

透析病人中，有高的肝膿瘍的發生率與死亡率

High incidence of liver abscess and in-hospital mortality in end-stage renal disease dialysis patients

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Background: The precise incidence rates and morality of liver abscess in end-stage renal disease (ESRD) dialysis patients remains uncertain. To determine the incidence rates and mortality of liver abscess in ESRD dialysis patients.

Materials and Methods: We examined adult ESRD patients who initiated dialysis between 2000 and 2006. Patients were followed from start dialysis to liver abscess, death, transplant, dialysis withdrawal, or 31 December 2008. The incidence of newly diagnosed liver abscess was expressed as the number of case of liver abscess per 100,000 person-years. The cumulative proportion of patients with liver abscess and of survivors after liver abscess were calculated using the Kaplan-Meier method. Cox proportional hazards models were used to identify the risk factors of liver abscess and mortality after liver abscess. Hazard ratios (HRs) and 95% confidence intervals (CIs) were derived from Cox proportional hazards models. To adjust for potential confounding in the relationship between comorbidities, multivariate analyses were used. Significance was set at $p < 0.05$.

Results: A total of 53,249 incident dialysis patients were examined in this study and liver abscess was diagnosed in 447 patients during follow-up period (224/100,000 person-years). The cumulative incidence rate of liver abscess was 0.3% at one year, 1.1% at five years, and 1.5% at seven years. Elderly patients and patients on peritoneal dialysis had a higher rate of liver abscess. Having some baseline comorbidities (diabetes mellitus, polycystic kidney disease, malignancy, chronic liver disease, biliary tract disease, and alcoholism) was predictor of liver abscess. Overall in-hospital mortality was 10.1%. The cumulative survival rate after liver abscess was 68% at one year, 53.1% at three year, and only 44.9 % at five years. Diabetes mellitus and chronic liver disease were independent predictors of mortality.

Conclusion: The incidence of liver abscess and in-hospital mortality is high in ESRD dialysis patients. Besides well known risk factors of liver abscess, receiving peritoneal dialysis and polycystic kidney disease are also important risk factors in ESRD dialysis patients.br