ASN 35th Annual Meeting & Scientific Exposition Submission Program

Filename: 950878

Presenting Author: Michael G. Palzer

Department/Institution: Nephrology Analytical Services, Minneapolis Medical Research Foundation

Address: 914 South Eighth Street, Suite D-206

City/State/Zip Code/Country: Minneapolis, Minnesota, 55404, United States

Phone: 612-347-3903 **Fax:** 612-347-5878 **E-mail:** nas@nephrology.org

Entities that provided funding for this abstract:
Pharmaceutical Company Support; Private Foundation Support

Keywords:
end-stage renal disease; pneumonia; preventive health care

Agree to Copyright Transfer: Yes

Abstract Category: 106 Outcomes, Epidemiology, Clinical Trials, and Health Services Research

Conflict of Interest: Yes

Title: Peritoneal Dialysis Patients and Influenza Vaccination, 1995-2000

Michael G. Palzer, B.S. [1]*, Jon J. Snyder, M.S. [1], David T. Gilbertson, Ph.D. [1] and Allan J. Collins, MD. [1].
[1]Nephrology Analytical Services, Minneapolis Medical Research Foundation, Minneapolis, MN.

Abstract:
End-stage renal disease (ESRD) patients are at an increased risk for infectious complications. A major source of infections relates to pneumonia. During the winter months, pneumonia is a common complication of influenza. Several studies in the general population have shown influenza vaccinations decrease both financial and mortality burdens. The USRDS has shown influenza vaccinations appear to be underutilized in the dialysis population.

We studied influenza vaccinations among peritoneal dialysis (PD) patients for the years 1995 to 2000 to determine the percentage of patients vaccinated on this home-based therapy. We studied (N=101,646) period prevalent yearly cohorts of patients who were on PD and had Medicare as the primary payer for the entire time period of September 1 through December 31 -- the time during which influenza vaccinations are offered. Among those eligible for a given year, claims were searched to determine if an influenza vaccination was billed to Medicare. A vaccination percentage was then calculated among eligible PD patients.

Over the time period of our study, we observed a steady increase in percentage of patients vaccinated, with the exception of a slight drop in the year 2000 which may reflect underreporting. In 1995, 35.8% of eligible PD patients (n=19,611) received an influenza vaccination, which increased to 38.9% in 1996 (n=19,049), 40.3% in 1997 (n=18,108), 41.6% in 1998 (n=15,711), and 44.6% in 1999 (n=14,906) before dropping to 39.6% in 2000 (n=14,261).

These data suggest that nearly half of PD patients may not be receiving preventive health care protection from the complications of influenza. Since it is recommended that all ESRD patients be vaccinated annually, providers need to focus more attention on this aspect of care which may reduce morbidity in the PD patients.

Disclosure:
This study was funded in part by an unrestricted research grant from Baxter Healthcare Corporation.