The integrated diet dialysis program (IDDP): An alternative to traditional dialysis treatment: launch ramp to implement the tailored hemodialysis (ITH)

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Abstract

Purpose

The present study aims to evaluate the effectiveness of treatment IDDP as an alternative to the continuation of conservative treatment or early treatment in patients with traditional dialysis chronic kidney disease CKD 5D, addressed particularly to the elderly and/or collaborating on a diet.

Patients and Methods

We prospectively evaluated 26 patients with a mean age of 64.3 ± 14.3 years, GFR 4-8 ml/min. These patients were evaluated every six months: pressure parameters, dialysis, nutritional balance, calcium, phosphorus, fluid and electrolyte balance and renal function. The patients in this period were subjected to dietetic scheme which provided protein (0.6 to 0.7 g/ kg/ day) low salt (60 meq/day) 30 -35 Kcal per kg/day, supplemented with folic acid and vitamin B group, free dinner the day of dialysis, associated to a dialysis treatment once weekly, of hemodialysis and/or hemodiafiltration high efficiency with synthetic membranes.

Results

The mean follow-up observation was 637.2 ± 451.3 days. The results showed a stable trend of nutritional parameters, PTH, calcium, phosphorus, and fluid and electrolyte balance, with an increase in the values of total immunoglobulins, triglycerides, and lymphocytes. The hemoglobin values were maintained in accordance with the guidelines target (11-12 g / dl) compared with a statistically significant reduction in the dosage of erythropoietin (p <0.01 vs. 6.18 start and 24 months). It was also found a statistically significant reduction in systolic blood pressure pre-dialysis (p = 0.03), diastolic blood pressure (p = 0.03) and average (p <0.01) accompanied by a reduction of antihypertensive therapy (p <0.01). The mortality in this study was 7.7% (equivalent to a gross mortality / year of 7.4%) and compliance with dietary treatment of 92.3%. Such treatment, in addition to being suitable from a point of view depurative and nutritional offers important advantages in terms of quality of life of the patient, economics, management and allows, thanks to the function of residual GFR, to be able to obtain a better purification of molecules in higher molecular weight as the β2 microglobulin. Even mortality seems to be lower than in patients on hemodialysis as reported by the National Italian Registry (13%). It can therefore be considered as a viable therapeutic option, especially in order to offer patients a more wait and purifying strategy "tailored" (ITH) on the clinical needs of patients carrying the kidney to retain as long as possible and then the FRR increasing the dialysis dose as it is reduced.

Biography