

DECLINE IN SGA SCORE, HOSPITALIZATION, & DEATH IN NEW START HEMODIALYSIS PATIENTS.

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Subjective Global Assessment (SGA) was used to evaluate nutritional status in hemodialysis (HD) patients. The aim of this study was to determine if a one point or greater decline in SGA score between initial and 6 month assessment was predictive of the number of days new start HD patients are hospitalized in the first year.

All subjects were new start HD patients entering care in 2005 in one of 14 Fresenius outpatient HD facilities located in Alaska, Oregon, and Washington. There were 180 patients who met the inclusion criteria. Initial and 6 month SGA scores, sex, height, weight, age, and type of vascular dialysis access were recorded from the electronic patient medical record. Hospitalization and mortality data was collected. The effect of decline in SGA score on number of days a patient was hospitalized was assessed using linear regression.

There were 75 hospitalizations, 31 deaths, 23 (13%) patients with a decline in SGA score, and 32 patients with a 10% or greater decline in BMI between initial and 6 month assessments. Seventy patients (39%) had no change in SGA score and 85 (47%) had an increase in SGA score. Decline in SGA score was positively associated with number of days a patient is hospitalized with a linear regression coefficient of 4.3 ($p = 0.08$). A crude logistic regression model was used to determine if a 1 point or greater decline in SGA was related to hospitalization as a categorical variable. The odds ratio for patients with a 1 point or greater decline in SGA score was 2.6 (95% CI 1.07-6.30). A logistic regression model was done to determine the relationship of a 1-point or greater decline in SGA score versus a stable score or increase in score on mortality. The adjusted odds ratio of the association was 3.67 (95% CI 1.43-9.37)

A decrease in SGA score from initial assessment to 6 month assessment is related to higher odds of hospitalization in new start HD patients and higher odds of mortality between months 6 to 12. A decline in SGA score between the initial and 6 month assessment has some ability to predict the outcomes of hospitalization and mortality in new start HD patients.

