

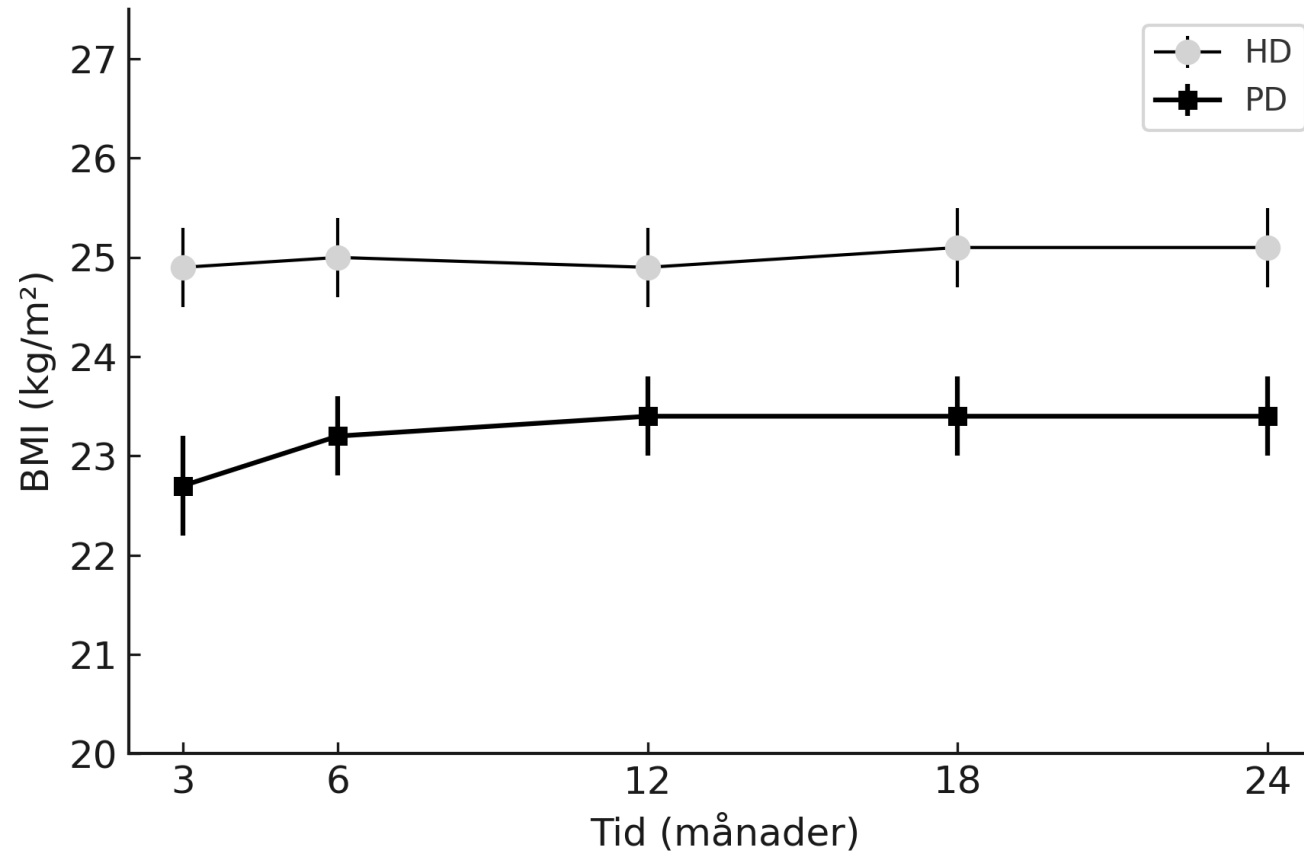


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Övervikt hos patienter med dialys

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Doktorand, Institution för Medicinska Vetenskaper

BMI utveckling efter dialysstart



Omarbetad från: Jager et al., *J Am Soc Nephrol* 2001;12(6):1272–1279

Relationship of body size and initial dialysis modality on subsequent transplantation, mortality and weight gain of ESRD patients

Hanna Lievense^{1,2}, Kamyar Kalantar-Zadeh^{1,3,4}, Lilia R. Lukowsky³, Miklos Z. Molnar^{3,5}, Uyen Duong³, Allen Nissenson⁶, Mahesh Krishnan⁶, Raymond Krediet² and Rajnish Mehrotra^{1,4}

