countries. Research papers describing DPM methods, key recent findings and analysis, and commentary have been published. To learn more, please visit DOPPS.org/DPM.

**About the DOPPS Program:** The mission of the DOPPS Program is to improve the experience of patients with kidney disease by identifying links between international variations in clinical practices and outcomes. Started as a hemodialysis study in 1996, the DOPPS Program now tracks over 70,000 patients on hemodialysis (DOPPS), peritoneal dialysis (PDOPPS), and with advanced chronic kidney disease (CKDopps), in over 20 countries. To learn more about the DOPPS Program, as well as opportunities for collaboration and enrollment in the CKDopps, please visit DOPPS.org.
Would you like to receive more updates about the DPM? Sign up here.