

**POST DISCHARGE PARICALCITOL DOSE REQUIREMENTS
FOR DIALYSIS PATIENTS CONVERTED TO
DOXERCALCIFEROL DURING HOSPITALIZATION**

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This study assessed the safety and serum calcium(Ca^2), phosphate(PO_4) and intact PTH (iPTH) response of patients subjected to a therapeutic interchange of Doxercalciferol (DO) during the inpatient course from Paricalcitol (PA). Discharged patients continued on PA. Retrospective chart review of ESRD patients admitted to a community teaching hospital, 57 patients with 110 admissions on therapeutic interchange of PA to DO was undertaken. On interchange patients, calcium, phosphorus and iPTH data was collected 30 days after discharge and outpatient weekly PA dose was calculated and converted to DO using 0.6:1 (Doxercalciferol:Paricalcitol) dosing ratio. In the interchange group, patients were 59.8 ± 13.4 years of age, 66% male and 46% African American. Hypertension and diabetes were prevalent in 83% and 52% of patients respectively. Average LOS among interchange patients was 8.4 ± 7.6 days. Among the interchange group, serum Ca^2 levels on admission 8.97 ± 0.8 increased to 8.98 ± 0.7 at discharge, decreasing to 8.86 ± 0.8 at day 30. Serum PO_4 levels on admission 4.75 ± 1.7 decreased to 4.45 ± 1.6 at discharge, increasing to 5.33 ± 1.8 at day 30. Intact PTH levels on admission 381 ± 388 fell to 290 ± 270 at day 30. Pre-admission and 30 day post-discharge PA doses were similar in the interchange group. Inpatient conversion to DO from PA did not increase discharge PA requirements or result in unstable serum Ca^2 , PO_4 and iPTH levels 30 days post discharge