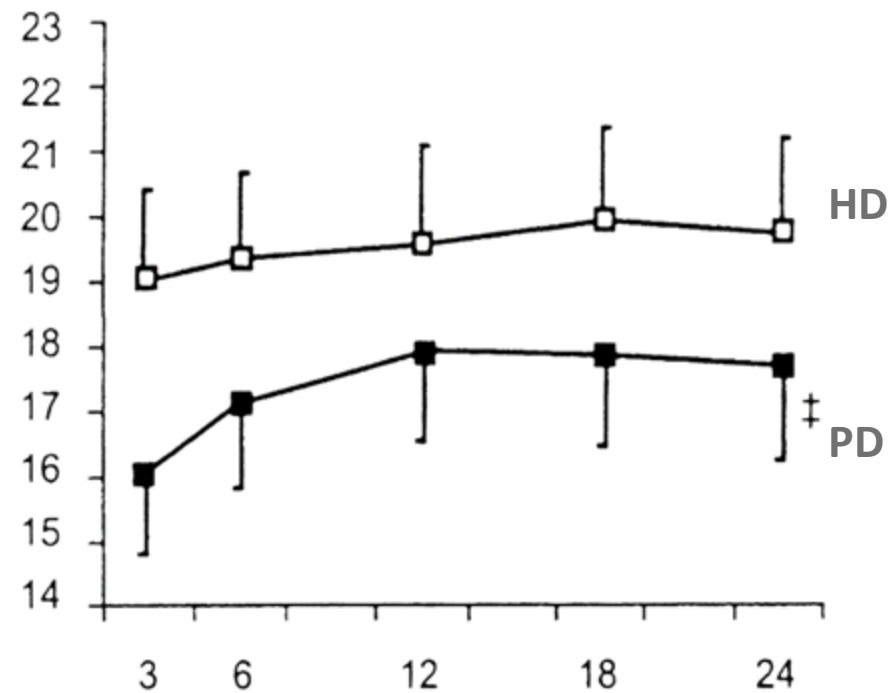
Table 5. Odds ratio of significant weight gain in PD patients (reference: incident HD patients)^a

Weight gain	PD		HD		Odds ratio (95% CI) (ref. HD)		
	<i>n</i>	%	<i>n</i>	%	Minimally adjusted	Case-mix adjusted	Case-mix and laboratory adjusted
Propensity score-matched cohort (687 pairs)							
>2%	170	25	211	31	0.74 (0.58–0.94)	0.73 (0.57–0.95)	0.69 (0.52–0.91)
>5%	115	17	150	22	0.71 (0.54–0.94)	0.70 (0.53–0.94)	0.63 (0.46–0.88)
>10%	51	7	82	12	0.61 (0.42–0.88)	0.61 (0.42–0.91)	0.58 (0.37–0.89)
Unmatched incident cohort (PD 687; HD 36 994)							
>2%	170	25	10 957	30	0.78 (0.66–0.93)	0.78 (0.65–0.93)	0.82 (0.69–0.99)
>5%	115	17	7322	20	0.82 (0.67–1.00)	0.83 (0.68–1.02)	0.88 (0.72–1.09)
>10%	51	7	3575	10	0.75 (0.57–1.00)	0.78 (0.58–1.04)	0.82 (0.61–1.10)

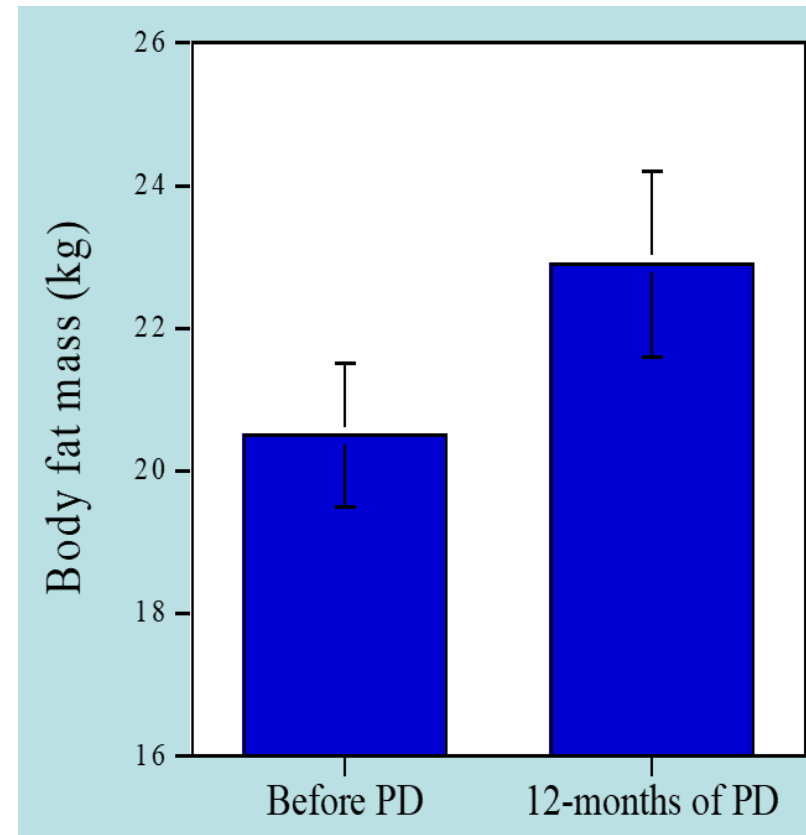


Fettmassa ökar efter dialysstart

Body fat (kg)



