

Therapeutic Apheresis and Dialysis 13(6):457–504 doi: 10.1111/j.1744-9987.2009.00789.x © 2009 The Authors Journal compilation © 2009 International Society for Apheresis

## An Overview of Regular Dialysis Treatment in Japan (As of 31 December 2007)

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**Abstract:** A nationwide statistical survey of 4098 dialysis facilities was conducted at the end of 2007, and 4052 facilities (98.88%) participated. The number of patients undergoing dialysis at the end of 2007 was determined to be 275 242, an increase of 10 769 patients (4.1%) compared with that at the end of 2006. The number of dialysis patients per million at the end of 2007 was 2154. The crude death rate of dialysis patients at the end of 2007 from the end of 2006 was 9.4%. The mean age of new patients begun on dialysis was 66.8 years and the mean age of the entire dialysis patient population was 64.9 years. For the primary diseases of new patients begun on dialysis, the percentages of patients with diabetic nephropathy and chronic glomerulonephritis were 43.4% and 23.8%, respectively. The percentages of facilities that achieved the control standard of endotoxin concentration in the dialysate solution of <0.05 EU/mL and those that achieved a bacterial count of <100 cfu/mL in the dialysate solution, as specified by the Japanese Society for Dialysis Therapy, were 93.6% and

97.4%, respectively. The percentage of patients positive for the hepatitis C virus antibody among the entire dialysis population significantly decreased from 15.95% at the end of 1999 to 9.83% at the end of 2007. The mean hemoglobin concentration in all the dialysis patients at the end of 2007 was 10.27 (±1.32, SD) g/dL, which has scarcely changed over the last three years. The numbers of male and female patients with a history of hip fracture were 142.9 and 339.0 per 10 000 dialysis patients, respectively, showing an extremely high prevalence among female patients. A history of hip fracture correlates with a low body mass index, serum albumin concentration, and a history of diabetes. The serum creatinine level of patients upon introduction to dialysis was 8.34 ( $\pm$ 3.55) mg/dL, and the estimated glomerular filtration rate was 5.43 (±3.43) mL/min/1.73 m<sup>2</sup> for the patients who were newly begun on dialysis in 2007. Key Words: Clinical condition, Dialysis patient population, Endotoxin concentration, History of fracture, Survey, Survival rate.

The Japanese Society for Dialysis Therapy has been conducting a yearly statistical survey of dialysis facilities across the country since 1968. A nation-wide statistical survey of 4098 dialysis facilities was conducted at the end of 2007, and 4052 facilities (98.88%) responded. The number of patients under-

going dialysis at the end of 2007 determined on the basis of the survey results from dialysis facilities was 275 242, an increase of 10 769 patients (4.1%) from the number in 2006. The crude death rate of dialysis patients in 2007 was 9.4%, which is not significantly different from those over the last 10 years (1).

In the first part of this report, we summarize basic data on chronic dialysis patients in Japan at the end of 2007; in the second part, we summarize data obtained from the same survey on the following items: the current status of dialysate solution quality control, hepatitis virus infection, and renal anemia therapy; the patient history of hip fracture; and the clinical conditions of patients at the introduction of

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dialysis. Among them, the history of hip fracture has never been surveyed and is a new survey item.

We used the survey data that were available when this report was being prepared (in November 2008); therefore, the values tabulated in this report are slightly different from those reported in "An Overview of Regular Dialysis in Japan (As of 31 December 2007)" (2), which was published as a rapid report in June 2008.

#### **METHODS**

This survey is conducted every year by sending questionnaires to target dialysis facilities. The 4098 facilities surveyed in this study consisted of the member facilities of the Japanese Society for Dialysis Therapy as of 31 December 2007, and additional nonmember facilities offering dialysis for patients with chronic kidney diseases. The number of facilities in the present survey increased by 47 (1.2%) from that in the preceding year's survey. The questionnaires were mainly sent and collected by mail; some were also faxed. Moreover, a floppy disk instead of the paper questionnaire was sent to the facilities that had earlier indicated a preference for it.

This survey consisted of two types. One was a facility survey, in which items related to the details of dialysis facilities, such as the number of patients, staff members, and patient stations at individual facilities, were investigated (using the questionnaire referred to as "sheet I"). The other was a patient survey, in which the epidemiological background, treatment conditions, and outcome of treatment of individual dialysis patients were investigated (using the questionnaires referred to as "sheets II, III, and IV").

The collection rate of the questionnaire (sheet I) at the end of 2007 was 98.88% (4052 facilities), which was higher than that for the 2006 survey (98.37%). The number of facilities from which both questionnaires (i.e. facility survey and patient survey) were collected was 3899 facilities (95.14%), which was also higher than that in the 2006 survey (93.98%). In addition, the number of facilities that responded via an electronic file on a floppy disk was 2935 facilities (75.28%), an increase of at least 6% from the 2006 survey.

## I. Tabulation of basic data on chronic dialysis patients at the end of 2007

Data on the dialysis patient population dynamics for the year 2007 were tabulated mainly on the basis of the results of the facility survey. The data included the number of new patients begun on dialysis, the number of patients who died, the crude death rate for the year 2007, and the total number of dialysis

patients at the end of 2007. The cumulative survival rate after introduction to dialysis was calculated using a life table method (2).

#### II. Tabulation of data on new items surveyed

The following items were investigated with the survey on the dialysis patient population dynamics: the current status of dialysate solution quality control, hepatitis virus infection, and renal anemia therapy; the history of hip fracture; and the clinical conditions of patients at introduction to dialysis.

#### **RESULTS AND DISCUSSION**

## I. Tabulation of basic data on chronic dialysis patients at the end of 2007

#### 1. Number of patients

Table 1 shows a summary of the dynamics of the dialysis patient population in Japan at the end of 2007 obtained from the present survey. Only the data on the durations of dialysis and the longest dialysis shown in this table were obtained from the patient survey, whereas the totals of other parameters were obtained from the facility survey.

The total number of dialysis patients in Japan at the end of 2007 was 275 242, as determined from the facility survey. The number of dialysis patients in Japan at the end of 2006 was 264 473, showing an increase of 4.1% (10 769 patients) from the end of 2006 to the end of 2007.

In the 2006 report, the change in the rate of annual increase in the number of dialysis patients at the end of each year (hereafter, the rate of annual increase in the dialysis patient population) was shown in a graph, and it was pointed out that the rate may reach 0% by around 2014. The rate shown in the 2006 report was calculated using the following equation:

Rate of annual increase in the dialysis patient population (%) = (Dialysis patient population at the end of the target year – Dialysis patient population at the end of the previous year) ÷ Dialysis patient population at the end of the previous year (%)

The dialysis patient population at the end of each year, the denominator of the above equation, increases every year by the difference in the patient population between the target and previous years; therefore, the rate of annual increase in the dialysis patient population decreases even if the annual increase in the number of dialysis patients is constant because the dialysis patient population, which is the denominator of the equation, increases every year. If

Number of facilities 4.052 Increase of 67 (1.7%) Equipment Number of patient station 108 583 Increase of 4201 (4.0%) Increase of 3893 (3.8%) Capacity Simultaneous dialysis (patients) 107 466 364 286 Maximum accommodation capacity (patients) Increase of 13 343 (3.8%) Chronic dialysis patients 275 242 Increase of 10 769 (4.1%) Daytime dialysis 223 953 (81.4%)41 742 (15.2%)Nighttime dialysis Home dialysis 187 (0.1%)Peritoneal dialysis 9 362 (3.4%)Increase of 84.3 Patients (per million) 2 154.2 Number of patients newly introduced to dialysis Increase of 561 (1.5%) 36 934 25 253 Increase of 1219 (5.1%) Number of deceased patients Duration of dialysis<sup>‡</sup> (years) Male Female Unknown Total 0-483 516 47 173 130 708 (49.4%)19 5\_9 66 076 40 371 25 704 (25.0%)10-14 18 803 13 467 0 32 270 (12.2%)15-19 9 108 7 364 0 16 472 (6.2%)20-24 5 241 4 362 0 9 603 (3.6%)9 227 ≥25 5 184 4 042 1 (3.5%)162 223 Total 102 112 21 264 356 (100.0%)

**TABLE 1.** Current status of chronic dialysis therapy in Japan (as of 31 December 2007)

<sup>†</sup>The total number of chronic dialysis patients is the total of the column for the number of patients in sheet I, and does not necessarily agree with the total number of patients counted according to the method of treatment. <sup>‡</sup>The number of dialysis patients was calculated from questionnaire sheets II to IV.

39 years, 8 months

this is correct, the rate of annual increase approaches 0% with increasing dialysis patient population; however, it will never reach 0%.

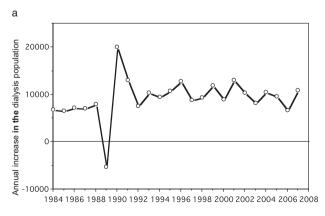
Longest dialysis history

To demonstrate the above prediction, the increases in the dialysis patient population at the end of each year were calculated. The annual trend is shown in Figure 1a. The annual increase in the dialysis patient population is approximately 10 000, and has tended to decrease over the past 10 years; however, it would still take a long time for the rate of annual increase in the dialysis patient population to reach 0%.

An estimated trend in the annual increase in the number of new patients begun on dialysis (hereafter, the annual increase in the number of new patients) is shown in Figure 1b. The annual increase in the

number of new patients is approximately 1000, similarly showing a decreasing trend over the past 10 years.

The number of facilities that responded to the questionnaire at the end of 2007 was 4052, which increased by 67 (1.7%) from the previous year. The number of patient stations at the end of 2007 was 108 583, which increased by 4201 (4.0%) from the previous year. The rates of increase in the number of patient stations and dialysis patients were higher than that in the number of dialysis facilities. This finding indicates that the number of patients treated at one facility has been increasing. The total number of patients who can simultaneously receive dialysis was 107 466, and the maximum capacity of all the



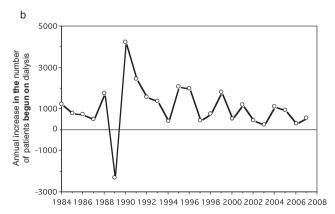


FIG. 1. Changes in the annual increase in (a) the dialysis population, and (b) the number of patients begun on dialysis.

facilities to provide dialysis was 364 286; both numbers increased in 2007.

The percentage of patients who received dialysis during the daytime further increased to 81.4%, whereas those receiving it during the nighttime decreased to 15.2%. The trends of the increasing number of daytime dialysis patients and the decreasing number of nighttime dialysis patients were the same as those in the 2006 survey.

The longest dialysis duration was 39 years and 8 months. The longest dialysis durations in the past 10 years were 31 years at the end of 1997, 32 years at the end of 1998, 33 years at the end of 1999, 34 years at the end of 2000, 35 years and 10 months at the end of 2001, 36 years and 8 months at the end of 2002, 37 years and 6 months at the end of 2003, 37 years and 3 months at the end of 2004, 38 years at the end of 2005, 39 years at the end of 2006, and 39 years and 8 months at the end of 2007. Thus, the longest dialysis duration has increased by approximately one year every survey up to the end of 2003, but the rate of increase in the longest dialysis duration has decreased since 2004. These long-term dialysis patients were begun on dialysis in the early stage of dialysis therapy in Japan; therefore, the abovedescribed finding may indicate that 40 years have passed since these patients were begun on dialysis during this early stage of dialysis therapy and many of them have died of old age.

Table 2 shows the total number of dialysis patients in each prefecture of Japan determined from the facility survey. The number of dialysis patients per million at the end of 2007 was 2154.2 (Table 1). Table 3 shows changes in the number of dialysis patients per million.

#### 2. Mean age

The dialysis patient population in Japan is aging yearly. The patient survey showed that the mean age of new patients begun on dialysis in 2007 was 66.8 years ( $\pm 13.3$ , SD, here and throughout), and the mean age of the entire dialysis patient population in 2007 was 64.9 years ( $\pm 12.7$ ) (Table 4). The dialysis patient population aged by 7.2 years from the end of 1987 to the end of 1997, but aged by 5.6 years from the end of 1997 to the end of 2007. Thus, the rate of aging of the dialysis patient population has decreased. Similarly, the mean age of new patients begun on dialysis increased by 6.3 years from the end of 1987 to the end of 1997, but increased by only 4.6 years from the end of 1997 to the end of 2007. These findings show that the rate of aging of new patients begun on dialysis has also decreased.

Table 5 shows the gender and age distributions of new patients begun on dialysis in 2007. Table 6 shows the gender and age distributions of all dialysis patients in 2007. Tables 7 and 8 show the age distribution according to the primary disease. The data in these tables were obtained from the patient survey.

# 3. Primary disease of new patients begun on dialysis Table 7 shows a summary of the primary diseases of new patients begun on dialysis in 2007. Table 8 shows a summary of the primary diseases of all the patients at the end of 2007.

Table 9 shows changes in the percentage of patients according to the main primary disease of renal failure for the new patients begun on dialysis each year. Since 1983, when the patient survey was first conducted, the number of new patients with diabetic nephropathy as the primary disease has continuously increased. In 1998 the number of patients with diabetic nephropathy as the primary disease became the highest among the new patients begun on dialysis, instead of the former top primary disease, chronic glomerulonephritis, and has been continuously increasing. Among the new patients begun on dialysis in 2007, the numbers of patients with diabetic nephropathy and those with chronic glomerulonephritis as the primary diseases were 43.4% and 23.8%, respectively. The number of patients with an "unspecified" primary disease newly begun on dialysis has increased yearly, and the percentage was 10.2% in 2007. Following these three diseases, the percentage of patients with nephrosclerosis as the primary disease has been increasing, accounting for 10.0%. This increase is considered to be related to the aging of the new dialysis patients. The number of patients with polycystic kidney disease, rapidly progressive glomerulonephritis, chronic pyelonephritis, and systemic lupus erythematosus (SLE) nephritis as the primary diseases were also observed, and the percentages of these patients were nearly the same as those in the previous years.

