



# BROWN

1. Center for Gerontology and Health Care Research, Brown University, Providence, Rhode Island; 2. Department of Health Services, Policy & Practice, Warren Alpert Medical School, Brown University, Providence, Rhode Island; 3. DaVita Inc, Denver CO; 4. Fresenius Medical Care

### BACKGROUND

Catheters are widely used as modes of access in dialysis patients

The use of catheters has been associated with higher mortality rates in ESRD patients.

Increasingly new initiatives are refocusing on reducing the use of catheters

### **OBJECTIVES**

To examine trends in the use of catheters at time of initiating dialysis and to document the extent of Networklevel differences in the use of catheters (at initiation) after adjusting for Network-level differences in the characteristics of incident patients

## **METHODS**

# **Data Sources**

- We used data from the Renal Information Management System (REMIS) that provides information on the characteristics (demographic and clinical) of ALL incident ESRD patients each year
- Data are received in real time and updated each quarter
- We merge REMIS data with data on dates of death from the Social Security Master Death Master File

# **Outcome Measure**

- Catheter Rates in hemodialysis patients at time of initiating dialysis
- Catheter rate in (say) quarter 1 of 2008 =

(# patients reporting use of catheters in Form 2728 that began hemodialysis in first quarter of 2008)/ (total number of patients in 2728 that began hemodialysis in first quarter of 2008 with non-missing data on "access type" at time of entry)

## □ Analytic Approach

- Network-level differences in use of catheters after adjusting for differences in the following patients characteristics
- Age (polynomial), race, gender, albumin>3.5, hemoglobin>10, creatinine, previous care by nephrologist, maturing fistula at time of entry, and whether diabetes listed as primary cause

# **Types of Access Used in End Stage Renal Disease Patients: Recent Trends**

Vincent Mor, PhD,<sup>1,2</sup> Shailender Swaminanthan, PhD,<sup>1,2</sup> Mahesh Krishnan, MD,MPH, MBA,<sup>3</sup> Franklin W. Maddux, MD FACP<sup>4</sup>

# RESULTS



Quarters

# Table 1. **Trends in Type of Access in Hemodialysis Patients**

Year of Incidence	Catheter	Fistula/Graft	Maturing Fistula/Graft*
2007	0.814	0.176	0.22
2008	0.815	0.172	0.21
2009	0.814	0.178	0.21
2010	0.815	0.182	0.22

Conditional on use of catheters at entry into ESRD

q1	2009 q3	2010 q1	2010 q3
Ϋ́	2000_90	2010_91	



# RESULTS

Figure 2. Regression adjusted predicted probability of use of catheter upon entry: by Network



# SUMMARY

□ No downward trend in catheter use nor in whether a maturing fistula/graft is present at time of entry into ESRD

□ Network-level differences in catheter rates even after adjusting for 9 important patient characteristics

# **IMPLICATIONS**

Likely that real Network-level differences in treatment

Unmeasured factors contribute to Network-level differences in use of catheters, and more research

# **FUNDING & CONTACT**

This work is funded by **Kidney Care Partners** and is being overseen **Expert Panel:** 

Brian D. Bradbury, MA, DSc; Barbara Fivush, MD; David T. Gilbertson, PhD; Raymond Hakim, MD, PhD; Mahesh Krishnan, MD, MPH; Rajnish Mehrotra, MD; Paul M. Palevsky, MD; Ronald Pisoni, PhD, MS; and Edward Vonesh, PhD.