Jager et al. JASN 12:1272-9,2001

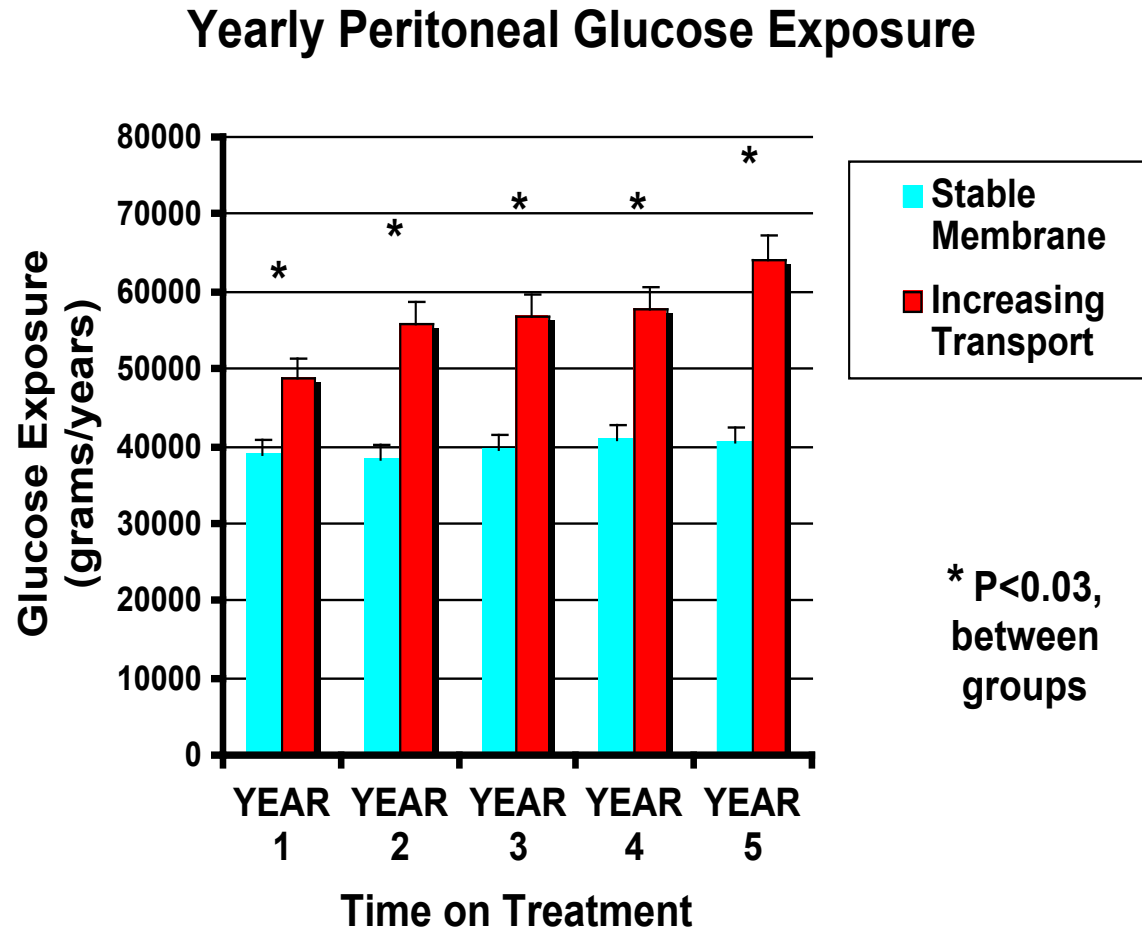


Stenvinkel et al. JASN 11:1303-9,2000



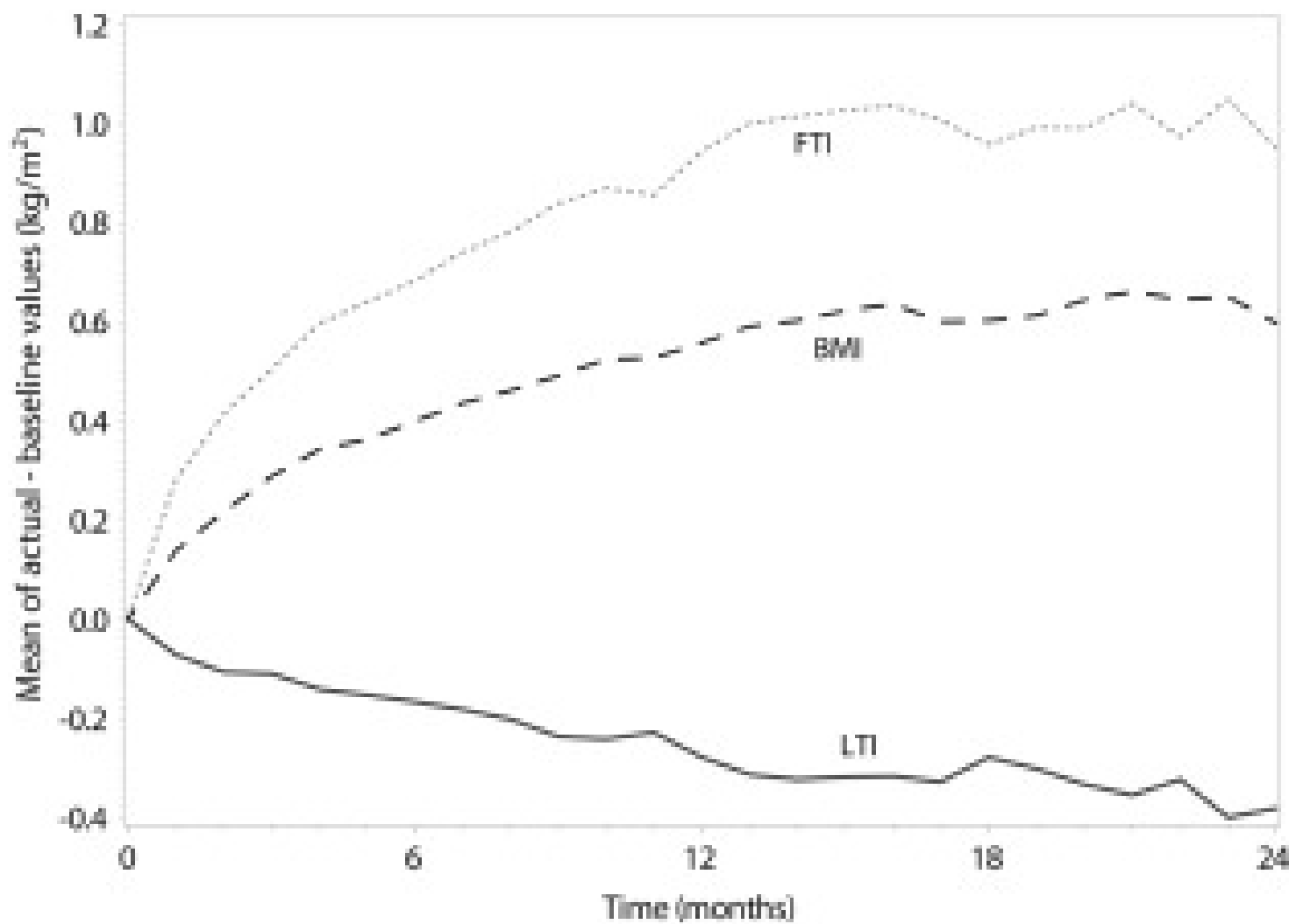
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PD patienter absorberar 40-65kg glukos/år



Davies et al, JASN 12:1046-51, 2001