Table 10 shows changes in the percentage of patients according to the primary disease of renal failure for all the dialysis patients each year. Reflecting the trend among new patients begun on dialysis each year, the number of patients with chronic glomerulonephritis as the primary disease of renal failure has continuously decreased yearly. Instead, the number of patients with diabetic nephropathy as the primary disease has continuously increased (chronic glomerulonephritis, 40.4%; diabetic nephropathy, 33.4% in 2007). Assuming that the dynamics of the dialysis patient population in Japan continues to show this trend, the percentage of patients with

**TABLE 2.** Numbers of chronic dialysis patients by prefecture

Names of administrative divisions	Daytime	Nighttime	Home hemodialysis	Peritoneal dialysis	Total <sup>†</sup>
Hokkaido	11 535	1 438	5	450	13 429
Aomori Prefecture	2 676	221	0	121	3 018
Iwate Prefecture	2 269	360	0	144	2 773
Miyagi Prefecture	3 548	832	0	89	4 469
Akita Prefecture	1 639	145	0	63	1 847
Yamagata Prefecture	1 808	256	0	139	2 204
Fukushima Prefecture	3 641	497	1	230	4 368
Ibaraki Prefecture	5 335	854	1	154	6 344
Tochigi Prefecture	4 326	719	0	62	5 108
Gunma Prefecture	3 949	751	19	133	4 833
Saitama Prefecture	11 355	1 961	0	449	13 784
Chiba Prefecture	9 410	1 851	4	232	11 493
Tokyo	20 771	5 039	9	852	26 665
Kanagawa Prefecture	12 955	2 985	1	524	16 474
Niigata Prefecture	3 402	993	1	139	4 535
Toyama Prefecture	1 837	279	0	67	2 184
Ishikawa Prefecture	1 904	381	0	86	2 372
Fukui Prefecture	1 398	214	1	79	1 691
Yamanashi Prefecture	1 759	210	1	20	1 990
Nagano Prefecture	3 481	646	0	133	4 260
Gifu Prefecture	3 386	613	3	161	4 160
Shizuoka Prefecture	7259	1 355	52	290	8 908
Aichi Prefecture	11 200	3 108	3	573	14 931
Mie Prefecture	2 921	656	9	137	3 717
Shiga Prefecture	1 950	504	2	92	2 555
Kyoto Prefecture	4 091	957	2	170	5 220
Osaka Prefecture	16 707	2 741	9	657	20 154
Hyogo Prefecture	8 798	1 757	3	332	10 896
Nara Prefecture	2 507	222	1	113	2 845
Wakayama Prefecture	2 298	293	0	27	2 619
Tottori Prefecture	993	124	0	116	1 233
Shimane Prefecture	1 140	145	0	87	1 372
Okayama Prefecture	3 398	489	0	243	4 130
Hiroshima Prefecture	5 536	527	0	441	6 504
Yamaguchi Prefecture	2 660	359	0	133	3 152
Tokushima Prefecture	1 954	287	0	178	2 419
Kagawa Prefecture	1 919	247	7	239	2 412
Ehime Prefecture	2 661	439	1	166	3 267
Kochi Prefecture	1 806	202	0	45	2 052
Fukuoka Prefecture	9 729	2 218	1	336	12 283
Saga Prefecture	1 586	289	0	13	1 888
Nagasaki Prefecture	2 828	522	1	136	3 487
Kumamoto Prefecture	4 492	949	0	150	5 591
Oita Prefecture	3 045	361	1	120	3 527
Miyazaki Prefecture	2 804	537	0	55	3 396
Kagoshima Prefecture	4 147	529	2	115	4 792
Okinawa Prefecture	3 140	680	0	71	3 891
Total	223 953	41 742	187	9362	275 242

<sup>&</sup>lt;sup>†</sup>The total number of chronic dialysis patients is the total of the column for the number of patients in sheet I, and does not necessarily agree with the total number of patients counted according to the method of treatment. The number of dialysis patients was calculated based on facility survey data.

chronic glomerulonephritis as the primary disease and that with diabetic nephropathy will reverse in a few years; it is considered that the percentage of patients with diabetic nephropathy as the primary disease will become the largest also for all the dialysis patients. Patients with an unspecified primary disease accounted for 7.4% of all the dialysis patients. Following these three diseases, nephrosclerosis had the fourth largest number of patients.

#### 4. Causes of death

Table 11 shows the classification of the causes of death of new patients who were begun on dialysis in 2007 and who died by the end of 2007. Table 12 shows the classification of the causes of death of patients who died in 2007 in the entire dialysis patient population. Table 13 shows the changes in the percentages of the leading causes of death in the entire dialysis patient population. The classification of the causes of

**TABLE 3.** Changes in the number of patients per million

Year	Patients per million	Year	Patients per million
1983	443.7	1996	1328.4
1984	497.5	1997	1394.9
1985	547.8	1998	1472.5
1986	604.4	1999	1556.7
1987	658.8	2000	1624.1
1988	721.1	2001	1721.9
1989 <sup>†</sup>	790.0	2002	1801.2
1990	835.7	2003	1862.7
1991	937.6	2004	1943.5
1992	995.8	2005	2017.6
1993	1076.4	2006	2069.9
1994	1149.4	2007	2154.2
1995	1229.7		

<sup>†</sup>The collection rate is corrected at 86%, that is, rounded off at the 100th order. The number of dialysis patients was calculated based on facility survey data.

death was changed on the basis of the tenth revision of the international statistical classification of diseases and related health problems (ICD-10) starting with the survey at the end of 2003.

The causes of death of new patients begun on dialysis in 2007 were infectious diseases (24.2%), cardiac failure (23.2%), malignant tumors (10.3%), cerebrovascular disorder (5.5%), and cardiac infarction (3.5%). The major cause of death of new patients begun on dialysis was cardiac failure until 2002. The percentage of dialysis patients who died of infectious diseases has increased and become as large as that of dialysis patients who died of cardiac failure since 2003; this trend has continued until 2007. The increases in the numbers of elderly patients and diabetic patients who easily develop infectious diseases are considered to account for the increasing percentage of patients who died of infectious diseases.

The leading cause of death among the entire dialysis patient population was cardiac failure, accounting for 24.0% of all the patients who died. The percentage of death from cardiac failure among all the patients who died decreased between 1990 and around 1996, and remained nearly constant afterwards. The second leading cause of death was infectious diseases, accounting for 18.9% of all the patients who died. The percentage of death from infectious diseases has tended to increase since 1990. These trends were similar to those observed for the causes of death of new patients begun on dialysis, which was mentioned above.

Following the causes of death mentioned above, the percentages of patients who died of cerebrovascular disorder and malignant tumors were high, at 8.9% and 9.2%, respectively. The percentage of patients who died of cerebrovascular disorder has

tended to decrease since 1994; moreover, the percentage of patients who died of cardiac infarction has also tended to decrease since 2002.

#### 5. Annual crude death rate

The annual crude death rate was calculated from the facility survey data. It shows the percentage of the number of patients who died in a given year with respect to the mean annual number of dialysis patients. The annual crude death rate in 2007 was 9.4%. Table 14 shows the trend of annual crude death rates from 1983, which have ranged between 9.2–9.7% since 1992. Despite the increase in the numbers of diabetic patients, who have a low life expectancy, and elderly patients, the annual crude death rate remains nearly constant, which suggests an improvement in dialysis control technology in Japan.

## 6. Cumulative survival rate of new patients begun on dialysis each year

The cumulative survival rates of new patients begun on dialysis from 1983 are summarized by the year of introduction (Table 15). Moreover, the 1-, 5-, 10-, 15-, and 20-year survival rates of patients begun on dialysis are extracted from the table and plotted in

**TABLE 4.** Changes in the mean age of new patients begun on dialysis and in that of patients at the end of each year

		cucii yeui					
	Mean patients begun or treati	s newly n dialysis	Mean age of patients at the end of each year				
Year	Mean	±SD	Mean	±SD			
1983	51.9	15.5	48.3	13.8			
1984	53.2	15.3	49.2	13.8			
1985	54.4	15.4	50.3	13.7			
1986	55.1	15.2	51.1	13.6			
1987	55.9	14.9	52.1	13.7			
1988	56.9	14.9	52.9	13.6			
1989	57.4	14.7	53.8	13.5			
1990	58.1	14.6	54.5	13.5			
1991	58.1	14.6	55.3	13.5			
1992	59.5	14.5	56.0	13.5			
1993	59.8	14.4	56.6	13.5			
1994	60.4	14.3	57.3	13.5			
1995	61.0	14.2	58.0	13.4			
1996	61.5	14.2	58.6	13.4			
1997	62.2	14.0	59.2	13.4			
1998	62.7	13.9	59.9	13.3			
1999	63.4	13.9	60.6	13.3			
2000	63.8	13.9	61.2	13.2			
2001	64.2	13.7	61.6	13.1			
2002	64.7	13.6	62.2	13.0			
2003	65.4	13.5	62.8	12.9			
2004	65.8	13.4	63.3	12.9			
2005	66.2	13.4	63.9	12.8			
2006	66.4	13.4	64.4	12.8			
2007	66.8	13.3	64.9	12.7			

**TABLE 5.** Number of new patients begun on dialysis in 2007 according to age and gender

Age of the patients when newly begun on dialysis (years)	Male	$(\%)^\dagger$	Female	$(\%)^\dagger$	Subtotal	(%) <sup>†</sup>	No information available	Total	$(\%)^\dagger$
<5	9	(0.0)	10	(0.1)	19	(0.1)	0	19	(0.1)
5–9	6	(0.0)	4	(0.0)	10	(0.0)	0	10	(0.0)
10–14	12	(0.1)	6	(0.0)	18	(0.0)	0	18	(0.0)
15–19	20	(0.1)	12	(0.1)	32	(0.1)	0	32	(0.1)
20-24	71	(0.3)	34	(0.3)	105	(0.3)	0	105	(0.3)
25-29	120	(0.5)	69	(0.5)	189	(0.5)	0	189	(0.5)
30-34	247	(1.1)	123	(1.0)	370	(1.0)	0	370	(1.0)
35–39	464	(2.0)	215	(1.7)	679	(1.9)	0	679	(1.9)
40–44	671	(2.9)	253	(2.0)	924	(2.6)	0	924	(2.6)
45-49	989	(4.2)	419	(3.3)	1 408	(3.9)	0	1 408	(3.9)
50-54	1 458	(6.2)	611	(4.8)	2 069	(5.7)	0	2 069	(5.7)
55–59	2 819	(12.0)	1 187	(9.4)	4 006	(11.1)	1	4 007	(11.1)
60-64	2 852	(12.2)	1 272	(10.0)	4 124	(11.4)	3	4 127	(11.4)
65-69	3 281	(14.0)	1 639	(12.9)	4 920	(13.6)	7	4 927	(13.7)
70–74	3 775	(16.1)	1 947	(15.4)	5 722	(15.9)	2	5 724	(15.9)
75–79	3 372	(14.4)	2 067	(16.3)	5 439	(15.1)	1	5 440	(15.1)
80-84	2 221	(9.5)	1 671	(13.2)	3 892	(10.8)	0	3 892	(10.8)
85–89	832	(3.6)	890	(7.0)	1 722	(4.8)	1	1 723	(4.8)
90–94	152	(0.6)	216	(1.7)	368	(1.0)	0	368	(1.0)
≥95	26	(0.1)	24	(0.2)	50	(0.1)	0	50	(0.1)
Total	23 397	(100.0)	12 669	(100.0)	36 066	(100.0)	15	36 081	(100.0)
No information available	60	` /	32	. ,	92	. ,		92	, ,
Total	23 457		12 701		36 158		15	36 173	
Mean	65.84		68.60		66.81		67.73	66.81	
SD	13.07		13.55		13.31		7.40	13.30	

<sup>&</sup>lt;sup>↑</sup>The value in parentheses on the right-hand side of each number is the percentage of patients with respect to the total of the column.

**TABLE 6.** Number of all dialysis patients in 2007 according to age and gender

Age (years)	Male	$(\%)^\dagger$	Female	(%) <sup>†</sup>	Subtotal	$(\%)^\dagger$	No information available	Total	(%) <sup>†</sup>
<5	21	(0.0)	20	(0.0)	41	(0.0)	0	41	(0.0)
5–9	18	(0.0)	14	(0.0)	32	(0.0)	0	32	(0.0)
10–14	19	(0.0)	14	(0.0)	33	(0.0)	0	33	(0.0)
15–19	77	(0.0)	49	(0.0)	126	(0.0)	0	126	(0.0)
20–24	291	(0.2)	167	(0.2)	458	(0.2)	0	458	(0.2)
25–29	713	(0.4)	400	(0.4)	1 113	(0.4)	0	1 113	(0.4)
30–34	1 859	(1.1)	969	(0.9)	2 828	(1.1)	0	2 828	(1.1)
35–39	3 575	(2.2)	1 832	(1.8)	5 407	(2.0)	0	5 407	(2.0)
40–44	5 400	(3.3)	2 786	(2.7)	8 186	(3.1)	0	8 186	(3.1)
45–49	7 783	(4.8)	4 233	(4.1)	12 016	(4.5)	1	12 017	(4.5)
50-54	12 364	(7.6)	7 053	(6.9)	19 417	(7.3)	1	19 418	(7.3)
55–59	22 862	(14.1)	13 142	(12.9)	36 004	(13.6)	2	36 006	(13.6)
60–64	23 361	(14.4)	13 576	(13.3)	36 937	(14.0)	2	36 939	(14.0)
65–69	24 719	(15.2)	14 793	(14.5)	39 512	(14.9)	9	39 521	(15.0)
70–74	24 225	(14.9)	14 633	(14.3)	38 858	(14.7)	3	38 861	(14.7)
75–79	18 799	(11.6)	12 837	(12.6)	31 636	(12.0)	2	31 638	(12.0)
80-84	10 874	(6.7)	9 437	(9.2)	20 311	(7.7)	0	20 311	(7.7)
85–89	4 115	(2.5)	4 663	(4.6)	8 778	(3.3)	1	8 779	(3.3)
90–94	1 005	(0.6)	1 334	(1.3)	2 339	(0.9)	0	2 339	(0.9)
≥95	139	(0.1)	158	(0.2)	297	(0.1)	0	297	(0.1)
Total	162 219	(100.0)	102 110	(100.0)	264 329	(100.0)	21	264 350	(100.0)
No information available	4	, ,	2	, ,	6	, ,		6	. ,
Total	162 223		102 112		264 335		21	264 356	
Mean	64.16		65.98		64.87		66.33	64.87	
SD	12.52		12.92		12.71		8.51	12.71	

<sup>&</sup>lt;sup>†</sup>The value in parentheses on the right-hand side of each number is the percentage of patients with respect to the total of the column.

