

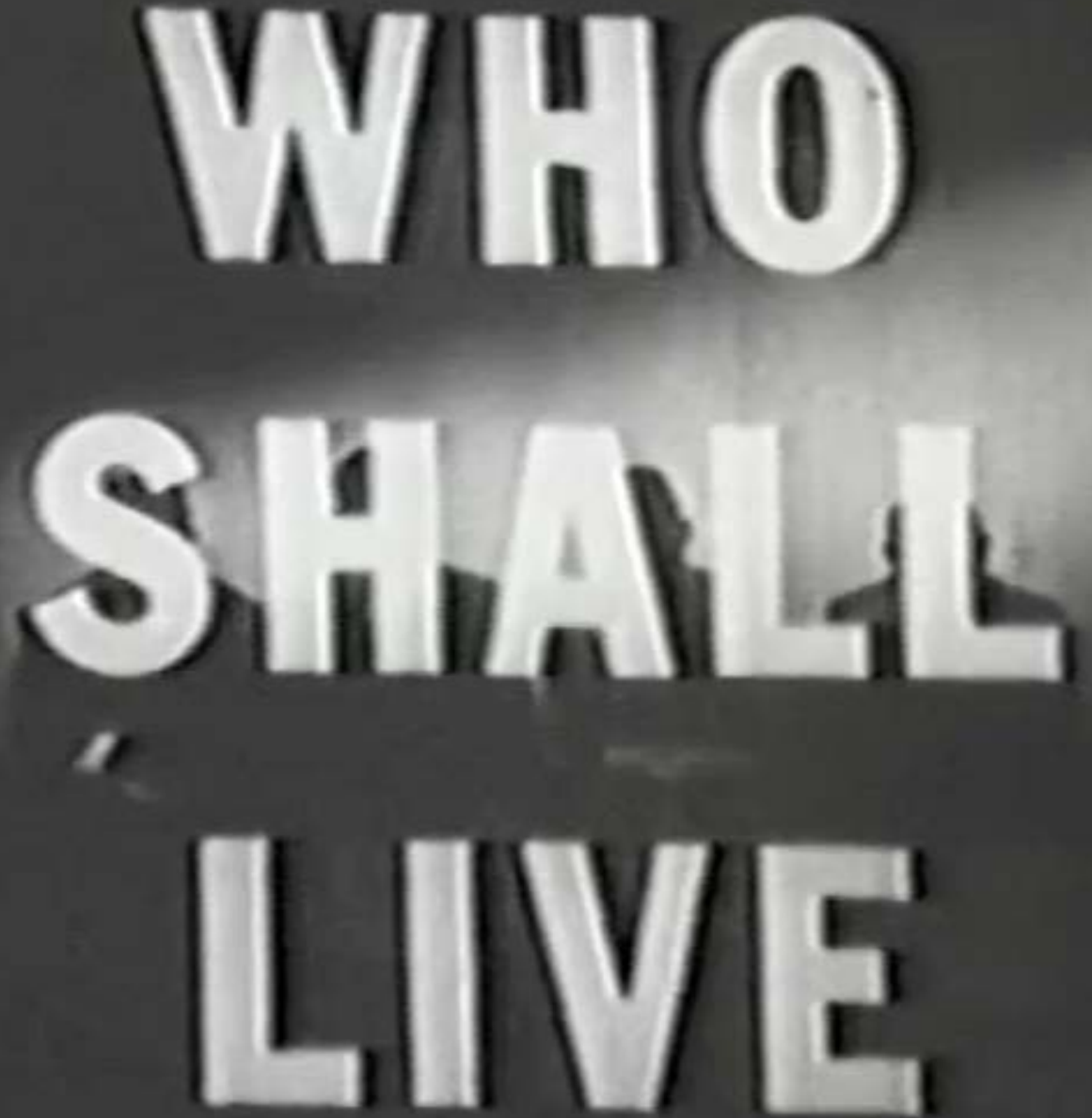
Palliative Care in End Stage Renal Disease