FTI = fat tissue index

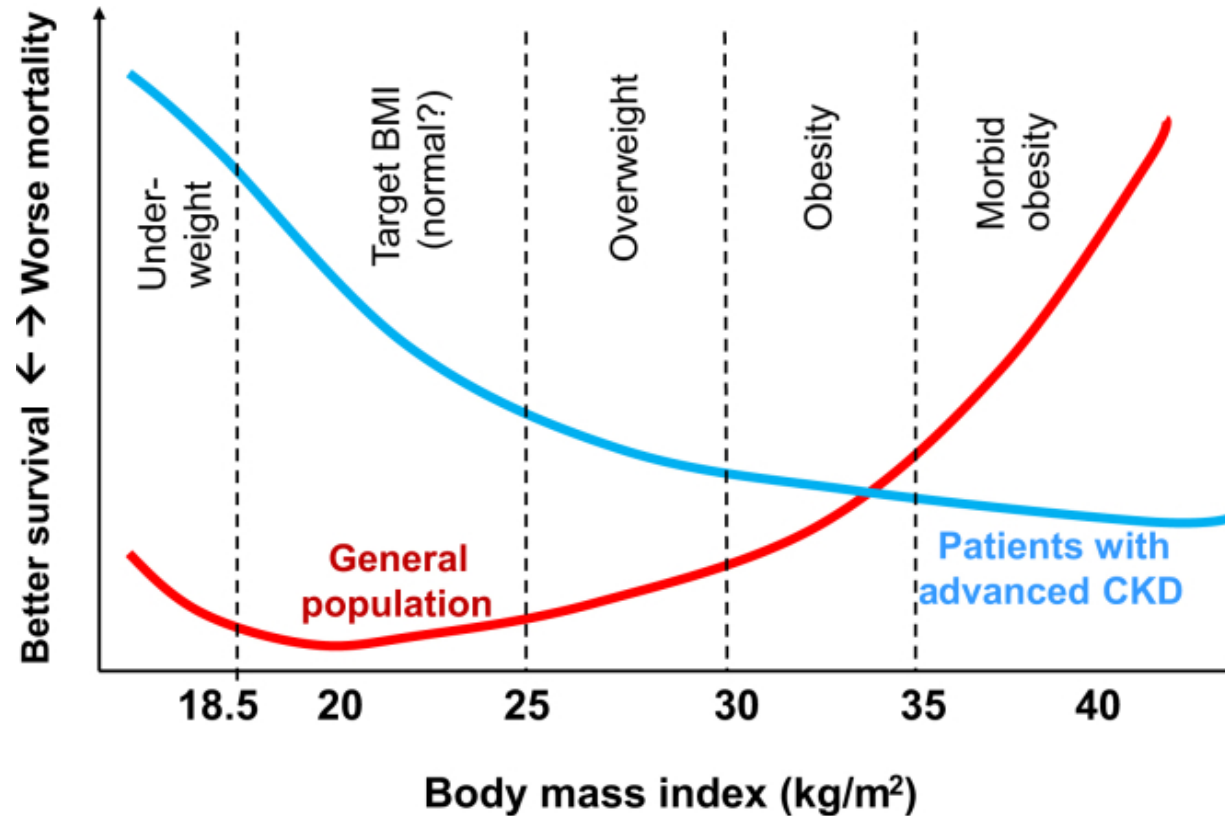
LTI = lean tissue index

Marcelli D, Brand K, Ponce P, et al. Longitudinal changes in body composition in patients after initiation of hemodialysis therapy: results from an international cohort. *J Ren Nutr.* 2016;26(2):72-80.