**TABLE 7.** Number of new patients begun on dialysis in 2007 (and their mean ages) according to primary disease

Primary disease	Number of patients	$(\%)^\dagger$	No information available	$(\%)^\dagger$	Total	$(\%)^\dagger$	Mean age	SD
Chronic glomerulonephritis	8 561	(23.8)	41	(45.1)	8 602	(23.8)	66.45	14.31
Chronic pyelonephritis	278	(0.8)	2	(2.2)	280	(0.8)	64.42	15.06
Rapidly progressive glomerulonephritis	468	(1.3)	0	(0.0)	468	(1.3)	69.99	14.30
Nephropathy of pregnancy/pregnancy toxemia	68	(0.2)	0	(0.0)	68	(0.2)	57.56	13.60
Other nephritides that cannot be classified	148	(0.4)	0	(0.0)	148	(0.4)	61.32	20.35
Polycystic kidney	827	(2.3)	0	(0.0)	827	(2.3)	61.31	13.41
Nephrosclerosis	3 621	(10.1)	5	(5.5)	3 626	(10.0)	73.67	11.54
Malignant hypertension	248	(0.7)	0	(0.0)	248	(0.7)	61.10	16.56
Diabetic nephropathy	15 663	(43.5)	18	(19.8)	15 681	(43.4)	65.44	11.49
Systemic lupus erythematosus nephritis	302	(0.8)	4	(4.4)	306	(0.8)	60.50	15.67
Amyloidal kidney	170	(0.5)	0	(0.0)	170	(0.5)	68.20	9.28
Gouty kidney	107	(0.3)	1	(1.1)	108	(0.3)	65.82	12.60
Renal failure due to congenital abnormality of metabolism	33	(0.1)	0	(0.0)	33	(0.1)	47.24	21.85
Kidney and urinary tract tuberculosis	22	(0.1)	0	(0.0)	22	(0.1)	72.23	9.95
Kidney and urinary tract stone	67	(0.2)	0	(0.0)	67	(0.2)	68.36	12.52
Kidney and urinary tract tumor	162	(0.4)	1	(1.1)	163	(0.5)	70.96	11.82
Obstructive urinary tract disease	99	(0.3)	1	(1.1)	100	(0.3)	66.89	16.22
Myeloma	140	(0.4)		(0.0)	140	(0.4)	70.40	9.33
Hypoplastic kidney	59	(0.2)	1	(1.1)	60	(0.2)	35.14	27.81
Undetermined	3 664	(10.2)	9	(9.9)	3 673	(10.2)	69.84	13.43
Reintroduction after transplantation	273	(0.8)	4	(4.4)	277	(0.8)	56.67	17.28
Others	1 037	(2.9)	4	(4.4)	1 041	(2.9)	67.47	15.25
Total	36 017	(100.0)	91	(100.0)	36 108	(100.0)	66.80	13.31
No information available	64		1		65		70.53	11.65
Total	36 081		92		36 173		66.81	13.30

<sup>†</sup>The value in parentheses on the right-hand side of each number is the percentage of patients with respect to the total of the column.

Figure 2. The survival rates were calculated using a life table method (3).

The 1- to 10-year survival rates have been increasing since 1992 for patients begun on dialysis in 1992 or later. A significant change employed from around 1992 was the start of the clinical application of erythropoietin. This trend of increasing survival rate for the patients begun on dialysis after 1992 may be due to the improvement of anemia therapy using erythropoietin from the initial phase of dialysis.

The 15-year survival rate of patients begun on dialysis after 1992 is still unclear because only the data from the patients begun on dialysis before 1992 are used for calculating the 15-year survival rate. It will be interesting to determine whether the survival rates for 15 years and longer will also increase for the patients begun on dialysis after 1992.

#### II. Tabulation of data on new items surveyed

## A. Current status of dialysate solution quality control

Following the previous survey, the surveyed items included the measurement frequency and endotoxin concentration in the dialysate solution, measurement frequency and bacterial count in the dialysate solu-

tion, the medium used for bacterial cultivation of dialysate solution, and the installation of endotoxin retentive filters (ETRFs). The amount of the sample for the measurement of bacterial count in the dialysate solution was also added to these items in the present survey.

## 1. Measurement of endotoxin concentration in dialysate solution

a. Measurement frequency. There were 3664 facilities that responded to questions regarding the measurement frequency of endotoxin concentration in the dialysate solution (Table 16). The endotoxin concentration in the dialysate solution was measured at 87.5% of the facilities that responded to the questionnaire, an increase of 5% from the percentage in the 2006 survey. According to the quality control standard by the Japanese Society for Dialysis Therapy, it is recommended that the endotoxin concentration in the dialysate solution be measured more than once a month; however, the percentage of facilities that carried out the measurement more than once a month was only 31.5%, indicating that compliance with the recommendation needs improvement.

TABLE 8. Number of all dialysis patients in 2007 (and their mean ages) according to primary disease

Primary disease	Number of patients	$(\%)^\dagger$	No information available	$(\%)^\dagger$	Total	$(\%)^\dagger$	Mean age	SD
Chronic glomerulonephritis	106 702	(40.4)	2	(33.3)	106 704	(40.4)	63.50	12.84
Chronic pyelonephritis	3 138	(1.2)	0	(0.0)	3 138	(1.2)	62.83	14.26
Rapidly progressive glomerulonephritis	1 742	(0.7)	0	(0.0)	1 742	(0.7)	64.95	14.30
Nephropathy of pregnancy/pregnancy toxemia	1 775	(0.7)	0	(0.0)	1 775	(0.7)	59.71	9.96
Other nephritides that cannot be classified	1 214	(0.5)	0	(0.0)	1 214	(0.5)	58.05	17.03
Polycystic kidney	8 920	(3.4)	0	(0.0)	8 920	(3.4)	62.93	11.03
Nephrosclerosis	17 144	(6.5)	0	(0.0)	17 144	(6.5)	72.91	11.96
Malignant hypertension	1 956	(0.7)	0	(0.0)	1 956	(0.7)	62.55	14.41
Diabetic nephropathy	88 257	(33.4)	1	(16.7)	88 258	(33.4)	65.69	10.96
Systemic lupus erythematosus nephritis	2 261	(0.9)	0	(0.0)	2 261	(0.9)	56.85	13.77
Amyloidal kidney	513	(0.2)	0	(0.0)	513	(0.2)	65.47	11.26
Gouty kidney	1 256	(0.5)	1	(16.7)	1 257	(0.5)	65.56	11.61
Renal failure due to congenital abnormality of metabolism	262	(0.1)	0	(0.0)	262	(0.1)	47.31	17.90
Kidney and urinary tract tuberculosis	392	(0.1)	0	(0.0)	392	(0.1)	69.59	9.68
Kidney and urinary tract stone	552	(0.2)	0	(0.0)	552	(0.2)	68.23	11.43
Kidney and urinary tract tumor	644	(0.2)	0	(0.0)	644	(0.2)	69.18	12.08
Obstructive urinary tract disease	692	(0.3)	0	(0.0)	692	(0.3)	60.76	18.23
Myeloma	207	(0.1)	0	(0.0)	207	(0.1)	70.06	10.78
Hypoplastic kidney	548	(0.2)	0	(0.0)	548	(0.2)	39.73	19.41
Undetermined	19 451	(7.4)	2	(33.3)	19 453	(7.4)	67.14	13.42
Reintroduction after transplantation	1 894	(0.7)	0	(0.0)	1 894	(0.7)	52.98	12.79
Others	4 725	(1.8)	0	(0.0)	4 725	(1.8)	62.66	16.11
Total	264 245	(100.0)	6	(100.0)	264 251	(100.0)	64.87	12.71
No information available	105		0		105		68.05	12.39
Total	264 350		6		264 356		64.87	12.71

<sup>†</sup>The value in parentheses on the right-hand side of each number is the percentage of patients with respect to the total of the column.

b. Dialysate solution endotoxin concentration. Measured endotoxin concentrations in the dialysate solution were obtained from 3186 facilities (Table 17). The quality control standard of endotoxin concentra-

tion in the dialysate solution reported by the Japanese Society for Dialysis Therapy is <0.05 EU/mL. The percentage of facilities that satisfied this standard was 93.6%, an increase of approximately 5%

**TABLE 9.** Changes in the percentage of new patients begun on dialysis each year in terms of primary disease

Year	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995
Diabetic nephropathy	15.6	17.4	19.6	21.3	22.1	24.3	26.5	26.2	28.1	28.4	29.9	30.7	31.9
Chronic glomerulonephritis	60.5	58.7	56.0	54.8	54.2	49.9	47.4	46.1	44.2	42.2	41.4	40.5	39.4
Nephrosclerosis	3.0	3.3	3.5	3.7	3.9	3.9	4.1	5.4	5.5	5.9	6.2	6.1	6.3
Polycystic kidney	2.8	2.8	3.1	2.9	3.2	3.1	3.1	2.9	3.0	2.7	2.6	2.5	2.4
Chronic pyelonephritis	2.4	2.2	2.1	2.0	1.8	1.8	1.5	1.5	1.7	1.6	1.1	1.4	1.2
Rapidly progressive glomerulonephritis	0.9	0.7	0.9	1.0	0.8	0.9	0.8	0.7	0.6	0.7	0.8	0.8	0.8
Systemic lupus erythematosus nephritis	1.1	1.1	1.1	1.2	0.9	0.9	1.0	1.1	1.3	1.3	1.2	1.2	1.1
Undetermined	4.4	4.0	4.8	4.2	4.1	3.8	4.0	3.3	3.7	3.7	3.3	3.9	4.5
Year	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
Diabetic nephropathy	33.1	33.9	35.7	36.2	36.6	38.1	39.1	41.0	41.3	42.0	42.9	43.4	
Chronic glomerulonephritis	38.9	36.6	35.0	33.6	32.5	32.4	31.9	29.1	28.1	27.4	25.6	23.8	
Nephrosclerosis	6.4	6.8	6.7	7.0	7.6	7.6	7.8	8.5	8.8	9.0	9.4	10.0	
Polycystic kidney	2.5	2.4	2.4	2.2	2.4	2.3	2.4	2.3	2.7	2.3	2.4	2.3	
Chronic pyelonephritis	1.1	1.2	1.1	1.1	1.0	1.1	0.9	1.0	0.9	1.0	0.8	0.8	
Rapidly progressive glomerulonephritis	0.8	1.1	0.9	0.9	1.0	1.0	1.1	1.2	1.1	1.1	1.2	1.3	
Systemic lupus erythematosus nephritis	1.3	1.0	1.1	1.2	0.9	1.0	0.9	0.7	0.8	0.8	0.8	0.8	
Undetermined	5.0	5.5	5.6	6.1	7.6	9.0	8.4	8.8	9.3	9.5	9.9	10.2	

**TABLE 10.** Changes in the percentage of patients at the end of each year in terms of primary disease

Year	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995
Diabetic nephropathy	7.4	8.4	9.4	10.5	11.7	12.8	14.0	14.9	16.4	17.1	18.2	19.2	20.4
Chronic glomerulonephritis	74.5	72.1	72.3	70.6	69.4	67.9	65.9	64.1	61.7	60.4	58.8	57.7	56.6
Nephrosclerosis	1.5	1.7	1.9	2.0	2.1	2.1	2.3	2.6	2.9	3.1	3.4	3.6	3.8
Polycystic kidney	2.7	2.9	3.0	3.1	3.1	3.2	3.2	3.3	3.3	3.3	3.3	3.2	3.2
Chronic pyelonephritis	3.1	3.3	2.6	2.4	2.4	2.3	2.2	2.2	2.1	2.0	1.9	1.8	1.7
Rapidly progressive glomerulonephritis	0.5	0.4	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5
Systemic lupus erythematosus nephritis	0.8	0.8	0.9	0.9	0.9	0.9	0.9	1.0	1.1	1.1	1.1	1.1	1.1
Undetermined	2.2	2.3	2.3	2.5	2.6	2.5	2.6	2.6	2.9	2.9	2.9	3.1	3.2
Year	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
Diabetic nephropathy	21.6	22.7	24.0	25.1	26.0	27.2	28.1	29.2	30.2	31.4	32.3	33.4	
Chronic glomerulonephritis	55.4	54.1	52.5	51.1	49.7	49.6	48.2	46.6	45.1	43.6	42.2	40.4	
Nephrosclerosis	4.0	4.2	4.4	4.5	4.8	5.0	5.1	5.3	5.7	5.9	6.2	6.5	
Polycystic kidney	3.2	3.2	3.2	3.2	3.2	3.3	3.3	3.3	3.4	3.3	3.4	3.4	
Chronic pyelonephritis	1.6	1.6	1.5	1.5	1.4	1.4	1.3	1.3	1.3	1.2	1.2	1.2	
Rapidly progressive glomerulonephritis	0.5	0.6	0.6	0.6	0.6	0.6	0.6	0.6	0.6	0.6	0.6	0.7	
Systemic lupus erythematosus nephritis	1.1	1.1	1.1	1.1	1.0	1.0	1.0	0.9	0.9	0.9	0.9	0.9	
Undetermined	3.6	3.9	4.2	4.4	5.0	5.6	5.9	6.3	6.4	6.6	7.0	7.4	

from that in the 2006 survey. The percentage of facilities that satisfied the endotoxin concentration of <0.001 EU/mL, which is required for an ultrapure dialysate solution, was 53.0%, a marked increase from 29.8% in the 2006 survey, showing a considerable improvement in solution cleanliness.

