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Mortality and quality of life in elderly patients on dialysis in New Zealand: Results from the dialysis outcomes in the >65 study (DOS65+)**Grace Pearson**

University of Bristol, UK

Background: New Zealand (NZ) and indeed the world, has a growing population of elderly patients with end-stage renal failure (ESRF) requiring dialysis. Physicians and patients making decisions around dialysis require information on the prognosis and quality of life (QoL) associated with all available options. However, there is limited evidence available on dialysis outcomes in the elderly, particularly QoL.

Methods: The dialysis outcomes in the >65 study (DOS65+) is a prospective longitudinal cohort study of patients >65 with ESRF. This is a cross-sectional analysis of mortality and QoL outcomes at baseline and two years.

Results: We found that neither mortality nor QoL vary with dialysis vintage, modality or location of treatment, whereas high burdens of co-morbidities and ESRF-related symptoms were associated with reduced QoL. Increasing age was found to be associated with mortality; however, there was no correlation between age and QoL on dialysis. Contrary to previous studies on other diseases, we have shown no significant differences in mortality or QoL in ESRF between the various ethnicities in NZ. Interestingly, socioeconomic factors including living with others, family involvement and sense of community contribute significantly to QoL in our patients, and lack of family involvement was also significantly related to mortality.

Conclusions: Our findings are consistent with the growing body of evidence around dialysis outcomes in the elderly, highlighting several key variables contributing to survival and QoL on dialysis which should be considered by doctors and patients when making decisions about the management of ESRF.

gp1321@my.bristol.ac.uk