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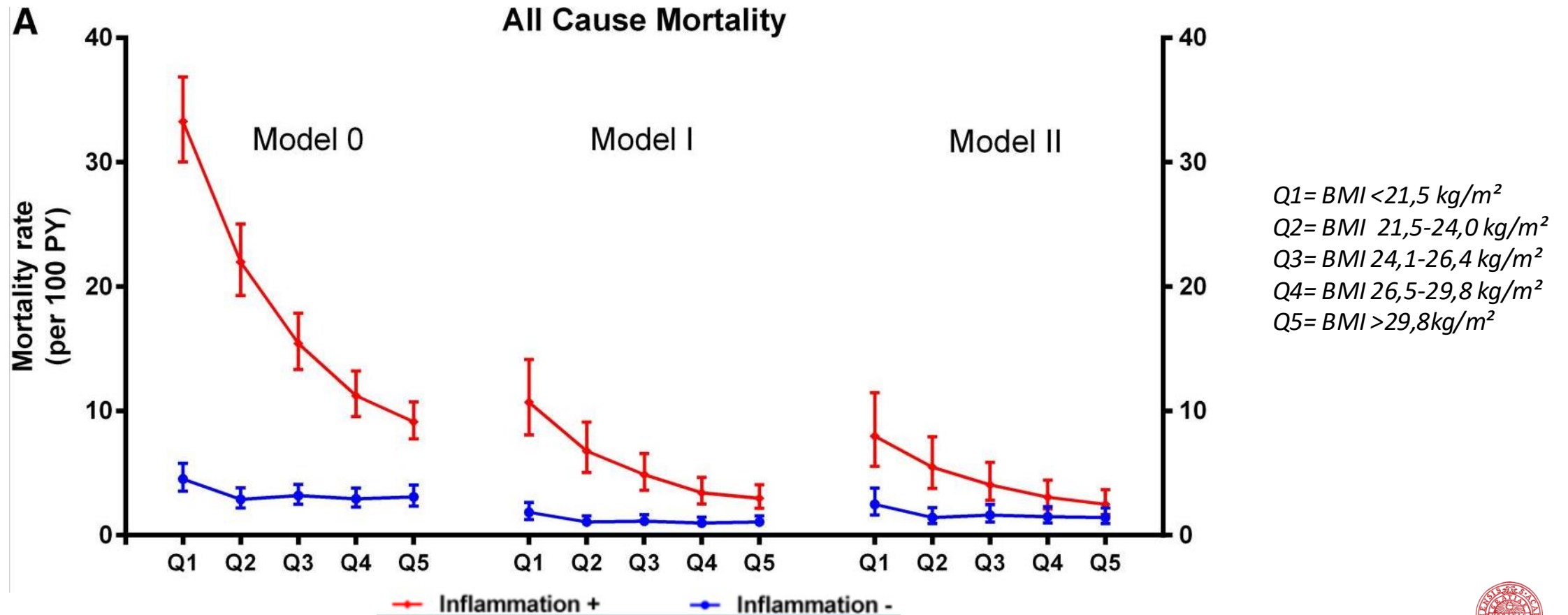
”Obesity paradox”



Kalantar-Zadeh et al. The Obesity Paradox in Kidney Disease: How to Reconcile it with Obesity Management. *Kidney Int Rep.* 2017;2(2):271-281.



Högt BMI minskar mortalitet bara vid kronisk inflammation



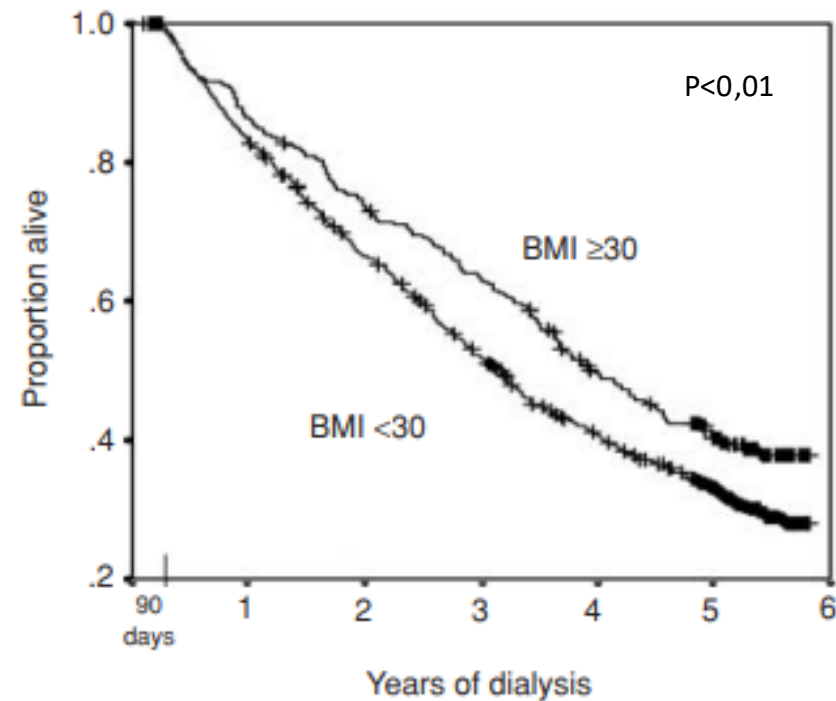
Stenvinkel P, Gillespie IA, Tunks J, et al. Inflammation Modifies the Paradoxical Association between Body Mass Index and Mortality in Hemodialysis Patients. *J Am Soc Nephrol.* 2016;27(5):1479-1486.