#### 2. Bacterial test of dialysate solution

a. Measurement frequency. There were 3441 facilities that responded to questions regarding the frequency

of the bacterial test of the dialysate solution (Table 18). The test was carried out at 50.1% of these facilities, showing a marked increase from 37.1% at the end of 2006. In accordance with the quality control standard by the Japanese Society for Dialysis Therapy, it is recommended to measure the bacterial count in the dialysate solution more than once a month; however, the percentage of facilities that carried out the test more than once a month was only 16.9%, indicating the need to improve the practice of carrying out bacterial tests as a routine task.

**TABLE 11.** Classification of the causes of death of new patients begun on dialysis in 2007

Cause of death	Male	(%)	Female	(%)	Total	(%)	No information available	Total	(%)
Cardiac failure	460	(22.9)	260	(23.9)	720	(23.2)	0	720	(23.2)
Cerebrovascular disease	102	(5.1)	69	(6.3)	171	(5.5)	0	171	(5.5)
Infectious disease	479	(23.8)	270	(24.8)	749	(24.2)	0	749	(24.2)
Hemorrhage	59	(2.9)	26	(2.4)	85	(2.7)	0	85	(2.7)
Malignant tumor	239	(11.9)	80	(7.3)	319	(10.3)	0	319	(10.3)
Cachexia/uremia	62	(3.1)	51	(4.7)	113	(3.6)	0	113	(3.6)
Cardiac infarction	68	(3.4)	42	(3.9)	110	(3.5)	0	110	(3.5)
Potassium poisoning/moribund	55	(2.7)	30	(2.8)	85	(2.7)	0	85	(2.7)
Chronic hepatitis/cirrhosis	44	(2.2)	10	(0.9)	54	(1.7)	0	54	(1.7)
Encephalopathy	2	(0.1)	3	(0.3)	5	(0.2)	0	5	(0.2)
Suicide/refusal of treatment	23	(1.1)	6	(0.6)	29	(0.9)	0	29	(0.9)
Intestinal obstruction	9	(0.4)	13	(1.2)	22	(0.7)	0	22	(0.7)
Lung thrombus/pulmonary embolus	7	(0.3)	2	(0.2)	9	(0.3)	0	9	(0.3)
Death due to disaster	10	(0.5)	2	(0.2)	12	(0.4)	0	12	(0.4)
Others	229	(11.4)	117	(10.7)	346	(11.2)	0	346	(11.2)
Undetermined	162	(8.1)	108	(9.9)	270	(8.7)	0	270	(8.7)
Total	2010	(100.0)	1089	(100.0)	3099	(100.0)	0	3099	(100.0)
No information available		, ,	1	. ,	1	. ,	0	1	. ,
Total	2010		1090		3100		0	3100	

Cause of death	Male	(%)	Female	(%)	Total	(%)	No information available	Total	(%)
Cardiac failure	3 387	(22.5)	2333	(26.5)	5 720	(24.0)	1	5 721	(24.0)
Cerebrovascular disease	1 288	(8.6)	841	(9.6)	2 129	(8.9)	0	2 129	(8.9)
Infectious disease	2 879	(19.1)	1637	(18.6)	4 516	(18.9)	1	4 517	(18.9)
Hemorrhage	304	(2.0)	179	(2.0)	483	(2.0)	0	483	(2.0)
Malignant tumor	1 558	(10.4)	626	(7.1)	2 184	(9.2)	0	2 184	(9.2)
Cachexia/uremia	430	(2.9)	318	(3.6)	748	(3.1)	0	748	(3.1)
Cardiac infarction	704	(4.7)	344	(3.9)	1 048	(4.4)	0	1 048	(4.4)
Potassium poisoning/moribund	809	(5.4)	394	(4.5)	1 203	(5.0)	0	1 203	(5.0)
Chronic hepatitis/cirrhosis	209	(1.4)	82	(0.9)	291	(1.2)	0	291	(1.2)
Encephalopathy	12	(0.1)	10	(0.1)	22	(0.1)	0	22	(0.1)
Suicide/refusal of treatment	154	(1.0)	58	(0.7)	212	(0.9)	0	212	(0.9)
Intestinal obstruction	144	(1.0)	100	(1.1)	244	(1.0)	0	244	(1.0)
Lung thrombus/pulmonary embolus	44	(0.3)	38	(0.4)	82	(0.3)	0	82	(0.3)
Death due to disaster	120	(0.8)	56	(0.6)	176	(0.7)	0	176	(0.7)
Others	1 428	(9.5)	888	(10.1)	2 3 1 6	(9.7)	0	2 316	(9.7)
Undetermined	1 576	(10.5)	885	(10.1)	2 461	(10.3)	3	2 464	(10.3)
Total	15 046	(100.0)	8789	(100.0)	23 835	(100.0)	5	23 840	(100.0)
No information available	20	, ,	8	. /	28	` /	0	28	. ,
Total	15 066		8797		23 863		5	23 868	

**TABLE 12.** Classification of the causes of death of patients who died in 2007

b. Dialysate solution bacterial count. Measured bacterial counts in the dialysate solution were reported by 1565 facilities, 97.4% of which satisfied the quality control standard by the Japanese Society for Dialysis Therapy, which is <100 cfu/mL (Table 19). The percentage of facilities that satisfied the ultrapure dialysate solution level of <0.1 cfu/mL was 47.9%.

c. Medium used for bacterial cultivation of the dialysate solution. The use of an oligotrophic medium is recommended for the cultivation of bacteria in the dialysate solution. According to the survey result, an oligotrophic medium of Reasoner's No 2 agar (R2A) or tryptone glucose extract agar (TGEA)

was used at 73.4% of the facilities. The percentage of facilities that used R2A was the highest at 66.3% (Table 20).

d. Amount of sample for the measurement of the dialy-sate solution bacterial count. Generally, the amount of a sample used to measure the bacterial count in plate media was <1 mL; however, at least 10 mL of a sample is required to accurately measure a bacterial count of <0.1 cfu/mL in the dialysate solution, which is the count required to maintain an ultrapure dialysate solution. From the survey, the amount of the sample dialysate solution was 10 mL or more in 46.5% of the facilities (Table 21).

**TABLE 13.** Annual changes in the major causes of death

Year	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995
Cardiac failure	30.3	30.5	31.3	33.2	32.7	36.5	33.4	30.4	30.5	31.1	29.9	28.2	25.4
Infectious disease	11.0	11.5	11.5	12.0	12.0	12.2	11.7	11.6	12.1	11.3	12.2	12.6	13.8
Cerebrovascular disease	14.2	15.4	14.2	14.0	14.2	12.9	13.2	13.9	13.7	13.6	13.5	14.1	13.5
Malignant tumor	7.7	6.9	6.4	6.9	5.8	6.9	7.6	8.2	7.6	7.1	7.4	7.3	7.2
Cardiac infarction	5.3	4.8	5.3	6.1	6.0	5.4	5.3	5.8	5.8	5.8	5.7	7.1	7.5
Others	5.1	4.9	5.7	4.7	5.2	4.8	4.4	4.6	4.4	4.5	4.1	4.5	5.8
Year	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
Cardiac failure	24.1	23.9	24.1	24.3	23.2	25.5	25.1	25.0	25.1	25.8	24.9	24.0	
Infectious disease	14.6	14.9	15.0	16.3	16.6	16.3	15.9	18.5	18.8	19.2	19.9	18.9	
Cerebrovascular disease	12.9	12.6	12.1	11.3	11.3	11.6	11.2	10.7	10.6	9.8	9.4	8.9	
Malignant tumor	7.7	8.1	7.7	7.6	8.3	8.5	8.5	8.5	9.0	9.0	9.2	9.2	
Cardiac infarction	7.4	8.4	7.9	7.4	7.0	7.4	7.4	6.2	5.4	5.1	4.4	4.4	
Others	6.3	6.7	7.0	7.7	7.9	9.1	9.0	9.7	10.3	9.1	9.5	9.7	

TABLE 14.	Change in the annual crude death rat	е

Year	Crude death rate (%)	Year	Crude death rate (%)
1983	9.0	1996	9.4
1984	8.9	1997	9.4
1985	9.1	1998	9.2
1986	9.0	1999	9.7
1987	8.5	2000	9.2
1988	9.2	2001	9.3
1989	7.9	2002	9.2
1990	9.6	2003	9.3
1991	8.9	2004	9.4
1992	9.7	2005	9.5
1993	9.4	2006	9.2
1994	9.5	2007	9.4
1995	9.7		

#### B. Current status of hepatitis virus infection

1. Hepatitis C virus antibody prevalence
The hepatitis C virus antibody (HCVAb) prevalence was calculated using the following equation:

HCVAb prevalence (%) = Number of HCVAbpositive patients ÷ (Number of HCVAb-positive patients + Number of HCVAb-negative patients)

In this equation, HCV-RNA was not taken into consideration.

a. Changes over the past eight years. The HCVAb prevalence of chronic dialysis patients at the end of each year was summarized on the basis of the results of the survey by the Statistical Survey Committee (4–9). The HCVAb prevalence decreased yearly from 15.95% in 1999 to <10% at the end of 2007 (9.83%; Table 22). The previous activities carried out to prevent in-hospital infection from 1999 until today include the publication of the "Manual for prevention of in-hospital infection in dialysis therapy (initial version)" (10) in 1999, the start of the sale of erythropoietin-prefilled syringes in 2001, and the publication of the "Manual for prevention of in-hospital infection in dialysis therapy (revised version)" (11) in 2006.

b. Treatment method. Table 23 shows the relationship between HCVAb prevalence and the treatment method. The HCVAb prevalence in patients treated by hemoabsorption was the highest, followed by those in patients treated by hemodiafiltration and home hemodialysis. As explained later, patients with a longer dialysis duration showed a higher HCVAb prevalence. The duration of dialysis in patients treated by the above methods was long and thereby

considered to account for the high HCVAb prevalence (the mean durations of dialysis for patients treated by different methods obtained from this survey are:  $6.46 \pm 6.57$  ( $\pm SD$ ) years for facility hemodialysis,  $11.45 \pm 9.03$  years for hemodiafiltration,  $6.06 \pm 6.77$  years for hemofiltration,  $24.68 \pm 6.59$  years for hemoabsorption,  $12.42 \pm 9.38$  years for home hemodialysis, and  $3.54 \pm 4.17$  years for peritoneal dialysis). The HCVAb prevalence in patients treated by peritoneal dialysis was lower than that in patients treated by facility hemodialysis, which was probably because the duration of dialysis was short in patients treated by peritoneal dialysis. These trends were almost similar to those in the 2006 survey.

c. Gender. Table 24 shows the relationship between HCVAb prevalence and gender. The HCVAb prevalence in male patients was higher than that in female patients.