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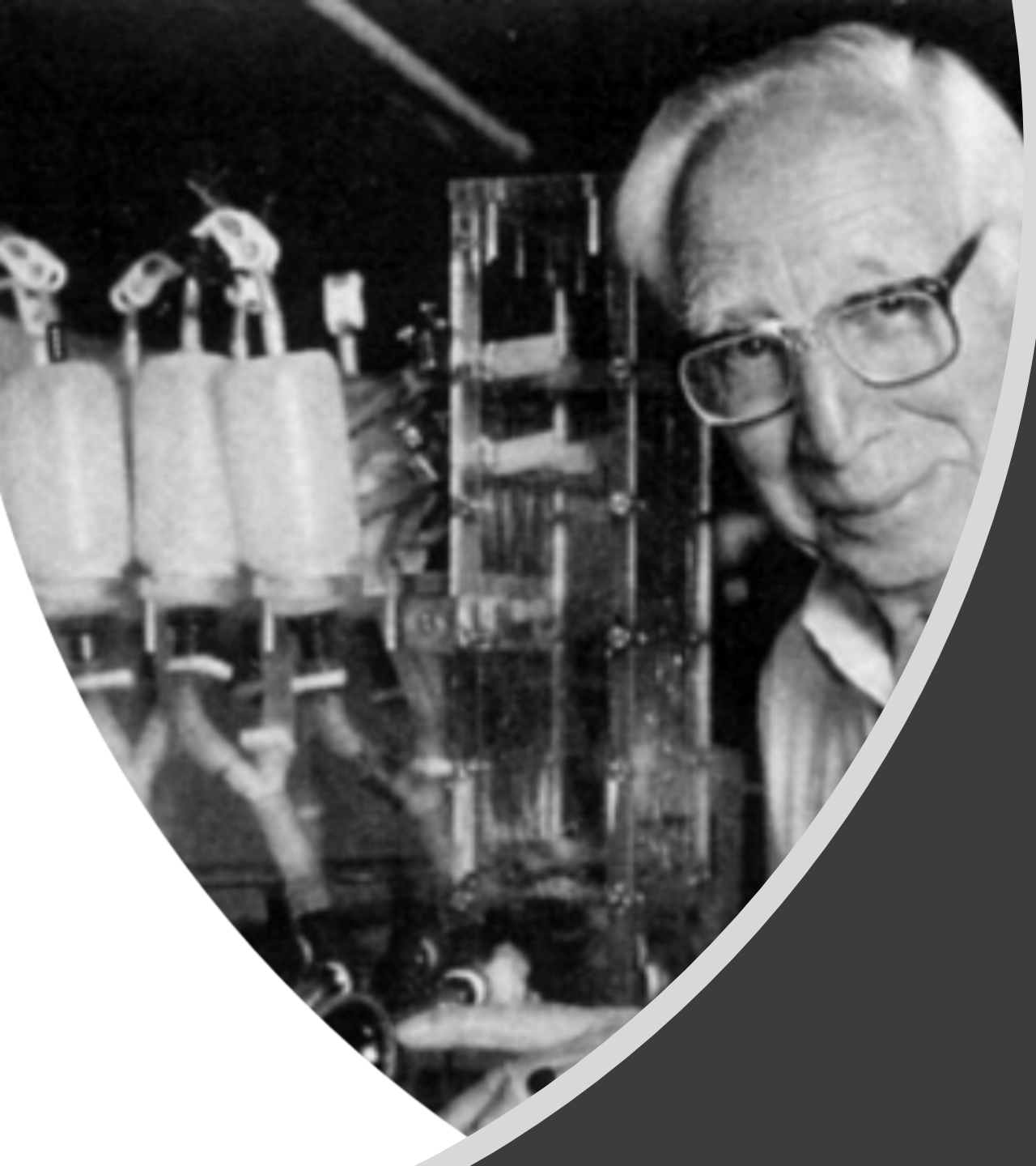
WHO
SHALL
LIVE

Disclosures

- No financial disclosures related to this topic

Objectives

- Understand the development of chronic dialysis and the ESKD program in the US
- Understand the complications of dialysis
- Understand the benefit of conservative management in patients with advanced chronic kidney disease



- Kolff develops artificial kidney in Holland
- 50 yards of sausage casings wrapped around a wooden drum
- Blood pumped back to patients with pump based off Ford engines
- First 14 patients died

Dr. Kolff, can you tell us about the first patients you treated with dialysis?

