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European Renal Association – European Dialysis and Transplant Association

Peritoneal dialysis linked to lower risk of stroke?

Findings of the Scottish Renal Registry and the Scottish Stroke Care

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Stroke remains a significant global health issue and is a major problem of patients with chronic kidney disease (CKD). The risk of stroke in end-stage renal disease (ESRD) on renal replacement therapy (RRT) is up to 10-fold greater than the general population.

Today, a study [1] that has been published in NDT (“Nephrology, Dialysis, Transplantation”) that showed a surprising result: It explored effect of renal replacement (RRT) modality at initiation and cumulative dialysis exposure by time dependent regression analysis, using transplant recipients as the reference group. The study group of Dr Mark Findlay, Glasgow/UK analyzed data of the Scottish Renal Registry and the Scottish Stroke Care Audit to identify stroke in all adult patients who commenced RRT for from 2005 to 2013. Incidence rate was calculated and regression analyses performed to identify variables associated with stroke.

Of the 4,957 patients who commenced RRT 277 patients suffered a stroke (incidence rate was 18.6/1000 patient-years). These patients were older, had higher blood pressure and were more likely to be female and have diabetes. On time dependent analysis, hemodialysis exposure was independently associated with increased risk of stroke (compared to transplantation). Use of peritoneal dialysis did not increase stroke risk on adjusted analysis.

“Although there was no randomization of the dialysis modality and there might have been a bias, because patients who chose PD were younger and “fitter”, this study points to another possible advantage of peritoneal dialysis (PD)”, comments Professor Denis Fouque, Lyon/France, editor-in-chief of NDT. This is why the initiative ‘PD first!’ has been established a few years ago.” Nevertheless, the percentage of RRT patients on PD remains low (11% according to the latest annual report of the ERA-EDTA Registry [2]). “We have to take more measures that peritoneal dialysis is recognized and accepted as an effective renal replacement therapy alternative to hemodialysis by patients and doctors”, concludes Professor Fouque. “Informing about dialysis modalities remains a challenging task for nephrologists!”



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[1] Findlay M, MacIsaac R, MacLeod MJ et al. Renal Replacement Modality and Stroke Risk in End-Stage Renal Disease – A National Registry Study. NDT 2017. Link to the abstract:

<https://academic.oup.com/ndt/article-lookup/doi/10.1093/ndt/gfx291>

[2] <https://www.era-edta-reg.org/files/annualreports/pdf/AnnRep2015.pdf>;
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About ERA-EDTA

With more than 7,500 members, the ERA-EDTA ("European Renal Association – European Dialysis and Transplant Association") is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. It also supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all its activities ERA-EDTA has the "Young Nephrologists' Platform" (YNP), a very active committee whose board includes members who are 40 years old or younger. Besides, it has established various working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board was established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association's journals, NDT (Nephrology, Dialysis, Transplantation) and CKJ (Clinical Kidney Journal), are currently the leading nephrology journals in Europe; furthermore NDT-Educational is the online educational journal, open for free to all uses, of the Society as well as the very important and useful feature of NDT-Educational "Literature Review". The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. ENP, the European Nephrology Portal, is the latest new initiative of ERA-EDTA: here all those interested in the activities of the Society can find everything that is done, all in one place! Finally, ERA-EDTA is a member of the European Kidney Health Alliance (EKHA), a consortium of patients, nurses, foundations all related to renal issues that actively interacts with the European Parliament. For more information please visit www.era-edta.org