Careful preoperative patient assessment, optimal surgical techniques, and adequate postoperative care play an important role for the favorable outcome. The primary patency rate in male hemodialysis patients was significantly higher than in female patients” Tjang and Sumadi (2018).

Abstract:

Introduction: Clinical practice guidelines endorse the arteriovenous fistula as the preferred form of vascular access. Concerns have been raised regarding its high risk of primary failure. Its estimated primary patency rate varies in the literature. Since most of the current data are from Western countries and information from the developing countries is scarce, we aim to evaluate the primary patency rate of arteriovenous fistula created for hemodialysis patients in our hospital.

Methodology: We analyzed data from all patients undergoing the creation of arteriovenous fistula for hemodialysis at the PGI Hospital Cikini in Jakarta, Indonesia, from January to December 2015. Information needed was retrieved from the medical records. Actuarial patency rate was created by the Kaplan-Meier product-limit method. Differences between curves were compared by means of a log-rank test.

Results: A total of 253 arteriovenous fistula in the upper arm were created in patients
requiring hemodialysis. The overall 6-, 12-, and 18-month primary patency rates of arteriovenous fistula created for hemodialysis patients were 88%, 85%, and 79%, respectively. There was a difference in primary patency rate of arteriovenous fistula by gender. The 6- and 12-month primary patency rates of arteriovenous fistula created for male hemodialysis patients were 92% and 89%; the rates for female patients were 81% and 78%, respectively (P = .027).

Conclusions: Careful preoperative patient assessment, optimal surgical techniques, and adequate postoperative care play an important role for the favorable outcome. The primary patency rate in male hemodialysis patients was significantly higher than in female patients.

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