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The impact of individualized moxibustion scheme on malnutrition state in patients with maintenance hemodialysis

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Moxibustion, using moxa made from dried mugwort (Artemisia argyi) is one of China's most ancient therapies as old as acupuncture. Traditional moxibustion is not suitable for the environmental requirement of blood purification center because of the strong smoke, so we chose the non-smoking moxibustion therapy instrument with a paper-tube (produced by Taizhou City Moxibustion Therapy Technique Institute in Jiangsu Province, appliance ID: 2003.1270052). Since 2005, we carried out a series studies of the effectiveness of moxibustion on intervening complications of maintenance of hemodialysis patients. A newly prospective, multicenter, parallel randomized controlled method study was supported by Beijing Traditional Chinese Medicine Science and Technology project (No.JJ2013-64) and China Academy of Traditional Chinese Medicine research projects (N0.ZZ070863). And the result shows that in improving the SGA score, triceps skinfold thickness, body mass index and percentage of body fat, individualized moxibustion scheme is more effective than fixed point scheme and conventional western medicine treatment. Based on the above, we are going to do a further study of the effect mechanisms of moxibustion in intervening carnitine metabolic in hemodialysis patients, and this project has been supported by Dr. Innovation Fund from China Academy of Traditional Chinese Medicine.

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Rapid assessment of renal function status: Comparison of modification of diet in renal disease (MDRD) GFR prediction equation and Gates method

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Background: Glomerular filtration rate (GFR) prediction equations based on serum creatinine are widely used in clinical practice for quick assessment of kidney function. Though limitations of prediction equations are well known, they are widely used because of their simplicity and results are obtained in few minutes. Radionuclide techniques, using the gamma camera based 'Gates Method' can also perform a quick assessment of GFR and hence may potentially be used as an alternative to prediction equations.

Aim: Aim of the study was to compare Gates method and MDRD equation in a sizeable patient population with wide range of renal function to evaluate their clinical utility considering reference clearance technique as gold standard.

Methods: GFR was estimated in 671 subjects with wide range of renal function by gates method, and MDRD equation and results were compared against 'Measured GFR' obtained by measuring the clearance of Tc99m-DTPA by multiple plasma sample method. Subjects were divided in to 4 groups (0-30 ml, 31-60 ml, 61-90 ml, >90 ml) on the basis of measured GFR and comparison between two methods done through linear regression analysis.

Results: Analysis of correlation between 'Measured GFR' and Gates method indicated 54.5% correlation with the measured GFR for the GFR range of 0-30 ml, and correlation went down to 38.4% in the GFR range of 31-60 ml, 40% in the GFR range of 61-90 ml, 25.4% in the GFR range of >90 ml. The corresponding figure for MDRD GFR was 49.7%, 32.4%, 19.2% and 16.1%, respectively. Regression analysis showed that both gates method and MDRD equation overestimated GFR at lower range of renal function and underestimated at higher range of renal function.

Conclusion: Gates method is more precise for GFR estimation at all levels of renal function and may be considered as a viable alternative to GFR prediction equation wherever facility exists.

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