

Reason for hospitalization of hemodialysis patients outside the nephrology department: Study over 10 years

Dr Imane Failal¹, Dr Sanae Ezzaki¹, Pr benyounes ramdani¹

¹*Chu Ibn Roshd, Casablanca, Morocco*

Introduction:

Chronic end-stage renal disease is a major public health problem in Morocco. This is the result of a steady increase in its incidence and prevalence. It has a heavy economic impact and has a considerable impact on the quality of life of patients. And hospitalization has a major impact on the morbidity and mortality of chronic hemodialysis patients (HDC) with an increase in their cost of care. The objective of our work is to study the indications and the course of hospitalizations as well as the factors linked to the intra-hospital mortality of chronic hemodialysis patients.

Patients and methods

This is a retrospective study concerning 1535 patients with end-stage chronic renal disease admitted to the CHU for a period of 10 years, ranging from January 1, 2008 to December 31, 2018. The parameters were studied from the on-call register of the nephrology department.

Results

A total of 1,535 HDCs were admitted to the various services and benefited from a total of 3,382 HD sessions. with an average age of 49.8 years, and a slight male predominance with a sex M / F ratio of 1.11, the antecedents were dominated by diabetes (33.18%) and hypertension (32.28%).), the reasons the most frequent primary admissions were OAP (16.5%), followed by disturbances of consciousness (15%), then hyperkalemia (10%) Hospitalization was urgent in more than 50% of HDC, and scheduled for the rest. A total of 65% of the IRCT were hospitalized in the various medical, surgical and intensive care units of the emergency reception service (SAU). The latter represents the main hospitalization site for our patients. Almost half of our patients came from this service (508 patients, or 48.87%). 20% of patients were hospitalized in medical hospitalization services, The main service in this group and from which came was the cardiology. patients came from surgical departments, i.e. 18.1% followed by the infectious diseases department. 29 patients came from pediatric departments, i.e. 1.8%. 20 patients from the maternity ward (gyneco-obstetrics), i.e. 1.3% only and 12% were hospitalized for surgical etiologies.

Mortality is 16.8%. Mortality factors: sepsis and disturbances of consciousness.

Discussion

Due to their status as chronic hemodialysis patients, our patients are subject to several infectious, hemorrhagic, neurological and vascular complications leading to their hospitalization. Their vital prognosis is mainly conditioned by the occurrence of neurological damage or septic shock.

Conclusion

the impact of chronic hemodialysis patients, hence the need for adequate preventive and therapeutic treatment, to improve intra-hospital mortality.