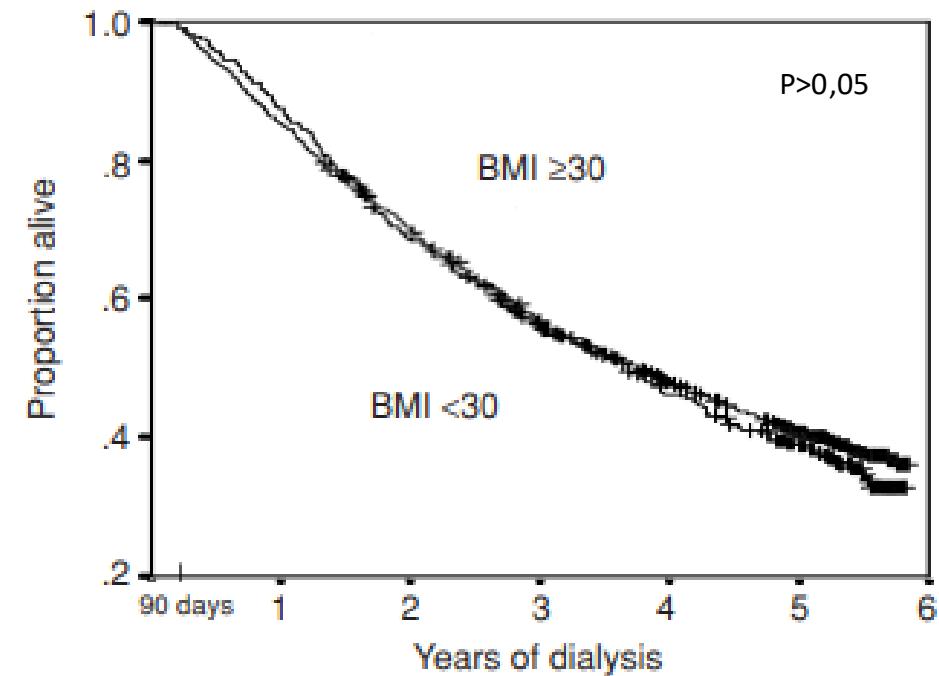
CLINICAL NEPHROLOGY – EPIDEMIOLOGY – CLINICAL TRIALS

Body mass index, dialysis modality, and survival: Analysis of the United States Renal Data System Dialysis Morbidity and Mortality Wave II Study

KEVIN C. ABBOTT, CHRISTOPHER W. GLANTON, FERNANDO C. TRESPALACIOS, DAVID K. OLIVER, MARIA I. ORTIZ, LAWRENCE Y. AGODOA, DAVID F. CRUESS, and PAUL L. KIMMEL



