

## Hemoglobin Levels at a Standalone Dialysis Unit

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**Abstract :** Reduction in haemoglobin levels has been implicated to be a cause for reduced exercise tolerance and cardiovascular complications of chronic renal diseases. Trends of hemoglobin levels in patients on haemodialysis could be an indicator of efficacy of hemodialysis and an indicator of quality of life in haemodialysis patients. In the UAE, the rate of growth (of patients on dialysis) is 10 to 15 per cent per year. The primary mode of haemodialysis in the region is based on in-patient hospital-based hemodialysis units. The increase in risk of cardiovascular and cerebrovascular morbidity as well as mortality in pre-dialysis Chronic Renal Disease has been reported. However, data on the health burden on haemodialysis in standalone dialysis facilities is very scarce. This is mainly due to the paucity of ambulatory centres for haemodialysis in the region. AMSA is the first center to offer standalone dialysis in the UAE and a study over a one year period was performed. Patient data was analyzed using a questionnaire for 45 patients with an average of 2.5 dialysis sessions per week. All patients were on chronic haemodialysis as outpatients. The trends of haemoglobin levels as an independent variable were evaluated. These trends were interpreted in comparison with other parameters of renal function (creatinine, uric acid, blood pressure and ferritin). Trends indicate an increase in hemoglobin levels with increased supplementation of iron and erythropoietin over time. The adequacy of hemodialysis shows improvement concomitantly. This, in turn, correlates with better patient outcomes and has a direct impact on morbidity and mortality. This study is a pilot study and further studies are indicated so that objective parameters can be studied and validated for hemodialysis in the region.

**Keywords :** haemodialysis, haemoglobin in haemodialysis, haemodialysis parameters, erythropoietic agents in haemodialysis

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