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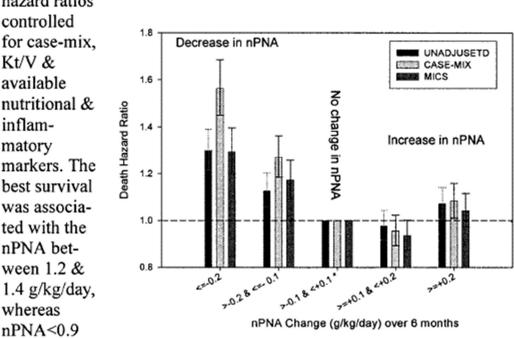
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ASSOCIATION BETWEEN CHANGES IN UREA KINETIC BASED PROTEIN INTAKE OVER TIME AND MORTALITY IN HEMODIALYSIS PATIENTS Chris S Shinaberger^{1,2}, Ryan D Kilpatrick¹, Charles J McAllister³, Joel D Kopple¹, and Kamyar Kalantar-Zadeh¹. Harbor-UCLA, Torrance, CA; UCLA Epidemiology, Los Angeles, CA; DaVita, El Segundo, CA.

Protein-energy malnutrition may be associated with high death rates in maintenance hemodialysis (MHD) patients (pts). Whether changes in protein intake over time have significant & independent associations with death in MHD pts is not clear. We examined the relation between urea kinetic based normalized protein nitrogen appearance (nPNA or nPCR) & mortality in time-dependent multivariate models in a 2-yr cohort of 53,933 MHD pts from virtually all DaVita dialysis units in the USA. Time-dependent Cox models were explored to estimate death hazard ratios



or >1.4 g/kg/day linked to higher mortality. A decrease in protein intake over the first 6 months of the cohort was associated with higher mortality rate in the subsequent 18 months, A moderate (0.1 to 0.2 g/kg/day), but not a high (≥0.2), increase in nPNA tended to correlate with greater survival (Figure). Hence, a reversed J-shaped association between nPNA & death exists in MHD pts, & a fall in protein intake over time heralds increased subsequent risk of death rate in these pts.