HD

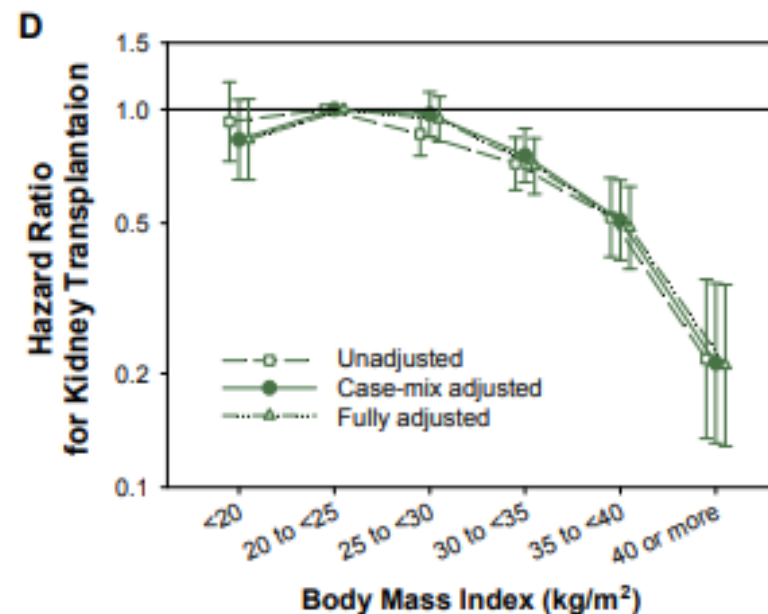
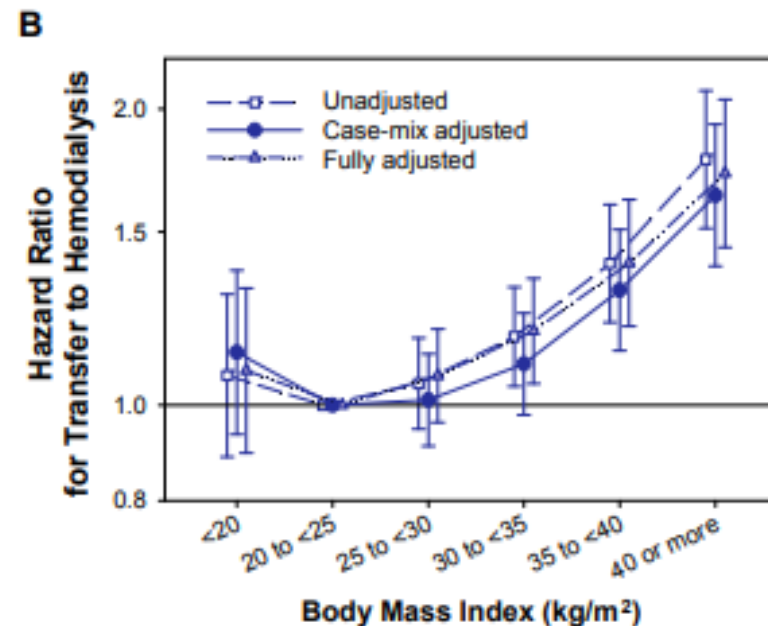
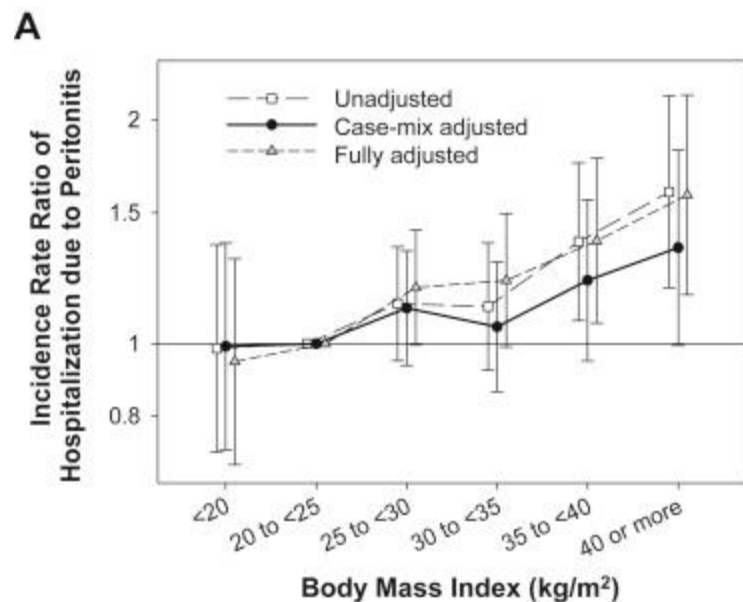


PD



Impact of Obesity on Modality Longevity, Residual Kidney Function, Peritonitis, and Survival Among Incident Peritoneal Dialysis Patients

Yoshitsugu Obi, Elani Streja, Rajnish Mehrotra, Matthew B. Rivara, Connie M. Rhee, Melissa Soohoo, Daniel L. Gillen, Wei-Ling Lau, Csaba P. Kovesdy, and Kamyar Kalantar-Zadeh