Willem Kolff: Of the first 15 patients I treated with dialysis in Kampen, only one survived. And that one might have survived if I had used another sequence of treatment, without the artificial kidney.

Keys to success — [Integrity](#)

Sophia Schafstad was the first patient where you can honestly say she would have died had she not been treated with dialysis. And she was in a prison right after the war, for collaborating with the Germans and many of my fellow countrymen would have liked to wring her neck. And, she was brought to us in renal failure. My duty is not to wring her neck, but to treat her. And we treated her. She was comatose when she came in. And after so many hours of treatment I bent over her and said, "Mrs. Schafstad, can you hear me?" And she slowly opened her eyes and said, "I'm going to divorce my husband," and she did.







Dialysis Now

- In 2016, 124,675 patients started dialysis
- Prevalent population: 726,331
- \$35,400,000,000 Medicare cost (7.2% of all paid claims)
- Mortality in patients on dialysis is declining **BUT**
- Dialysis patients over 65 have higher mortality compared to Medicare population with cancer, CV disease, diabetes.

USRDS 2018

- 63% of patients admitted to an ICU in last 90 days of life
- 40% of patients with ESRD died in the hospital
- 32% of patients with ESRD received care in a SNF in last 90 days of life
- 62% saw more than 5 medical specialties in last 90 days of life
- 23.3% discontinued dialysis before death (4% increase)
- 26% were enrolled in hospice at time of death (15% increase)

On average, life expectancy for a patient receiving dialysis is about $\frac{1}{4}$ of a patient with the same age not on dialysis.

Dialysis patients spend an average of 11.7 days per patient year in the hospital




Withdrawal from dialysis accounts for
15-25% of patient deaths

Patient centered approach

- Treatment goals
 - **Medical management without dialysis**
 - Dialysis as a bridge
 - Dialysis as a final destination treatment

Feature Editors: Christopher A. Jones and Arif H. Kamal

Ten Tips Nephrologists Wish the Palliative Care Team Knew About Caring for Patients with Kidney Disease

Amar D. Bansal , Amanda Leonberg-Yoo, Jane O. Schell, Jennifer S. Scherer, and Christopher A. Jones

Palliative Care and Nephrology: Moving Upstream Together

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AJKD

Editorial

Palliative Nephrology: Time for New Insights



National Kidney Foundation®

A TO Z HEALTH GUIDE

How Does Palliative Care Improve the Quality of Life for Kidney Patients?

Combined Nephrology/Hospice and Palliative Care Program

The Nephrology and Hospice & Palliative Medicine fellowship training programs of the University of Pennsylvania, Yale University, and the University of North Carolina have collaborated to create a combined 2-year training program through the ACGME's Advancing Innovation in Residency Education (AIRE) program. The combined fellowship will lead to ABIM

How Can Palliative Care Be Helpful in CKD/ESKD?

- Symptom Management
- Shared Decision Making
- Advance Care Planning

Surprise Question

- 147 patients
- “Would I be surprised if this patient died in the next year?”
- At one year
 - “No” group had mortality of 29.4%
 - “Yes” group had mortality of 10.6%

Management without dialysis

- Difficult to decide if elderly patients will benefit from dialysis
- Survival of elderly patients on dialysis is worse than that of most cancers
- Paucity of data on trajectory of patient survival when dialysis is not initiated

• Brown MA 2015

Management without dialysis

- Brown et al
 - Measured survival, symptom burden, quality of life in patients with advanced CKD managed without dialysis
 - **Patients choosing not to go on dialysis survived a median of 16 months**
 - Palliative medicine helped provide symptom control and QOL without dialysis

Management without dialysis

- Developed Renal Supportive Care Clinic
- Staffed by nephrologist, palliative care specialist, palliative care RN, dietician and social worker
- Home visits and phone calls available
- 53% 1 year survival with mean eGFR 16 ml/min
- Patients in this clinic were older, more malnourished, had more comorbidities

Withholding Dialysis

- End stage lung, liver, heart disease without ability for transplantation
- Severe mental disability, unable to cooperate with procedure
- Severe or irreversible dementia
- Persistent vegetative state

Rethinking dialysis: Giving patients choices



JOHN TLUMACKI/GLOBE STAFF

At Hebrew Senior Life, Dr. Ernest Mandel prepared to administer dialysis to patient James E. Glynn.

