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Secondary hyperparathyroidism (SHPT) is

Introduction

This recommendation may have been based on

KDIGO guidelines currently state that patients

Compare event rates in the year

• Evaluate morbidity and mortality following PTX.
• Compare event rates in the year immediately following PTX with rates in the year immediately preceding it.

Methods

The study population included all prevalent dialysis patients aged 18 years or older who underwent PTX between January 1, 2007, and December 31, 2009.

Patients were required to have Medicare as primary insurance payer for both Part A and Part B and to have been receiving hemodialysis for at least 1 year before undergoing PTX.

PTX was identified from Medicare inpatient claims using International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) procedure codes 06.8x and 06.95.

Comorbid conditions were defined using the Renal Data System.

Results

The 1-year period after discharge

The 30-day period of morbidity and mortality following PTX was substantial at 2%.

All-cause hospitalization increased 39% and total hospital days increased 58%, while ICU use increased 69%.

Hospitalization with hypocalcemia increased 8.6% (95% CI: 8.0-9.3), and hospitalization for any cause increased 18.6% (17.7-19.5) (Table 2).

Figure 1 displays rate ratios for 1-year hospitalization following PTX versus 1-year hospitalization before PTX by patient subgroups.

Discussion

PTX is associated with significant morbidity, including increases in hospitalizations, ICU stays, total hospital days, and emergency department/observation visits, both with and without hypocalcemia treatment.

Mortality during the PTX hospitalization and the 30 days immediately following discharge was substantial at 2%.

The increased risks of these events following PTX were apparent across nearly all patient subgroups, suggesting that case-mix does not explain our findings.

Conclusion

With the availability of this new information, physicians and patients considering PTX as a treatment option for severe SHPT should weigh the potential benefits and risks associated with the procedure carefully before deciding on an appropriate course of action.

Table 1. Baseline characteristics of patients undergoing parathyroidectomy

Table 2. Events before and after parathyroidectomy

Table 3. Events better in or after parathyroidectomy