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NCS Research announces results of Dialysis Anemia Trends Questionnaire

Lisle, IL, May 2, 2013. NCS Research, the leading research firm focused on the nephrology healthcare providers closest to the patients, finds the following key results, according to a recent NCS Research study, Dialysis Anemia Trends, of 175 US dialysis healthcare professionals:

Current Hb targets and Threshold for ESA Hold in US dialysis

- 30% of respondent facilities use a hemoglobin less than 10 g/dL as the lower range for target Hb
- 36% of respondent facilities use a hemoglobin greater than 11 g/dL as the upper range for target Hb
- 22% of respondent facilities hold ESA doses at hemoglobin levels of 11 g/dL or less

Frequency of Hb measurements and ESA titrations

- Within in-center dialysis, Hb is measured most frequently twice a month (58%), with 23% once a week and 19% once a month
- In home dialysis, Hb is measured most frequently once a month (72%)
- 88% of respondent facilities are titrating ESA at least once a month or more frequently, representing 1 or more titrations per patient per month

Evaluate beliefs about associations between Hb measurements, ESA titrations, Hb excursions, and total USA usage

- Only 14% and 15% of respondents believe that more frequent Hb measurements and more frequent ESA titrations respectively are associated with less frequent Hb excursions (Hb measurements that are outside of the target range)

Understand top issues and effective interventions for post-hospitalization anemia

- Top 3 issues identified with managing post-hospitalization anemia were “Hb Decline During Hospitalization”, “Lack of Continuity of Care”, and “Inadequate Dosing Strategy”
- Top 3 effective interventions identified were “Coordination of Care”, “Measure Hb Immediately Post-Hosp”, and “Boosting ESA Dose Post-Hospitalization”

"With the CMS bundle in place, an updated FDA label for ESAs, and continually shifting QIP measures, approaches to anemia management have also shifted with potential implications to the quality of care and management of patients on dialysis. The FDA label states that ESAs should be initiated at hemoglobin levels less than 10 g/dL and ESA

doses should be reduced or interrupted at hemoglobin levels approaching or exceeding 11 g/dL. However, 30% of respondent facilities are using a hemoglobin level less than 10 g/dL as the lower range for target Hb, and 36% are using a hemoglobin level greater than 11 g/dL as the upper range for target Hb. Furthermore, the current FDA label states ‘Avoid frequent dose adjustments’, but 88% of respondent facilities are making actual ESA dose adjustments on average for each patient once a month or more frequently. Additionally, only 15% of respondents believe that more frequent ESA titrations actually reduce Hb excursions. The combination of these two data points prompts the question, ‘Why are we titrating ESAs so frequently when we don’t believe it helps reduce Hb excursions?’” said Alex Yang MD, Director of Research. “These apparent disconnects between the guidelines and practice of dialysis anemia management may represent the internal struggle of health care professionals to do what they believe is right for the patient while still adhering to the shifting rules.”

The “Dialysis Anemia Trends” Questionnaire was fielded in February 2013 with 175 qualified respondents representing

- All dialysis organization segments (size and profit status)
- Dialysis facility settings (Free-standing and hospital)
- Dialysis modality (Home and in-center)
- Years of nephrology experience
- Degrees and backgrounds

The analyses described here are selected excerpts from the full report and are presented across all respondents. Other subgroup analyses such as by practice setting, dialysis modality, and size of dialysis organization are not presented. Customized analyses are available upon request. Slides can be found at

<http://www.nephrologynews.com/articles/109488-ncs-research-dialysis-anemia-trends-survey-shows-nephrologists-targeting-lower-hbs-titrating-frequently>

Upcoming topics from NCS Research include “Once-monthly ESA Launch”, “Technician Training and Certification”, “EHR/EMR”, and “Home Dialysis Modalities”.

About NCS Research

NCS Research is a subsidiary of Nephrology Clinical Solutions. NCS Research provides syndicated and custom primary market research to the NCS Research Council, providers, professional societies, patient groups, manufacturers, and the investment community. For information on NCS Research publications and research capabilities, go to

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