

Intradialytic hypotension tied to peripheral artery disease

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More frequent intradialytic hypotension (IDH) during hemodialysis is

associated with a higher incidence of subsequent peripheral artery disease (PAD) diagnosis, according to a study published online Dec. 11 in the *American Journal of Kidney Diseases*.

Eun Young Seong, M.D., Ph.D., from the Pusan National University School of Medicine in Busan, South Korea, and colleagues used [data](#) linked from the U.S. Renal Data System to the electronic health records of a large dialysis provider to identify 45,591 [adult patients](#) with Medicare Parts A and B who initiated dialysis (2006 to 2011) without previously recognized PAD. Associations between IDH and newly diagnosed PAD were evaluated.

The researchers found that patients with more frequent baseline IDH had a higher prevalence of cardiovascular diseases. Newly recognized PAD was identified in 7,886 patients during 61,725 person-years of follow-up. There was a graded, direct association observed between IDH and newly recognized PAD; IDH in ≥ 30 percent of dialysis sessions during a 30-day interval was associated with a 24 percent higher risk for newly recognized PAD in the subsequent 30 days compared with patients with no sessions with IDH.

"Our results suggest that patients with more frequent IDH warrant careful examination for PAD such as foot examinations or other diagnostic evaluations," the authors write.

Two authors disclosed financial ties to the [pharmaceutical industry](#).

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