

中文題目：末期腎衰竭透析病人罹患急性胰臟炎的流行病學及預後：十年世代研究

英文題目：Epidemiology and outcome of acute pancreatitis in end-stage renal disease dialysis patients: a 10-year national cohort study

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Background: To determine whether dialysis modality is a risk factor for acute pancreatitis (AP) and to calculate the incidence and severity of AP in end-stage renal disease (ESRD) dialysis patient.

Methods: We analyzed data from the Taiwan National Health Insurance Research Database and included 67,078 ESRD patients who initiated dialysis between 1999 and 2007. The follow-up period was from the start of dialysis to death, end of dialysis, or December 31, 2008. Cox proportional hazards models were used to identify the related risk factors.

Results: The cumulative incidence rates of AP were 0.6%, 1.7%, 2.6%, 3.4%, and 4% at 1-, 3-, 5-, 7- and 9-year, respectively. The incidence of AP was 5.11 per 1,000-person years for those on hemodialysis (HD) and 5.86 per 1,000-person years for those on peritoneal dialysis (PD). Independent risk factors for AP on ESRD patient were elderly, being female, biliary stone, liver disease and on PD. Severe AP occurred in 44.9% of HD patients and in 36% of PD patients. Patients with AP on HD had a higher incidence of upper gastrointestinal bleeding and intensive care unit admission rate than did those on PD. In contrast, patients with AP on PD had a higher incidence of total parenteral nutrition use than did those on HD. The overall in-hospital mortality was 8.1%.

Conclusion: Patients on PD had a higher risk than patient on HD for AP attack, but patients on HD had much more severe AP rate than patient on PD