

## <sup>3<sup>rd</sup> International Conference and Exhibition on **BIOWAIVERS, BIOLOGICS & BIOSIMILARS**</sup>

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## Medication usage and nutritional status in hemodialysis

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The kidneys are involved in so many different bodily functions that it is impossible for dialysis to replace everything a L healthy kidney can do. By staying on the dialysis dietplus following fluid restrictions can help the dialysis treatments do a good job in removing wastes and keeping the body's water weight normal. Besides going for dialysis treatments and following the dialysis diet, there are medicines that help maintain a higher quality of health for a longer possible time. Such as erythropoietin injection, intravenous iron supplements, Hepatitis B and C vaccines, B complex supplements, folic acid supplements, Phosphate binders, Vitamin D supplements etc. Patients with ESRD undergoing dialysis have highly complex medication regimens and disproportionately higher total cost of care compared with the general Medicare population. As shown by several studies, dialysis-dependent patients are at especially high risk for medication-related problems. Keeping this in view, a study was conducted to see the medication usage and nutritional status in hemodialysis patients. The results showed that males (83.3%) were more prone to ESRD than female (16.7%). The predisposing factors for getting ESRD are hypertension (53.3%), diabetes (28.3%), CGN (16.7%), CIN (21.7%) and usage of analgesics (18.3%) etc; whereas occupation majority 80 percent of them were unemployed and income level such as low income group (50%), middle income group (38.3%) and high income group (11.7%). In the point of view of usage medication such as anti-hypertensive drugs (96.7%), erythropoietin injection (100%), vitamin D supplements (71.7%), vaccines (100%) and other medications (40%) such as intravenous iron supplements, phosphorous binders, B complex and folic acid supplements and oral iron supplements, antacids and analgesics etc. In the usage of medication fluctuation was seen due to more expense of the medications. That can't be bearable for low income and middle income patients. Even though the minimal usage of medications and with help of nutritional education result shown like Mean and SD of systolic blood pressure (143.15±15.025 mmHg) and diastolic blood pressure (86.3±6.529 mmHg) serum sodium levels (135.76±5.889 mEq/L), serum calcium (8.51±0.793 mg/dl) and hemoglobin levels (10.37±1.409 g/dl) near to normal and whereas 93 percent of them in mild malnourished. Even though these patients are maintaining their somehow good nutritional status with the help of nutritional education and minimal usage of medication within their economic status, if pharmacologist can focus on formulation of low cost biosimilar medications and make it available to market, this may help to maintain a higher quality of health.

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