PHC018

USE OF ERYTROPOIESIS-STIMULATING AGENTS IN PATIENTS WITH ANEMIA OF CHRONIC KIDNEY DISEASE

Pharmacy Service

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Background:

Anemia is a common complication of chronic Kidney disease (CKD), and its correction with erythropoiesis-stimulating agents (ESAs) is associated with improved patient outcomes and quality of life.

Objective:

To evaluate demographic and clinical characteristics of outpatients with CKD and anemia, treated with epoetin alfa (EPO) or darbepoetin alfa (DARB). To compare utilization of ESAs in predialysis patients.

Methods:

Population analysed: patients with CKD and treated with ESAs, registered in our pharmacy outpatient database.

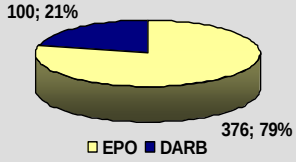
Type and period of study: Descriptive observational study, from March to July 2011.

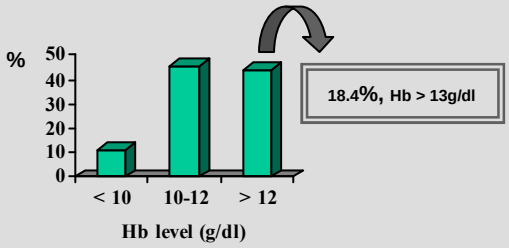
Data collected:

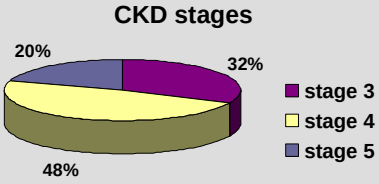
- Age, Gender.
- GRF and Cause of CKD.
- ESA prescribed and dosage of ESA.
- The last data of haemoglobin (Hb), serum ferritin level and transferrin saturation.
- Utilization of ESAs, was analyzed in the group of predialysis patients (stage 3 and 4 of CKD) with Hb levels between 10 and 12 g/dl (actual FDA and EMA targets).

Results:

476 patients were registered, 51.5% men, average age 69.4±15.6 years.

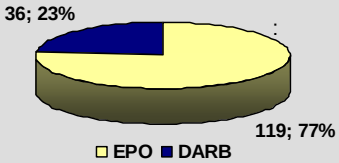






Subgroup of predialysis patients with Hb level between 10-12 g/dl

155 patients, 51% men, average age 70±16.4 years.



	EPO	DARB	p
Average age	71.2	65.0	0.04
% men	55.5	36.0	0.04
Extended dosing ≥q 2wk	24.4	66.6	≥ 0.001

Mean weekly doses in each: 4986 UI (EPO) vs 25.88 mcg (DARB).

Conclusions:

A high number of patients are above the safe limit (12g/dl), action must be taken to improve the quality of pharmacotherapy.

The dose ratio within EPO and DARB was 192:1.

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