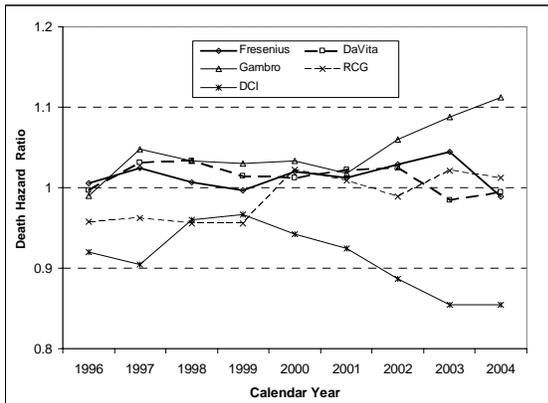


**MORTALITY TREND OF HEMODIALYSIS CHAINS IN THE USA:
1996-2004**

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Background: Discrepancies in mortality rates of maintenance hemodialysis (MHD) patients (pts) across diverse dialysis organizations in the USA have been reported. **Methods:** Annual relative death hazard ratios of MHD pts in 5 major US dialysis chains were examined in the United States Renal Data System (USRDS) database between 1996 to 2004 using Cox proportional hazard models, adjusted for age, gender, race, ethnicity, network, employment, insurance, comorbid states, GFR, albumin and hemoglobin. **Results:** Compared to non-chain facilities, Gambro and RCG



showed worsening death hazard ratios (HR) of MHD pts over 9 yrs, whereas DCI exhibited the strongest survival improvement (1.00% per yr) followed by DaVita (0.26% per yr)(Figure). Over the last 4 yrs of the study

period, DCI, DaVita and Fresenius showed HR improvement, whereas Gambro and RCG showed worsening trends compared to nonchain facilities (Table).

Chain	HR change per yr (beta)	
	1996-04	2001-04
Fresenius	0.09%	-0.53%
DaVita	-0.26%	-1.24%
Gambro	1.08%	3.10%
RCG	0.85%	0.41%
DCI	-1.00%	-2.45%

Conclusions: US dialysis chains show different relative mortality trends over time. Identifying and understanding the potential factors that contribute to these trends may help improve longevity of MHD pts.