Prevalence and In-Hospital Outcomes of Uremic and Dialysis Pericarditis: A United States National Study

Srikanth Yandrapalli

Zeeshan Solangi
New York Medical College, zeeshan_solangi@nymc.edu

Wilbert S. Aronow
New York Medical College

Sachin Sule
New York Medical College

Howard A. Cooper
New York Medical College

See next page for additional authors

Follow this and additional works at: https://touroscholar.touro.edu/nymc_fac_posters

Part of the Analytical, Diagnostic and Therapeutic Techniques and Equipment Commons

Recommended Citation

This Poster is brought to you for free and open access by the Faculty at Touro Scholar. It has been accepted for inclusion in NYMC Faculty Posters by an authorized administrator of Touro Scholar. For more information, please contact touro.scholar@touro.edu.
Authors
Srikanth Yandrapalli, Zeeshan Solangi, Wilbert S. Aronow, Sachin Sule, Howard A. Cooper, and Savneek Chugh
Prevalence and In-hospital outcomes of Uremic and Dialysis Pericarditis: A United States National Study

New York Medical College at Westchester Medical Center, Valhalla, New York.

Results

- A total of 13,003 hospitalizations (mean patient age 55 ± 18 years, 41.4% female) were identified with diagnoses suggestive of UDP.
- From 2003 to 2012, the prevalence of UDP increased from 13.5 to 47.1 per 1 million hospitalizations ($P_{\text{trend}} < 0.005$).
- ESRD was present in 8,852 (68.1%) of these cases, followed by AKI in 4,925 (37.9%) cases.
- A total of 9,650 (74.2%) cases received hemodialysis and 492 (3.8%) received peritoneal dialysis during the hospitalization.
- All-cause inpatient mortality was 6.4%, a decreasing trend from 17.03% in 2003 to 4.43% in 2012 ($P_{\text{trend}} < 0.005$).
- Median length of stay was 7 days, and median total hospital charges were US$ 48,673.

<table>
<thead>
<tr>
<th></th>
<th>2003</th>
<th>2012</th>
<th>$P &lt; 0.005$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevalence of UDP</td>
<td>13.5</td>
<td>47.1</td>
<td></td>
</tr>
<tr>
<td>(per 1 million</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hospitalizations)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All-cause inpatient</td>
<td>17.03</td>
<td>4.43</td>
<td></td>
</tr>
<tr>
<td>mortality</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Conclusion

- Pericardial procedures were performed in 16.8% of cases, including pericardiocentesis (9.5%), pericardiotomy (8.6%), pericardial biopsy (2.3%), and pericardiectomy (0.7%).
- Procedure rates were similar for patients with and without ESRD.
- Between 2003 and 2012, the prevalence of UDP among all hospitalizations in the United States increased, while the in-hospital mortality rate decreased.
- Pericardial procedures were common in UDP patients, with almost one-sixth of the cases having a pericardial procedure.

Disclosures

- None of the authors have any relevant disclosures.

Presented at ACC Scientific Sessions 03/2017, Washington D.C.