Icodextrin för PD patienter

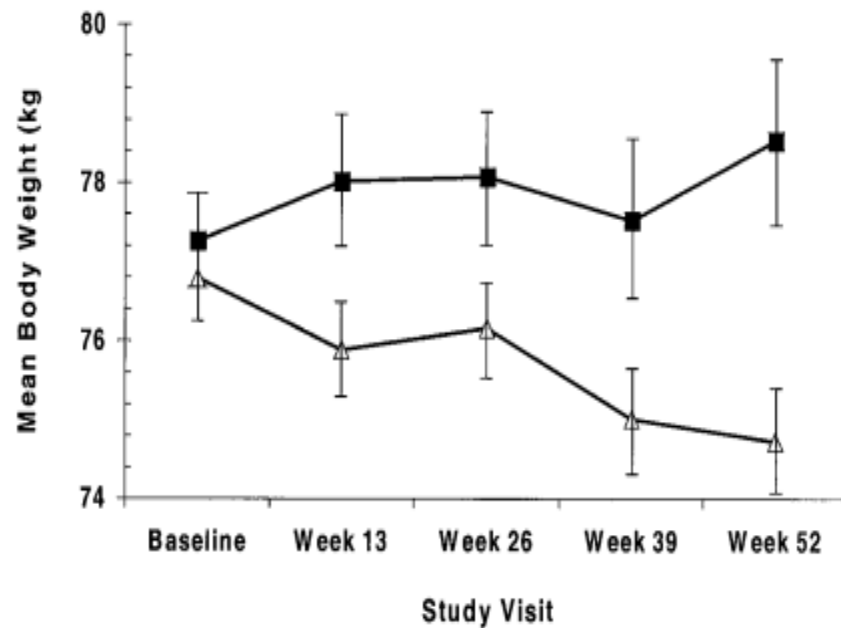
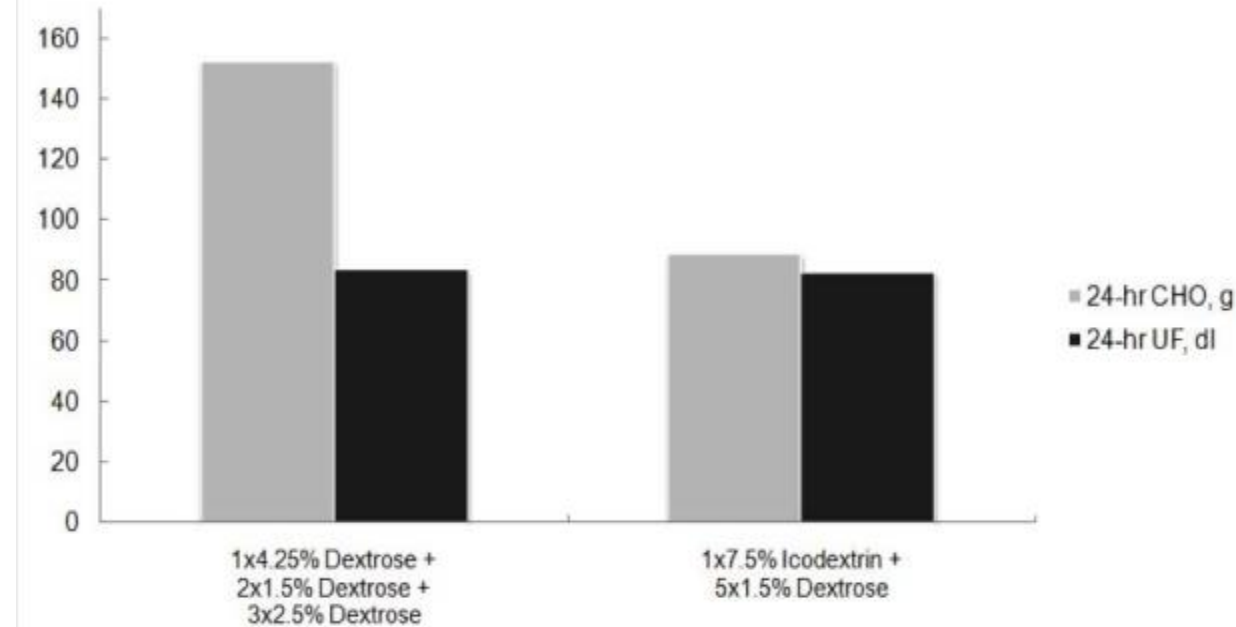


Fig 6. Adjusted body weight during the 52-week study. $P = 0.01$ and $P < 0.05$ at weeks 13 and 52 (based on treatment difference for change from baseline). ■, 2.5% dextrose; △, icodextrin.



• Wolfson M, et al. *Am J Kidney Dis.* 2002 Nov;40(5):1055-65.

• Holmes CJ. *J Diabetes Sci Technol.* 2009;3(6):1472-1480.





REVIEW

Glucagon-like peptide 1 receptor agonists in end-staged kidney disease and kidney transplantation: A narrative review

Kristin K. Clemens^{a,b,c,d,e,f,*}, Jaclyn Ernst^f, Tayyab Khan^{a,c}, Sonja Reichert^g, Mohammad Qasim Khan^h, Heather LaPier^c, Michael Chiuⁱ, Saverio Stranges^{b,f,g}, Gurleen Sahi^j, Fabio Castrillon-Ramirez^j, Louise Moist^{b,e,i} for the OK TRANSPLANT Investigators



EXCEPTIONAL CASE

Semaglutide for treatment of obesity in hemodialysis patients waiting for a kidney transplant: new hope?

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Clinical Kidney Journal, 2022, vol. 15, no. 9, 1782–1784
<https://doi.org/10.1093/ckj/sfac090>
Advance Access Publication Date: 7 April 2022
Exceptional Case

Received: 15 July 2024 | Revised: 30 August 2024 | Accepted: 7 September 2024
DOI: 10.1111/dom.15967

ORIGINAL ARTICLE

Semaglutide in patients with kidney failure and obesity undergoing dialysis and wishing to be transplanted: A prospective, observational, open-label study

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Sebastian Mussnig MD^{1,2} | Manfred Hecking PhD^{1,2,4}

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Sammanfattning

- Vikt och kroppssammansättning bör följas regelbundet
- Ökning av fettmassa är vanligt och glukosupptag vid PD bidrar till det
- Hög BMI kan ge överlevnadsfördel hos patienter med inflammation men har ofta nackdelar och kan minska möjlighet till njurtransplantation
- Vid övervikt ska man sträva efter balanserad energiintag, tillräckligt proteinintag och bevarad muskelmassa
- Behandling behöver individualiseras