By Felice J. Freyer | GLOBE STAFF APRIL 17, 2017

A 2012 study of patients with end-stage kidney disease found that those who underwent dialysis lived 404 days longer than those who decided against the procedure. But 326 of those extra days were spent undergoing dialysis, and an uncounted number were lost to hospitalization.


Risk Factors	Points
Total dependence for transfers	3
BMI <18.5 kg/m ²	2
Peripheral vascular disease stage 3 or 4	2
Congestive heart failure stage 3 or 4	2
Severe behavioral disorder	2
Unplanned dialysis initiation	2
Active malignancy	1
Diabetes mellitus	1
Dysrhythmia	1

Total Score	6-Month Mortality Rate
0	8%
1	8-10%
2	14-17%
3-4	21-26%
5-6	33-35%
7-8	50-51%
≥9	62-70%

Figure 1. | Six-month prognostic risk score in patients ≥75 years who initiate dialysis. Adapted from a prognostic model developed and validated by Couchoud *et al.* (30) using the French Renal Epidemiology and Information Network registry to predict 6-month mortality in ESRD patients ≥75 years who initiated dialysis. BMI, body mass index.

Berger et al CJASN 2012

Outcomes among older patients on dialysis

- Assumed that dialysis initiation will restore health.
 - 1/3 of adults 80 years and older living independently will require SNF placement within 6 months of starting dialysis.
 - Many are hospitalized and receive interventions including ICU admission, cardiac arrest, mechanical ventilation.
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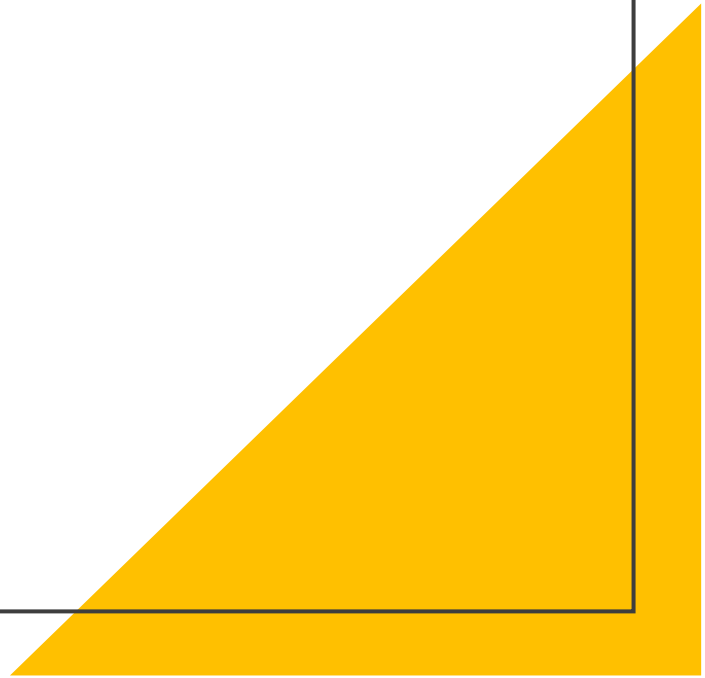
Hospice in dialysis

- Poor quality of death
- High symptom burden
 - Fatigue
 - Insomnia
 - Pruritus
 - Neuropathic symptoms
 - 50% report pain
 - Depression

Four Plus Forty-Four: Hours to Modify, Theirs to Enjoy

Sarbjit Vanita Jassal

Clin J Am Soc Nephrol 10: 169–171, 2015. doi: 10.2215/CJN.12681214



Case

- 90 year old female with worsening renal function. In the past she says she would not want to do dialysis but as her kidney function worsens, she is not sure what to do next. She would like to not do dialysis but her family is hopeful she can do dialysis.