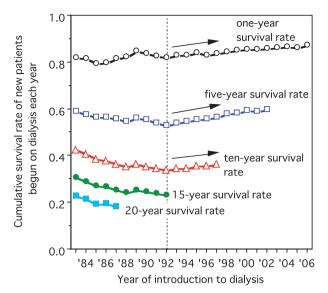
d. Duration of dialysis. Table 25 shows the relationship between HCVAb prevalence and the duration of dialysis. Before reaching the duration of 15 years, the HCVAb prevalence was approximately 7.7% and showed no particular relationship with the duration of dialysis; however, the HCVAb prevalence tended to increase when the duration of dialysis was 15 years or longer, and it markedly increased with increasing dialysis duration of >20 years. The HCV virus was first detected and HCVAb tests therefore performed in the clinical setting about 20 years ago, which may account for the increase in HCVAb prevalence in patients who have undergone dialysis for 20 years or longer.

e. Age. Table 26 shows the relationship between HCVAb prevalence and age. The HCVAb prevalence was relatively high in the 45–89 age group, whereas that in patients outside this age group, younger or older, was low. This age group includes many patients with a relatively long duration of dialysis, which may account for such a high HCVAb prevalence.

f. Primary disease. Table 27 shows the relationship between HCVAb prevalence and primary disease. To easily understand HCVAb prevalence in relation to the primary disease, the primary diseases are listed in descending order of HCVAb prevalence. The HCVAb prevalence in patients who had been reintroduced to dialysis after transplantation and who had renal or urinary tract tuberculosis as the primary

 TABLE 15.
 Survival rates of new patients begun on dialysis since 1983

THE INVIAINS INTO-47	I 28
24-year survival rate	0.181
23-year survival rate	0.192
22-year survival rate	0.202 0.191 0.172
21-year survival rate	0.216 0.201 0.183 0.185
20-year survival rate	0.229 0.214 0.195 0.198 0.183
19-year survival rate	0.244 0.229 0.211 0.210 0.193 0.188
18-year survival rate	0.257 0.241 0.224 0.222 0.206 0.198 0.208
17-year survival rate	0.274 0.255 0.239 0.235 0.223 0.213 0.213
16-year survival rate	0.230 0.273 0.256 0.252 0.241 0.237 0.233 0.233
15-year survival rate	0.309 0.290 0.274 0.256 0.256 0.253 0.234 0.234
14-year survival rate	0.330 0.310 0.292 0.286 0.274 0.262 0.255 0.255
13-year survival rate	0.349 0.331 0.314 0.307 0.283 0.283 0.273 0.273
12-year survival rate	0.373 0.355 0.339 0.317 0.305 0.295 0.295 0.295
11-year survival rate	0.397 0.380 0.363 0.353 0.329 0.327 0.320 0.318 0.320 0.320
10-year survival rate	0.426 0.409 0.388 0.380 0.367 0.355 0.347 0.347 0.347 0.347 0.347
9-year survival rate	0.457 0.437 0.416 0.396 0.396 0.386 0.377 0.377 0.377 0.378 0.378 0.379 0.379 0.379
8-year survival rate	0.486 0.467 0.447 0.446 0.428 0.402 0.402 0.410 0.424 0.424 0.424 0.424 0.424 0.424
7-year survival rate	0.525 0.500 0.487 0.486 0.446 0.440 0.448 0.448 0.448 0.448 0.448 0.448 0.448 0.448 0.448
6-year survival rate	0.557 0.539 0.523 0.523 0.509 0.509 0.482 0.492 0.492 0.508 0.508 0.534 0.534 0.534
5-year survival rate	0.590 0.578 0.565 0.566 0.564 0.564 0.532 0.543 0.547 0.567 0.596 0.596 0.598
4-year survival rate	0.634 0.621 0.611 0.619 0.609 0.609 0.599 0.599 0.639 0.613 0.613 0.646 0.646 0.646
3-yeat survival rate	0.683 0.671 0.667 0.667 0.668 0.668 0.667 0.667 0.667 0.672 0.672 0.674 0.709 0.719 0.710 0.710
2-year survival rate	0.748 0.736 0.737 0.739 0.741 0.741 0.755 0.755 0.755 0.757 0.757 0.767 0.778 0.778 0.778 0.778 0.778 0.778 0.778
1-year survival rate	0.819 0.796 0.799 0.799 0.825 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.833 0.842 0.842 0.842 0.842 0.846 0.856 0.856 0.857
Number of patients	9923 10 764 11 676 12 676 13 618 14 828 14 663 16 600 18 305 19 991 19 991 20 990 22 109 22 109 23 107 33 24 474 33 269 34 474 35 594 36 594 37 594 3
Year when patients were newly introduced to dialysis	1983 1984 1985 1986 1987 1989 1990 1991 1995 1995 1998 1998 1998 1998 1998



**FIG. 2.** Changes in the cumulative survival rate of patients begun on dialysis.

disease were 20% or higher. In contrast, the HCVAb prevalence in patients with myeloma as the primary disease was as low as 4.52%. The HCVAb prevalence in patients with other primary diseases ranged between 6% and 13%, showing a continuous distribution without a marked difference.

The HCVAb prevalence in patients with chronic glomerulonephritis as the primary disease, the number of which is largest among all the patients, was 10.35%, and that in patients with diabetic nephropathy, which is the second largest in number, was 10.29%; these prevalences were not significantly different. For the third largest number of patients with nephrosclerosis as the primary disease, the HCVAb prevalence was 6.89% and lower than that for the patients with the two above-mentioned primary diseases.

#### 2. Hepatitis B virus surface antigen prevalence

The hepatitis B virus surface antigen (HBsAg) prevalence was calculated using the following equation:

HBsAg prevalence (%) = Number of HBsAgpositive patients ÷ (Number of HBsAg-positive patients + Number of HBsAg-negative patients)

The mean HBsAg prevalence of all the patients surveyed in this study was 1.94%.

a. Treatment method. Table 28 shows the relationship between HBsAg prevalence and treatment method. The HBsAg prevalence in patients treated by hemoabsorption was as high as 3.69%, whereas

those in patients treated by hemofiltration and peritoneal dialysis were slightly low (approximately 1.5%). Following these treatment methods, the HBsAg prevalence in patients treated by home hemodialysis was as low as 1.71%. The HBsAg prevalence in patients treated by hemodialysis and hemodiafiltration were nearly equal to the mean in all the dialysis patients.

b. Gender. Table 29 shows the relationship between HBsAg prevalence and gender. Similarly to HCVAb prevalence, the HBsAg prevalence was higher in male patients than in female patients.

c. Duration of dialysis. Table 30 shows the relationship between HBsAg prevalence and duration of dialysis. For the patients with the duration longer than 10 years, the HBsAg prevalence tended to increase with increasing duration of dialysis.

d. Age. Table 31 shows the relationship between HBsAg prevalence and age. The HBsAg prevalence was high in patients in the 45–74 age group, whereas that in patients outside this age group, that is, younger or older patients, was low.

e. Primary disease. Table 32 shows the relationship between HBsAg prevalence and primary disease. To easily understand the relationship between them, primary diseases are listed in the descending order of HBsAg prevalence. From this list, the primary diseases with HBsAg prevalence are renal or urinary tract tuberculosis and nephropathy of pregnancy or pregnancy toxemia, whereas those with low HBsAg prevalence include renal or urinary tract calculosis, rapidly progressive glomerulonephritis, and amyloid nephropathy.

The HBsAg prevalence in patients with chronic glomerulonephritis as the primary disease, whose number was largest among all the patients, was 2.08%. That in patients with diabetic nephropathy, whose number was the second largest, was 1.85%.

#### C. Current status of renal anemia therapy

In the survey conducted at the end of 2007, hemoglobin concentration, serum iron concentration, total iron-binding capacity, and serum ferritin concentration (all of these are pre-dialysis values) were investigated as indices regarding renal anemia therapy. The relationships between hemoglobin concentration and other related indices are reported below.

**TABLE 16.** Measurement frequency of the dialysate solution endotoxin concentration (according to the type of facility)

			Measurement	Measurement frequency of endotoxin concentration	dotoxin concer	ntration					
Kind of facility	None	Every	Every	Every two weeks	Every	Several times per year	Once a year	Subtotal	Unspecified	No information available	Total
National public university hospital	2	0	0	1	17	23	S	48	1	2	51
(%) Private university hospital	(4.2) 6	(0:0) 0	(0.0)	(2.1) 6	(35.4) 23	(47.9) 20	(10.4)	(100.0) 58	ю	1	62
(%) National hospital	(10.3) 4	(0.0)	(1.7)	(10.3)	(39.7)	(34.5) 13	(3.4)	(100.0) 29	Ŋ	9	40
(%) Prefectural municipal village hospital	(13.8) 48	(0.0) 1	(3.4)	(0.0)	(17.2) 88	(44.8) 173	(20.7) 64	(100.0) 383	32	22	437
(%) Social insurance hospital	(12.5)	(0.3)	(0.5)	(1.8)	(23.0) 13	(45.2) 27	(16.7) $10$	(100.0) 60	7	1	63
(%) "Kouseiren"† hospital	(11.7)	(0.0)	(0.0)	(5.0)	(21.7) 28	(45.0) 48	(16.7) 23	(100.0) $111$	S	ю	119
(%) Other public hospital	(4.5) 21	(0.0)	(0.9)	(5.4)	(25.2) 43	(43.2) 67	(20.7) 30	(100.0) 174	4	9	184
(%) Private general hospital	(12.1)	(0.6)	(2.9)	(4.0)	(24.7)	(38.5)	(17.2)	(100.0)	∞	1	108
(%) Private hospital	(12.1) 138	(1.0) 6	26	(5.1) 46	(25.3) 234 (35.4)	(42.4) 386	(14.1) 175	(100.0) 1011 (466.6)	57	44	1112
(%) Private clinic (%)	(13.6) 216 (12.8)	(0.6) (0.7)	(2.6) 45 (2.7)	(4.5) 128 (7.6)	(23.1) 366 (21.6)	(38.2) 658 (38.9)	(17.3) 266 (15.7)	(100.0) $1691$ $(100.0)$	92	93	1876
Total (%)	459 (12.5)	21 (0.6)	81 (2.2)	209 (5.7)	842 (23.0)	1457 (39.8)	595 (16.2)	3664 (100.0)	209	179	4052

†Kouseiren: a welfare association belonging to agricultural cooperative associations.

 TABLE 17.
 Dialysate solution endotoxin concentrations (according to the type of facility)

			Dialysate solution endotoxin concentration (EU/ml	endotoxin concer	ntration (EU/mL)						
Kind of facility	<0.001	0.001-0.009	0.010-0.049	0.050-0.099	0.100-0.249	0.250-0.499	≥0.500	Subtotal	Unspecified	lvo information available	Total
National public university	30	10	4		0	0	0	45	2	4	51
(%)	(66.7)	(22.2)	(8.9)	(2.2)	(0.0)	(0.0)	(0.0)	(100.0)	,	ı	,
Private university hospital	24	17	10	000	100	0 0	000	52	ю	7	62
( % ) National hospital	(46.2) 14	(32.7)	(19.2)	0.0)	1.3)	0.0)	0.0)	(100.0)	5	6	40
(%)	(53.8)	(26.9)	(15.4)	(0.0)	(3.8)	(0.0)	(0.0)	(100.0)			
Prefectural municipal village hospital	197	87	42	9	2	2	ю	339	26	72	437
(%)	(58.1)	(25.7)	(12.4)	(1.8)	(0.6)	(0.6)	(0.9)	(100.0)			
Social insurance hospital	25	17	, ,	, E	, 0	, 0	, 0	, 52	ю	∞	63
(%)	(48.1)	(32.7)	(13.5)	(5.8)	(0.0)	(0.0)	(0.0)	(100.0)			
"Kouseiren" hospital	53	30	13	4	2	1	2	105	9	∞	119
(%)	(50.5)	(28.6)	(12.4)	(3.8)	(1.9)	(1.0)	(1.9)	(100.0)			
Other public hospital	68	43	15	4	_	0	0	152	5	27	184
(%)	(28.6)	(28.3)	(6.6)	(5.6)	(0.7)	(0.0)	(0.0)	(100.0)			
Private general hospital	4	24	13	<b>с</b>	2	<b>.</b>	0	87	7	14	108
(%)	(90.9)	(27.6)	(14.9)	(3.4)	(2.3)	(1.1)	(0.0)	(100.0)			
Private hospital	423	231	140	36	56	∞	4	898	09	184	1112
(%)	(48.7)	(56.6)	(16.1)	(4.1)	(3.0)	(0.9)	(0.5)	(100.0)			
Private clinic	789	399	182	50	28	6	С	1460	86	318	1876
(%)	(54.0)	(27.3)	(12.5)	(3.4)	(1.9)	(0.6)	(0.2)	(100.0)			
Total	1688	865	430	107	63	21	12	3186	215	651	4052
(%)	(53.0)	(27.2)	(13.5)	(3.4)	(2.0)	(0.7)	(0.4)	(100.0)			

<sup>†</sup>Kouseiren: a welfare association belonging to agricultural cooperative associations.

TABLE 18. Measurement frequency of the dialysate solution bacterial count (according to the type of facility)

	2	Measureme	nt frequer	icy of the dialy	sate solutio	urement frequency of the dialysate solution bacterial count					
Kind of facility	None	Every day	Every week	Every two weeks	Every	Several times per year	Once a year	Subtotal	Unspecified	No information available	Total
National public university hospital	21	0	0	0	6	15		46	8	2	51
(%)	(45.7)	(0.0)	(0.0)	(0.0)	(19.6)	(32.6)	(2.2)	(100.0)		ı	
Private university hospital	18	` _0	, —	, E	∞	19	, E	52	6	1	62
(%)	(34.6)	(0.0)	(1.9)	(5.8)	(15.4)	(36.5)	(5.8)	(100.0)			
National hospital	19	` ,0	,0	, T	, T	, 5	`4	30	4	9	40
(%)	(63.3)	(0.0)	(0.0)	(3.3)	(3.3)	(16.7)	(13.3)	(100.0)			
Prefectural municipal village hospital	199	, <del></del>	. —	. 7	45	92	39	363	48	26	437
(%)	(54.8)	(0.3)	(0.3)	(0.6)	(12.4)	(20.9)	(10.7)	(100.0)			
Social insurance hospital	25	,0	, 7	, 0	, 9	17	. 5	55	7		63
(%)	(45.5)	(0.0)	(3.6)	(0.0)	(10.9)	(30.9)	(6.1)	(100.0)			
"Kouseiren" hospital	40	.0	0	. 7	18	27	13	100	16	3	119
(%)	(40.0)	(0.0)	(0.0)	(2.0)	(18.0)	(27.0)	(13.0)	(100.0)			
Other public hospital	84	0	. 7	, m	78	31	50	168	∞	8	184
(%)	(50.0)	(0.0)	(1.2)	(1.8)	(16.7)	(18.5)	(11.9)	(100.0)			
Private general hospital	09	. 2	0	. 7	14	10	7	95	12	$\leftarrow$	108
(%)	(63.2)	(2.1)	(0.0)	(2.1)	(14.7)	(10.5)	(7.4)	(100.0)			
Private hospital	462	4	14	21	130	180	124	935	129	48	1112
(%)	(49.4)	(0.4)	(1.5)	(2.2)	(13.9)	(19.3)	(13.3)	(100.0)			
Private clinic	788	, CO	13	4	180	361	188	1597	176	103	1876
(%)	(49.3)	(0.2)	(0.8)	(4.0)	(11.3)	(22.6)	(11.8)	(100.0)			
Total	1716	10	33	86	439	741	404	3441	412	199	4052
(%)	(49.9)	(0.3)	(1.0)	(2.8)	(12.8)	(21.5)	(11.7)	(100.0)			

'Kouseiren: a welfare association belonging to agricultural cooperative associations.

