

SELF-REPORTED PRURITUS AND CLINICAL, DIALYSIS-RELATED, PATIENT-REPORTED OUTCOMES IN HAEMODIALYSIS PATIENTS

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BACKGROUND



Prior studies have demonstrated that CKD-associated Pruritus (CKD-aP) causes patients distress and contributes to restless sleep, agitation and depression. There is an association between CKD-aP and increased mortality.



This large-scale, observational study analysed associations between itch severity and several key outcomes.

METHOD

Patients undergoing haemodialysis enrolled in phases 4-6 of the Dialysis Outcomes and Practice Patterns Study (DOPPS) during the years 2009-2018.



23,264 patients
21 countries

Primary outcome was time to all-cause mortality.

Patient-reported outcomes included, health-related quality of life, depression, sleep quality, faintness/dizziness, feeling washed out/drained.

RESULTS

Decreased quality of life



37% of patients suffered from moderate-to-severe CKD-aP.

The differences seen between patients who were 'extremely bothered by itching' and those 'unbothered by itching' were evident across various outcomes.



2 x as likely to suffer from depression.



2.5 x as likely to suffer from disturbed sleep.



>2 x as likely to feel washed out or drained.



More likely to miss dialysis sessions or withdraw from dialysis completely.



With increasing severity of CKD-aP there is a



in quality of life assessed by physical and mental component scores.

Increased all-cause mortality

Compared to patients who were 'not at all bothered' by itchy skin, those who were 'extremely bothered' by itchy skin were at higher risk of an adverse clinical outcome.



1.2 x higher all-cause mortality rate.



1.3 x higher cardiovascular-related mortality rate.



1.4 x higher infection-related mortality rate.

CONCLUSION

This study confirms the importance of identifying and treating patients who experience CKD-associated Pruritus (particularly severe CKD-associated Pruritus) to reduce symptom burden and improve quality of life and possibly even survival.