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Authors

Kalantar-Zadeh, K

Miller, LG

McAllister, CJ

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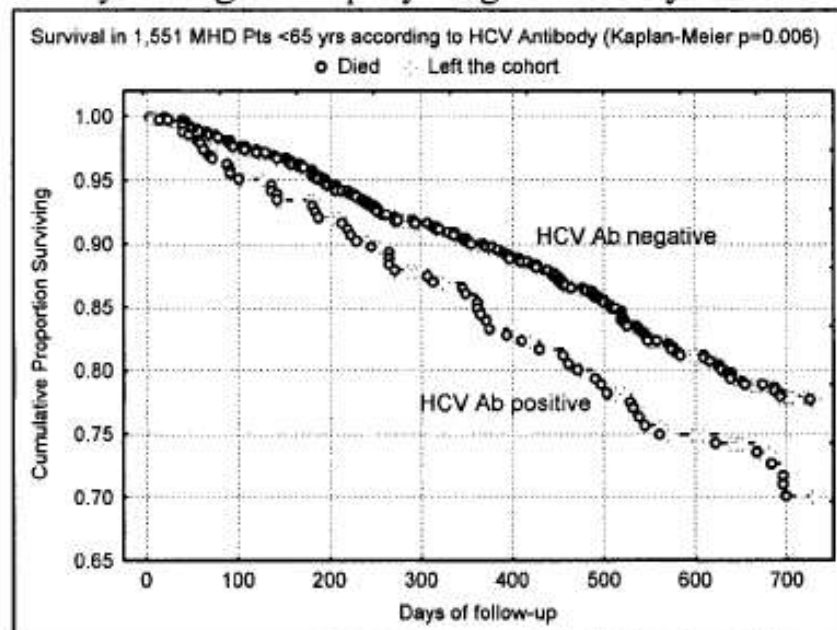
ASSOCIATION BETWEEN HEPATITIS C ANTIBODY POSITIVITY AND MORTALITY IN HEMODIALYSIS PATIENTS

Kamyar Kalantar-Zadeh¹, Loren G Miller², Charles J McAllister³.

¹Harbor-UCLA Divisions of Nephrology & ²Infectious Diseases, Torrance, CA; & ³DaVita, El Segundo, CA.

The relationship between hepatitis C virus (HCV) infection and mortality in maintenance hemodialysis (MHD) patients (pts) is not well characterized. We analyzed HCV infection, defined as a positive HCV Enzyme immunoassay (EIA) test, among 2,778 pts who underwent MHD for at least 3 months in DaVita, Inc, dialysis clinics across the USA in July 2001. In this cohort, 363 (13%) were HCV positive. In a multivariate logistic regression model adjusting for case-mix & available surrogates of malnutrition-inflammation complex syndrome (MICS), younger age, male gender, African-American race, Hispanic ethnicity & lower serum albumin were independent predictors of HCV infection. HCV positivity among MHD pts younger than 65 yrs was

associated with 40% to 80% higher hazard ratio of all-cause & cardiovascular death during the 2-yr follow-up even after adjustment for case-mix & MICS. In summary, we performed the largest analysis of mortality and



HCV infection, as diagnosed by EIA. Although a selection bias may exist in selecting pts for HCV screening, we found that among MHD pts younger than 65 yrs, HCV is associated with significantly higher death rates. HCV infection also has distinct racial & age predilections in this population. Interventions to reduce mortality in HCV infected MHD pts warrant further investigation.