Dialysate solution bacterial count (cfu/mL) No information Kind of facility < 0.1 0.1 - 0.910-99 ≥100 Unspecified Total 1\_9 Subtotal available 51 National public university hospital 8 0 23 5 23 (100.0)(34.8)(30.4)(17.4)(17.4)(0.0)Private university hospital 10 10 20 62 8 3 0 32. 11 (34.4)(31.3)(25.0)(9.4)(0.0)(100.0)National hospital 8 0 2 0 4 25 40 11 (%) (72.7)(0.0)(18.2)(9.1)(0.0)(100.0)Prefectural municipal village hospital 20 149 62 226 437 24 (53.0)(16.1)(14.8)(2.7)(100.0)(13.4)Social insurance hospital 10 6 2.7 10 26 63 (37.0)(22.2)(18.5)(22.2)(0.0)(100.0)"Kouseiren"† hospital 45 119 28 10 10 6 56 18 (50.0)(17.9)(17.9)(100.0)(10.7)(3.6)(%)Other public hospital 15 92 184 13 (16.9)(5.2)(2.6)(57.1)(18.2)(100.0)(%) Private general hospital 15 62 108 (48.4)(12.9)(19.4)(12.9)(6.5)(100.0)(%)Private hospital 179 174 514 1112 80 90 60 15 424 (100.0)(%)(42.2)(18.9)(21.2)(14.2)(3.5)Private clinic 137 79 15 239 902 1876 368 136 735 (18.5)(10.7)(2.0)(100.0)(%) (50.1)(18.6)Total 189 1565 1935 750 288 298 40 552 4052

**TABLE 19.** Dialysate solution bacterial counts (according to the type of facility)

(18.4)

(19.0)

(12.1)

(2.6)

#### 1. Changes over the past three years

(%)

Table 33 shows the distribution of hemoglobin concentrations in all the dialysis patients from the end of 2005 to the end of 2007. The mean hemoglobin concentrations in all the dialysis patients at the end of 2005, 2006, and 2007 were 10.23, 10.23, and 10.27 g/

dL, respectively, showing negligible change over these three years; however, the percentages of patients with hemoglobin concentrations <10.0 g/dL at the end of 2005, 2006, and 2007 were 39.0, 39.8, and 37.8%, respectively, showing a slight decrease in 2007. The percentages of patients with hemoglobin

(100.0)

**TABLE 20.** Media used for bacterial cultivation of the dialysate solution (according to the dialysate solution bacterial count)

					,				
Media used for bacterial cultivation of the dialysate	Dialy	ysate solutio	n bacterial	count (cfu	ı/mL)			No information	
solution	< 0.1	0.1 - 0.9	1–9	10-99	≥100	Subtotal	Unspecified	available	Total
General agar medium	122	33	27	14	3	199	21	0	220
(%)	(61.3)	(16.6)	(13.6)	(7.0)	(1.5)	(100.0)			
R2A medium	410	189	211	141	29	980	44	4	1028
(%)	(41.8)	(19.3)	(21.5)	(14.4)	(3.0)	(100.0)			
TGEA medium	55	24	23	7	1	110	1	0	111
(%)	(50.0)	(21.8)	(20.9)	(6.4)	(0.9)	(100.0)			
Blood agar medium	26	` 5 ´	4	4	1	40	8	4	52
(%)	(65.0)	(12.5)	(10.0)	(10.0)	(2.5)	(100.0)			
TSA medium	` 4 ´	1	1	2	1	9	0	0	9
(%)	(44.4)	(11.1)	(11.1)	(22.2)	(11.1)	(100.0)			
Other media	59	15	17	6	1	98	33	0	131
(%)	(60.2)	(15.3)	(17.3)	(6.1)	(1.0)	(100.0)			
Subtotal	676 <sup>°</sup>	267	283	174	36	1436	107	8	1551
(%)	(47.1)	(18.6)	(19.7)	(12.1)	(2.5)	(100.0)			
Unspecified	73	20	14	15	4	126	443	1151	1720
(%)	(57.9)	(15.9)	(11.1)	(11.9)	(3.2)	(100.0)			
No information available	1	1	1	` /	( )	3	2	776	781
(%)	(33.3)	(33.3)	(33.3)			(100.0)			
Total	750	288	298	189	40	1565	552	1935	4052
(%)	(47.9)	(18.4)	(19.0)	(12.1)	(2.6)	(100.0)			
` /	( )	( )	( )	. ,	( )	()			

R2A, Reasoner's No 2 agar; TGEA, tryptone glucose extract agar; TSA, tryptic soy agar.

<sup>(47.9)</sup> †Kouseiren: a welfare association belonging to agricultural cooperative associations.

**TABLE 21.** Amount of sample used for measuring dialysate solution bacterial count (according to the dialysate solution bacterial count)

	Dialy	sate solution	n bacterial	count (cfu/	/mL)			No information	
Amount of sample	<0.1	0.1-0.9	1–9	10–99	≥100	Subtotal	Unspecified	available	Total
<1 mL	141	28	22	10	3	204	20	2	226
(%)	(69.1)	(13.7)	(10.8)	(4.9)	(1.5)	(100.0)			
1–9 mL	253	113	132	68	16	582	74	4	660
(%)	(43.5)	(19.4)	(22.7)	(11.7)	(2.7)	(100.0)			
10–49 mL	152	64	71	<b>`</b> 58	`9 ´	354	21	1	376
(%)	(42.9)	(18.1)	(20.1)	(16.4)	(2.5)	(100.0)			
50–99 mL	Ì14	44	47	36	7	248	7	1	256
(%)	(46.0)	(17.7)	(19.0)	(14.5)	(2.8)	(100.0)			
100 499 mL	43	19	14	7	1	84	4	1	89
(%)	(51.2)	(22.6)	(16.7)	(8.3)	(1.2)	(100.0)			
500–999 mL	4	5	5	2	2	18	4	0	22
(%)	(22.2)	(27.8)	(27.8)	(11.1)	(11.1)	(100.0)			
ì–9 L	14	3	1	6	0	24	1	0	25
(%)	(58.3)	(12.5)	(4.2)	(25.0)	(0.0)	(100.0)			
≥10 L	3	0	0	0	0	3	0	0	3
(%)	(100.0)	(0.0)	(0.0)	(0.0)	(0.0)	(100.0)			
Subtotal	724	276	292	187	38	Ì517	131	9	1657
(%)	(47.7)	(18.2)	(19.2)	(12.3)	(2.5)	(100.0)			
Unspecified	24	12	5	2	2	45	420	1138	1603
(%)	(53.3)	(26.7)	(11.1)	(4.4)	(4.4)	(100.0)			
No information available	2	0	1	0	0	3	3	788	792
(%)	(66.7)	(0.0)	(33.3)	(0.0)	(0.0)	(100.0)			
Total	750	288	298	189	40	1565	552	1935	4052
(%)	(47.9)	(18.4)	(19.0)	(12.1)	(2.6)	(100.0)			

concentrations of  $\geq 10.0$  g/dL and <12.0 g/dL at the end of 2005, 2006, and 2007 were 52.7, 51.9, and 53.9%, respectively, showing a slight increase in 2007. The percentage of patients with a hemoglobin concentration of  $\geq 12.0$  g/dL remained at 8.3% from the end of 2005 to the end of 2007.

#### 2. Gender

Table 34 shows the relationship between hemoglobin concentration and gender. The mean hemoglobin concentration in male patients was 10.36 g/dL, whereas that in female patients was 10.13 g/dL, which was slightly lower than that in male patients. The percentage of patients with hemoglobin concentrations <10 g/dL was 35.1% in male patients and 42.2% in female patients, indicating that the number of patients with a low hemoglobin concentration is great in female patients.

#### 3. Age

Table 35 shows the relationship between hemoglobin concentration and age. The hemoglobin concentration in young patients aged 15 years or older and younger than 45 years was high, whereas that in patients older than this age group decreased with increasing age. Patients younger than 15 years also tended to have low hemoglobin concentrations.

#### 4. Primary disease

Table 36 shows the relationship between hemoglobin concentration and primary disease. The mean hemoglobin concentrations in patients with leading primary diseases were 10.33 g/dL (chronic glomerulonephritis), 10.22 g/dL (diabetic nephropathy), 10.20 g/dL (nephrosclerosis), and 10.45 g/dL (polycystic kidney disease). Patients with polycystic kidney disease tended to have a high hemoglobin concentration. No clear difference in hemoglobin concentration was found between other main primary diseases.

## 5. Change in iron metabolism-related indices over the past three years

Table 37 shows the changes in mean hemoglobin concentration, serum iron concentration, total

**TABLE 22.** Changes in hepatitis C virus (HCV) antibody prevalence

Year	1999	2000	2001	2002	2003	2006	2007
HCVAb prevalence (%)	15.95	14.56	13.88	13.06	12.37	10.22	9.83

 TABLE 23.
 Hepatitis C virus (HCV) antibody (HCVAb) prevalence and treatment methods (all dialysis patients)

	Total	235 960	17 759	303	1 543	161	8 630	264 356
	No information available	43 295	3 092	113	201	39	3 205	49 945
	Subtotal	192 665	14 667	190	1 342	122	5 425	214 411
or de s	HCV-RNA: unspecified	619	101	1	12	0	61	794
HCVAb: no information available	НСЛ-ВИА:+	148	21	0	∞	0	1	178
HC inf	НСУ-ВИА: –	880	74	0	7	0	9	296
	HCV-RUA: no information available	100	7	0	0	0	66	201
Ab: zified	HCV-RAA: unspecified	1974	4	0	10	4	211	2263
HCVAb: unspecified	HCV-RUA: +	196	31	0	15	0	0	242
	НСУ-RИА: –	1044	33	4	1	0	4	1086
	HCVAb prevalence† (%)	9.27	16.02	11.35	42.28	14.41	4.56	9.83
	Subtotal-1 - Subtotal-2	187 704	14 341	185	1 289	118	5 043	208 680
	S-latotdu2	17 407	2 297	21	545	17	230	20 517
+	HCV-RUA: no information available	3193	474	10	102	2	46	3827
HCVAb:+	HCV-RAA: unspecified	9029	813	S	212	6	110	7855
Ξ	HCA-BNV:+	4707	742	4	171	S	28	2657
	НСЛ-КИА: –	2801	268	7	09	Т	46	3178
	I-latotdu2	170 297	12 044	164	744	101	4813	188 163
.!.	HCV-RNA: no information available	35 980	2 524	131		6	996	39 759
HCVAb: –	HCV-RNA: unspecified	85 241	5 763	19	391	46	2 681	94 141
	HCV-RNA:+	209	35	0	4	0	2	250
	НСЛ-ВИУ: -	48 867	3 722	14	200	46	1164	54 013
	sizylaib 10 bod1sM	Facility hemodialysis	Hemodiafiltration	Hemofiltration	Hemoadsorption	Home hemodialysis	Peritoneal dialysis	Total

 $^{\dagger}$ HCVAb prevalence (%) = Subtotal-2  $\div$  (Subtotal-1 + Subtotal-2).

Hepatitis C virus (HCV) antibody (HCVAb) prevalence and gender (all dialysis patients) TABLE 24.

	IstoT	162 223 102 112 264 335 21	264 356
	No information available	30 611 19 334 49 945 0	49 945
	Subtotal	131 612 82 778 214 390 21	214 411
O E	HCV-RNA: unspecified	501 293 794 0	794
information available	HCV-RNA:+	116 62 178 0	178
inf	HCV-RNA:-	594 373 967 0	296
	HCV-RNA: no information available	131 70 201 0	201
Ab:	HCV-RAA: unspecified	1421 842 2263 0	2263
HCVAb: unspecified	HCV-RNA: +	150 92 242 0	242
	HCV-RNA: –	619 467 1086 0	1086
	HCVAb prevalence <sup>†</sup> (%)	10.52 8.74 9.83 0.00	9.83
	S-letotdu8 + 1-letotdu8	128 080 80 579 208 659 21	208 680
	S-latotdu2	13 476 7 041 20 517 0	20 517
HCVAb: +	HCV-RNA: no information available	2516 1311 3827 0	3827
	HCV-RNA: unspecified	5207 2648 7855 0	7855
	НСУ-КИА: +	3746 1911 5657 0	5657
	HCV-RNA: –	2007 1171 3178 0	3178
	I-latotdu2	114 604 73 538 188 142 21	188 163
	HCV-RNA: no information available	24 223 15 517 39 740 19	39 759
HCVAb: –	HCV-RNA: unspecified	57 299 36 840 94 139	94 141
	HCV-RNA: +	142 108 250 0	250
	HCV-RNA:-	32 940 21 073 54 013 0	54 013
	Genders	Male Female Subtotal No information available	Total

 $^{\dagger}$ HCVAb prevalence (%) = Subtotal-2 ÷ (Subtotal-1 + Subtotal-2).

