HEMODIALYSIS NONADHERENCE: BIMODAL SEASONAL VARIATION IN ATTENDANCE AT AN URBAN CENTER

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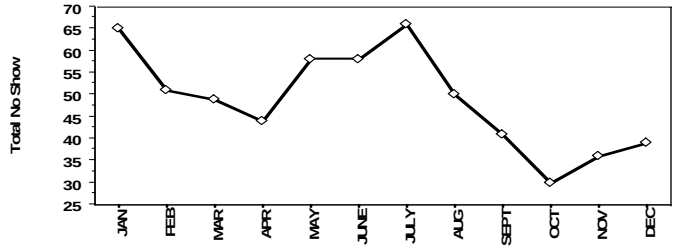
Hemodialysis [HD] nonadherence remains a global problem. Intercontinental and regional variations in prevalence have been observed but seasonal variations have not been reported. We prospectively monitored our patients for adherence over 12-month duration and carefully documented the monthly frequency of missed HD or "No Show". A total of 114 patients, mean age 55 ± 14 yr, 53% male were surveyed. The no show rates peaked equally in January and July while October had the lowest rate [4.8% vs. 2.2%, p = 0.012 respectively] (Fig.). Compared to the adherent, the non-adherent patients had lower levels of: serum albumin 3.7 vs. 3.9g/dl, p = 0.04; hematocrit 34 vs. 36%, p = 0.002; and Kt/V 1.4 vs. 1.5, p = 0.004. The non-adherents had higher levels of: serum phosphorus 6.0 vs. 5.0 mg/dl, p = 0.003; inter-dialytic weight gain 4.3 vs. 3.0 kg, p < 0.0001, and hospitalization rates 67 vs. 26%, p < 0.0001. Mortality was higher but did not significantly differ 15 vs. 6%, p = NS. Logistic regression analysis showed a strong association between smoking and non-adherence, Odds Ratio 0.24 [95% CI 0.1- 0.8, p = 0.03]



Dialysis nonadherence remains a major contributor to high ESRD morbidity and mortality. No show appears to be influenced by extremes of weather.