**TABLE 25.** Hepatitis C virus (HCV) antibody (HCVAb) prevalence and duration of dialysis (all dialysis patients)

	IstoT	62 138 68 570 66 076 32 270 16 472 9 603 9 227 264 356 6.81	
	No information available	11 667 13 202 12 634 6 103 3 041 1 733 1 565 49 945 6.82 6.82	
	Subtotal	50 471 55 368 53 442 26 167 13 431 7870 7 662 214 411 6.84 7.02	
0. 1	HCV-RNA: unspecified	121 203 168 101 66 59 76 794 9.59 9.05	
HCVAb: no information available	НСЛ-ВИА: +	32 38 37 14 12 16 29 10.84 10.37	
田.田 "	НСУ-КИА: –	260 229 210 124 67 30 47 967 6.93 7.43	
	HCV-RNA: no information available	82 57 28 14 10 7 7 3 201 4.64 6.22	
Ab: ified	HCV-RNA: unspecified	687 564 531 247 127 58 49 2263 5.77 6.33	
HCVAb: unspecified	HCV-RNA:+	27 41 51 24 24 19 56 242 13.63 11.11	
	HCV-RNA: –	177 265 343 158 86 33 24 1086 7.28 6.24	
	HCVAb prevalence† (%)	7.56 7.89 7.85 7.78 10.71 23.30 44.69 9.83	
	S-latotdu2 + 1-latotdu2	49 085 53 971 52 074 25 485 13 039 7 648 7 378 208 680	
	S-latotdu?	3 713 4 258 4 087 1 983 1 397 1 782 3 297 20 517	
+	HCV-RNA: no information available	701 772 753 346 250 341 664 3827 11.25 10.58	
HCVAb: +	HCV-RNA: unspecified	1600 1661 1548 734 511 622 1179 7855 10.38	
	НСУ-КИА: +	847 1114 1084 571 417 555 1069 5657 12.09 10.63	6
	НСУ-КИА: –	565 7111 702 332 219 264 385 3178 9.99 9.64	Cubtotal
	I-latotdu2	45 372 49 713 47 987 23 502 11 642 5 866 4 081 188 163	$^{\dagger}$ HCVAb menalongo (%) – Subtotal 2 $\pm$ (Subtotal 1 $\pm$ Subtotal
1.	HCV-RNA: no information available	9271 10 581 10 077 4 857 2 672 1 366 9 35 39 759 6.56 6.51	S) - Clote
HCVAb: –	HCV-RNA: unspecified	22 936 24 849 24 042 11 844 5 711 2 794 1 965 94 141 6.32 6.31	2. ) - Culbt
	HCA-KNY:+	52 57 52 30 16 15 28 250 9.26 9.34	Jones (
	НСУ-RNA: –	13 113 14 226 13 816 6 771 3 243 1 691 1 153 54 013 6.35 6.35	/Ah nrow
	Duration of dialysis (years)	22 4 5-9 10-14 15-19 20-24 ≥25 Total Mean SD	)HJ

HCVAb prevalence (%) = Subtotal-2  $\div$  (Subtotal-1 + Subtotal-2).

Hepatitis C virus (HCV) antibody (HCVAb) prevalence and age (all dialysis patients) TABLE 26.

	Total	106 1 697 1 6421 67 441 115 321 60 728 2 636 2 64 350 6 6 2 2 64 356 6 64.87
	oldslisva noinsmroini oN	38 353 3187 112890 21477 111465 532 49 942 3 49 945 64.76
	Subtotda2	68 1 344 13 234 54 551 93 844 49 263 2 104 2 104 2 14 408 3 2 14 411 64.89 12.66
0 д	HCV-RNA: unspecified	0 5 43 236 316 188 6 794 0 0 774 64.22
HCVAb: no information available	HCV-RNA:+	0 0 7 74 46 0 0 178 0 178 65.76
HC inf	HCV-RNA: –	0 7 7 64 243 420 225 8 8 967 0 0 967 64.91
	HCV-RNA: no information available	0 3 115 63 885 32 32 201 0 0 62.57
Ab:	HCV-RNA: unspecified	8 19 149 555 961 547 24 2263 0 0 2263 64.57
HCVAb: unspecified	HCA-KNV:+	0 0 1115 1115 50 2 242 0 0 242 0 1007
	HCV-RNA: –	0 9 70 255 482 251 19 1086 0 0 1086 65.45
	HCVAb prevalence <sup>†</sup> (%)	0.00 2.23 5.47 10.51 10.68 9.05 5.14 9.83 33.33
	S-latotdu2 + 1-latotdu2	60 1 301 12 882 53 077 91 391 47 924 2 042 2 042 2 08 677 3 3
	Subtotal-2	0 29 705 5 578 9 764 4 335 105 20 516
+	HCV-RNA: no information available	0 2 138 1119 1838 717 12 3826 1 3827 64.68
HCVAb: +	HCV-RNA: unspecified	0 226 2005 3823 3823 1744 47 7855 0 0 7855 65.90
Н	HCV-RNA:+	0 226 1676 2626 11101 21 21 5657 0 0 5657 64.52
	НСЛ-КИА: –	0 10 115 778 1477 773 25 3178 0 0 3178 66.15
	I-latotdu2	60 1 272 12 177 47 499 81 627 43 589 1 937 188 161 2 188 163
1	HCV-RNA: no information available	294 2 619 10 126 17 153 9 149 39 758 39 758 64.66 12.91
HCVAb: –	HCV-RNA: unspecified	29 620 620 6083 23 765 40 903 21 774 966 94 140 1 94 141 64.85
н	HCA-KNY:+	0 28 25 250 250 250 250 250 250 11.76
	НСЛ-ВИА: –	356 3469 13 550 23 456 12 598 572 54 013 0 54 013 64.96 12.80
	(z169 <u>v</u> ) əgA	<15 15-29 30-44 45-59 60-74 75-89 ≥90 Subtotal No information available Total Mean SD

 $^{\dagger}$ HCVAb prevalence (%) = Subtotal-2  $\div$  (Subtotal-1 + Subtotal-2).

**TABLE 27.** Hepatitis C virus (HCV) antibody (HCVAb) prevalence and primary disease (all dialysis patients)

	IstoT	1894	392	1 775	1 214	552 3 138 692	262	106 704 88 258 548 4 725 19 453 644	1 257 17 144 513 1 742	1 956 2 261	8 920 207 264 251 105	264 356
	oldslisvs noitsmrotni oN	381	80	311	257	86 598 137	09	20 210 16 326 107 954 4 072 95	219 3 065 106 377	405 484	524 46 900 45	49 945
	Istoiduð	1 513	312	1 464	957	466 2 540 555	202	86 494 71 932 441 3 771 15 381 549	1 038 14 079 407 1 365	1 551 1 777		214 411
O E	HCV-RNA: unspecified	5	1	8	1	2 16 4	0	411 236 0 10 45	22 3 7	4 v		794 2
HCVAb: no information available	HCV-RNA:+	S.	0	2	0	3 0	0	72 69 0 2 10 0	0 0 0 0	0 1	5 0 178 0	178
HC info	HCA-RAA:-	7	0	5	5	1 6 2	0	394 348 1 8 63	L 88 2 4	11 8	29 1 967 0	296
	HCV-RVA: no information available	14	0	2	2	0 7 0	0	62 72 72 8 8 9 7 7	$\begin{array}{c} 0 \\ 10 \\ 0 \end{array}$	0 0	3 0 199 2	201
Ab: ified	HCV-RVA: unspecified	18	S	13	6	8 8 8	2	900 731 111 42 220	10 142 3 15	11	75 2 2263 0	2263
HCVAb: unspecified	HCV-RNA:+	2	2	т	2	0 0 1	0	123 81 1 5 5 0	1 0 0 1	0 7		242
	HCV-RNA:-	-	0	2	S	2 1 4	0	491 386 2 15 15 58	7 04 1	9	44 1 1086 0	1086
	HCVAb prevalence <sup>†</sup> (%)	20.81	20.07	13.95	12.65	11.48 11.32 10.84	10.50	10.35 10.29 9.39 9.20 8.62 7.64	7.44 6.89 6.80 6.66	6.53	6.19 4.52 9.83 15.52	9.83
	S-latotdu& + 1-latotdu&	1 461	304	1 434	933	453 2 482 535	200	84 041 70 009 426 3 684 14 950 537	1 008 13 795 397 1 337	1 516 1 740	7 225 155 208 622 58	208 680
	Subtotal-2	304	61	200	118	52 281 58	21	8 695 7 206 40 339 1 289 41	75 950 27 89	99	447 7 20 508 9	20 517
+	HCV-RVA: no information available	99	10	46	21	8 55 11	3	1584 1409 5 61 224 4	12 155 7 24	20 21	74 3822 5	3827
HCVAb: +	HCV-RVA: unspecified	113	22	65	40	18 95 21	7	3236 2838 14 136 518	27 389 6 6	37 37	180 4 7852 3	7855
<b>Д</b>	HCV-RNA:+	94	18	55	34	16 74 14	9	2531 1909 12 94 317 11	21 239 11 16	29 35	119 1 5656 1	5657
	HCV-RNA:-	31	11	34	23	10 57 12	S	1344 1050 9 48 230 10	15 167 3 16	13	74 0 3178 0	3178
	I-latotdu2	1 157	243	1 234	815	401 2 201 477	179	75 346 62 803 386 3 345 13 661 496	933 12 845 370 1 248	1 417 1 631	6 778 148 188 114 49	188 163
1.	HCV-RNA: no information available	247	38	288	186	91 515 92	37	15 979 13 097 87 662 2 924 114	197 2 627 90 276	346 360	1 456 36 39 745 114	39 759
HCVAb: –	HCV-RNA: unspecified	602	136	604	386	192 1 028 255	101	37 281 31 464 200 1 700 6 918 230	474 6 720 197 649	661 835	3 408 74 94 115 26	94 141
	HCA-KNV:+	S	1	2	1	0 3 1	0	100 91 7 7 2	1 0 0 1	0	6 0 250 0	250
	НСУ-КИА: –	303	89	340	242	118 655 129	41	21 986 18 151 98 976 3 801 150	261 3 489 83 322	410	1 908 38 54 004 9	54 013
	əssəsib yısmir¶	Reintroduction after	Kidney and urinary tract	Nephropathy of pregnancy/	Other nephritides that cannot	Kidney and urinary tract stone Chronic pyelonephritis Obstructive urinary tract	Renal failure due to congenital	abnormality of metabolism Chronic glomerulonephritis Diabetic nephropathy Hypoplastic kidney Others Undetermined Kidney and urinary tract	tumor Gouty kidney Nephrosderosis Amyloidal kidney Rapidly progressive	glomerulonephrius Malignant hypertension Systemic lupus erythematosus	nephritis Polycystic kidney Myeloma Subtotal No information available	Total

 $^{\dagger}$ HCVAb prevalence (%) = Subtotal-2 ÷ (Subtotal-1 + Subtotal-2).

 TABLE 28.
 Hepatitis B virus surface antigen (HBsAg) prevalence and treatment methods (all dialysis patients)

	IstoT	235 960 17 759 303 1 543 161 8 630 264 356
	oldslisvs noitsmrotni oN	42 740 3 041 164 204 40 3 235 49 424
	Subtotal	193 220 14 718 139 1 339 1 121 5 395 214 932
	HBsAg prevalence (%) $^{\dagger}$	1.94 1.97 1.45 3.69 1.71 1.52 1.94
	Subtotale + 1-listotale	188 636 14 463 138 1 301 117 5 009 5 209 664
	(+ gAsAH) S-latotdu2	3664 285 2 48 2 76 4077
	(– gAsHI) 1-latotdu2	184 972 14 178 136 1 253 115 4 933 205 587
ly: on	HBsAg: unspecified	19 3 0 0 0 9 31
HBs antibody no informatior available	+:gAsAH	464 42 0 3 0 111 520
HBs a no info ava	− :gAsH	19 049 1 686 4 96 4 680 21 519
	HBsAg: no information available	229 16 0 111 0 49 305
ibody: ified	HBsAg: unspecified	1749 43 0 6 4 282 2084
HBs antibody unspecified	+:gAsH	723 59 0 10 0 29 821
田」	- :gAsH	47 508 3 206 17 3 44 8 1 1 888 52 971
+	noitsmroini on :gAsaH eldslisvs	341 47 1 3 0 6 398
Bs antibody:	HBsAg: unspecified	78 2 0 0 0 0 81
s anti	+:gAsaH	627 51 0 7 7 7 692
HB	− :gAsH	16 152 1 328 1 328 154 14 128 17 781
	noitsmroini on :gAsaH eldelieve	1198 90 0 12 0 12 12 1312
ody: –	HBsAg: unspecified	970 54 0 5 0 28 1057
HBs antibody: –	+:gAs&H	1850 133 2 28 2 2 29 29 2044
HB	- :gAsH	102 263 7 958 110 659 89 2 237 113 316
	Method of dialysis	Facility hemodialysis Hemodiafiltration Hemodiltration Hemoadsorption Home hemodialysis Peritoneal dialysis Total

†HBsAg prevalence (%) = Subtotal-2 ÷ (Subtotal-1 + Subtotal-2).

Hepatitis B virus surface antigen (HBsAg) prevalence and genders (all dialysis patients) TABLE 29.

	No information available	0 30 303 162 223	49 424	0	2 49 424 264 356	
	Subtotal	131 920	214 91	(4	214 932	
	HBsAg prevalence (%) $^{\dagger}$	5 2.07			1.94	
	S-latotdu2 + 1-latotdu2	128 626	209 643	2	209 664	
	Subtotal-2 (HBsAg +)	2662			4077	
	(– gAsH) 1-lstotdu2	125 964	205 566	21	205 587	
dy: ion	HBsAg: unspecified	23	31	0	31	
HBs antibody: no informatior available	HBsAg: +	346	520	0	520	
HBs no in av	HBsAg: -	13 209	21 500	19	21 519	
	noitsmroini on :gAsHH sosilable	193	305	0	305	
tibody. cified	HBsAg: unspecified	1296	2084	0	2084	
HBs antibod unspecified	HBsAg: +	526			821	
Н	-:gAsaH	32 372	52 969	2	52 971	
+	HBsAg: no information	244	398	0	398	
antibody: +	HBsAg: unspecified	38			81	
HBs ant	HBsAg: +	9 464			1 692	
Д	-:gAsaH	11 059	17 78		17 78	
	noitsmroini on :gAsaH seliable	847	1312	0	1057 1312 17781	
ody: –	HBsAg: unspecified	653	1057	0	1057	
HBs antibody: –	+:gAsAH	1326	2044	0	2044	
田	- :gAsH	69 324	113 316	0	113 316	
	Gender	Male	Subtotal	No information available	Total	

†HBsAg prevalence (%) = Subtotal-2  $\div$  (Subtotal-1 + Subtotal-2).

**TABLE 30.** Hepatitis B virus surface antigen (HBsAg) prevalence and durations of dialysis (all dialysis patients)

	Total	62 138 68 570 66 076 32 270 16 472 9 603 9 227 264 356 6.88
	oldslisvs noitsmrotni oN	11 663 13 031 12 448 6 021 2 983 1 725 1553 49 424 6.67 6.84
	Subtotal	50 475 55 539 53 628 26 249 13 489 7 878 7 674 214 932 6.84
	HBsAg prevalence $(\%)^\dagger$	1.69 1.80 1.89 2.14 2.31 2.51 3.21
	Subtotald + 1-Intotald	49 146 54 162 52 348 25 688 13 175 7 699 7 446 209 664
	(+ gAsAH) S-Istotdu2	831 973 987 550 304 1193 239 4077
	(– gAsaH) I-Istotdu2	48 315 53 189 51 361 25 138 12 871 7 506 7 207
y: on	HBsAg: unspecified	15 7 7 7 1 0 0 0 3.19 4.34
HBs antibody: no information available	+:gAsAH	1114 1119 123 73 45 24 22 520 7.69 7.53
HBs no in av	−:gAsH	4 980 5 737 5 451 2 486 1 323 792 750 21 519 6.77 6.94
	noitsmroini on :gAsHH available	48 95 71 47 11 11 15 305 7.72
ibody: zified	HBsAg: unspecified	625 543 493 217 113 46 47 2084 5.68 6.26
HBs antibody: unspecified	HBsAg:+	189 215 175 106 59 32 45 821 7.50
	- :gAsH	12 977 13 653 13 075 6 416 3 244 1 803 1 803 6 693
	HBsAg: no information	65 110 96 45 32 118 32 32 38 88.71
lbody: +	HBsAg: unspecified	8 15 20 20 12 8 8 6 12 11 81 11.59 9.47
HBs antibody: +	HBsAg:+	124 158 182 96 58 43 31 692 8.20 7.55
	-:gAsH	3 362 4 472 4 573 2 303 1 269 825 977 17 781 7.89
	HBsAg: no information	250 317 309 160 105 70 101 1312 8.60 8.40
ody: –	HBsAg: unspecified	318 290 284 79 38 27 21 11057 5.26 6.03
HBs antibody: –	+ :gAsAH	404 481 507 275 142 94 141 2044 8.15 8.03
Н	− :gAs&H	26 996 29 327 28 262 13 933 7 035 4 086 3 677 113 316 6.73
(s.	Duration of dialysis (year	<pre>&lt;2 2-4 5-9 10-14 10-14 20-24 ≥25 Total Mean SD</pre>

 $^{\dagger}$ HBsAg prevalence (%) = Subtotal-2  $\div$  (Subtotal-1 + Subtotal-2).

**TABLE 31.** Hepatitis B virus surface antigen (HBsAg) prevalence and ages (all dialysis patients)

	IstoT	106	1 697	16 421	67 441	115 321	60 728	2 636	264 350	9	264 356	64.87	12./1
	No information available	38	346	3 136	12 758	21 254	11 365	524	49 421	3	49 424	64.78	12.89
	Subtotal	89	1351	13 285	54 683	94 067	49 363	2 112	214 929	3	214 932	64.89	12.66
	HBsAg prevalence (%)†	0.00	1.14	1.55	2.50	5.06	1.25	1.51	1.94	0.00	1.94		
	Subtotal + Subtotal >	58	1 311	12 953	53 320	91 757	48 207	2 055	209 661	3	209 664		
	(+ gAsAH) S-latotdu2	0	15	201	1334	1894	602	31	4077	0	4077		
	(– gAsaH) I-Istotdu2	58	1 296	12 752	51 986	89 863	47 605	2 024	205 584	3	205 587		
dy: ion	HBsAg: unspecified	0	0	1	∞	16	S	1	31	0	31	65.94	10.64
HBs antibody: no information available	+:gAsaH	0		27	159	250	9/	_	520	0	520	63.21	11.51
HBs no ii a	−:gAsH	13	148	1280	5547	9311	2000	220	21 519	0	21 519	64.90	17.72
	noitsmrotni on :gAsHH svailable	0	c	10	68	151	20	2	305	0	305	63.83	11.53
lbody: ified	HBsAg: unspecified	8	20	142	526	866	465	24	2084	0	2084	64.07	13.69
HBs antibody: unspecified	+:gAsH	0		45	566	383	117	6	821	0	821	62.83	11.39
_	−:gAsaH	11	354	3 250	13 065	23 304	12 471	515	52 970	1	52 971	65.07	17.68
	noitsmrofini on :8AsHH svailable									0		66.93	
ody:+	HBsAg: unspecified	0	0	0	18	47	16	0	81	0		66.25	
HBs antibody: +	+:gAsaH	0	9	34	215	311	120	9	692	0	692	63.66	11.68
H	– :gAs⊞	0	19	457	3 970	8 487	4 626	222	17 781	0	17 781	67.17	11.09
	HBsAg: no information	0	4	104	381	548	264	11		0		63.58	
- ;dy:	HBsAg: unspecified	2	12	4	246	463	257	13	1057	0		55.06	
HBs antibody: –	+:gAsH	0	7	95	694	950	289	6	2044	0	2044	62.89	01.11
Ħ	−:gAsHH	34	775	7 765	29 404	48 761	25 508	1 067	113 314	2	113 316	64.53	12.86
	Age (years)	<15	15–29	30-44	45–59	60–74	75–89	06≪	Subtotal	No information available	Total	Mean	SD

 $^{\dagger}$ HBsAg prevalence (%) = Subtotal-2 ÷ (Subtotal-1 + Subtotal-2).

 TABLE 32.
 Hepatitis B virus surface antigen (HBsAg) prevalence and primary diseases (all dialysis patients)

	IstoT	392	1 775	1 257 1 214	8 920	4 725	106 704 692		19 455 1 894		207	88 258	2 261		548	1, 144	262	644	5	513	1742	552	264 251 105	264 356
		79	309	210 259	501		947 10 143		4 038 1 379			~				7	09	01	1	110	7.7		379 26 45	
	əldslisva noitamrotni oV				1		19					16				n							49	464
	Subtotal	313	1 466	1 047 955	7 419	3 780	86 757 549		515 L		161	72 083	1 788		45	14 110	202	553		403	1370	467	214 872	214 932
	HBsAg prevalence $(\%)^\dagger$	3.57	2.89	2.14	2.13	2.12	2.08 2.04	,	1.90		1.90	1.85	1.09		1.64	1.39	1.52	1 48	01:1	1.02	0.97	9.00	3 39	1.94
	Subtotal-1 Subtotal-2	308	1 419	1 026 935	7 271	3 674	84 570 539	9	14 985	2	158	70.343	1 742		426	15 807	197	541	1	394	1 339	460	209 605	209 664
	(+ gAsAH) S-IntotduS	11	41	22 20	155	78	1757	6	282 28		8	1304	29		7.5	219	į κ	œ	0	4 (	13		4075 2	
	(– gAsAH) 1-listotdu2	297	1 378	1 004 915	7 116	3 596	82 813 528	000	14 692 1 429	ì	155	69 039	2 430 1 713		419	13 388	194	533		390	1 326		205 530	
:: ¤	HBsAg: unspecified	0	0	0 0	0	0	13	,	n C		0	۷ -			0 (	7 0	0	C		0	7	0	31	31
HBs antibody: no information available	HBsAg:+	0	∞	1 2	29	9	223 3	ć	ુ ←	4	0 ;	101 401	4 <del>4</del>		- 5	رد 4	0	0		₩.	4	0	520	520
HBs a no infe ava	- :gAsH	22	155	113	735	323	8 592 46	6	1 429	1	19	, 448 2.5	215		94 ;	1413 151	19	54	5	43	160	54	21 518	21 519
	noitsmroini on :gAsHH soldslisvs	0	1		7	∞	151	,	1 4	-	- ·	56 -	4		;	11	0	0		•	7	1	305	305
lbody: ified	HBsAg: unspecified	ε	14	111	54	49	826 5	6	30	9	- ;	626	13		9 5	8		v	,	4 ;	13	4	2083	2084
HBs antibody: unspecified	HBsAg:+	2	6	4 4	33	14	336 1	i	7 9		- 5	208	ν ∞		<del>,</del>	ę "	0	C		Η.	3	0	820	821
H	− :gAsH	84	314	242 212	1 866		21 333 145		384	9		17 888	437		107	333	56	138	000	115	410	130	52 944 27	52 971
	HBsAg: no information available	-	7	0	14	$\varepsilon$	151	ţ	J 4	-	0 ;	140	o vo		0 5	ر د	0	'n	,	₩.	$\mathcal{C}$	0	398	398
ody: +	HBsAg: unspecified	-	4	0	$\leftarrow$	$\vdash$	94	7	- O		0 ;	19 0	0		0	0 -	0	0			0	0	81	81
HBs antibody: +	HBsAg: +	2	7	9 4	21	6	306	(	2 7 4	-	- 3	216	9		7 5	ر د	0	C	1	0	3	2	691	692
HBs	- :gAsH	33	137	100	657	311	7356 52	1	135/		10	5 615	117		23	1 218	16	43	f	32	100	37	3 3	17 781
	HBAsB; no information gAsBH	0	13	9 4	40	24	603 2	ί	° ∞		0 ;	425	9 =====================================		;	00	0	'n	,	₩.	4	2	1312	1312
dy: –	HBsAg: unspecified	0	∞	т п	32	21	397 3	Ċ	2 /8	1	_ ;	396	17		4 (	ο 6	1 4	-	-	<b>→</b> I	_		1057	1057
HBs antibody: –	HBsAg:+	7	17	11	72	49	892	5	140	ì	1	929	11		m 8	g C	3 6	٧		7	m		2044 2044	2044
HB	– :gAs8H	158	772	549 512	3 858	2 1111	45 532 285	500	787	3	87	38 088	1 44 44 44		243	208 875	103	298		200	929		113 290	113 316
	Primary disease	Kidney and urinary tract	Nephropathy of pregnancy/	Gouty kidney Other nephritides that cannot	be classified Polycystic kidney	Others	Chronic glomerulonephritis Obstructive urinary tract	disease	Undetermined Reintroduction after	transplantation	Myeloma	Diabetic nephropathy	Systemic lupus erythematosus	nephritis	Hypoplastic kidney	Nephroscierosis Malionant hypertension	Renal failure due to congenital	abnormality of metabolism	tumor	Amyloidal kidney	Rapidly progressive olomerulonenhritis	Kidney and urinary tract stone	Subtotal No information available	Total

 $^{\dagger}HBsAg$  prevalence (%) = Subtotal-2 ÷ (Subtotal-1 + Subtotal-2).

 TABLE 33.
 Changes in pre-dialysis hemoglobin concentration (all dialysis patients)

		Pre-dia	Pre-dialysis hemoglobin concentration (g/dL) $$	in concentration	on (g/dL)			No information			
	<8.0	8.0–8.9	6.6-0.6	10.0-10.9	11.0-11.9	≥12.0	Subtotal	available	Total	Mean	SD
Patients at the end of 2005	6564	12 707	33 785	45 231	26 608	11 298	136 193	31 919	168 112	10.23	1.37
(%)		(6.3)	(24.8)	(33.2)	(19.5)	(8.3)	(100.0)				
Patients at the end of 2006		21 622	54 878	71 654	40 619	17876	216 178	33 779	249 957	10.23	1.33
(%)	(4.4)		(25.4)	(33.1)	(18.8)	(8.3)	(100.0)				
Patients at the end of 2007	9604		55 658	77 395	45 918	18 973	228 842	35 514	264 356	10.27	1.32
(%)	(4.2)	(9.3)	(24.3)	(33.8)	(20.1)	(8.3)	(100.0)				

 TABLE 34.
 Pre-dialysis hemoglobin and gender (all dialysis patients)

			Pre-	sis hemoglot	dialysis hemoglobin concentration (g/dL)	tion (g/dL)				No information			
Gender	<7.0	7.0-7.9	8.0-8.9	6.0-0.6	10.0-10.0	11.0-11.9	11.0-11.9 12.0-12.9	≥13.0	Subtotal	available	Total	Mean	SD
Male	1790	3788	11 927	1	47 152		9 823	3733		21 799	162 223	10.36	1.35
(^/o) Female (9/)	1189	2836	9 363		30 237		4 257	1160		13 715	102 112	10.13	1.27
( ^o ) Subtotal	2979	(1.3) (3.2) 2979 (624	21 290	55 649	77 389	-	14 080	4893	228 821	35 514	264 335	10.27	1.32
(70) No information available	(C.1) 0	(2.9)	(c.9)		(55.6)		(0.2) 0	0		0	21	9.5	0.88
Total (%)	2979 (1.3)	6625 (2.9)	21 294 (9.3)	55 658 (24.3)	77 395 (33.8)	45 918 (20.1)	14 080 (6.2)	4893 (2.1)	228 842 (100.0)	35 514	264 356	10.27	1.32

**IABLE 35.** Pre-dialysis hemoglobin concentrations and age (all dialysis patients)

			Pre-dialys	ialysis hemoglobin concentration (g/dL)	concentration	(g/dL)				No information			
ge (years)	Less than 7	7~	~	~6	~01	11~	12~	13~	Subtotal	available	Total	Mean	SD
<15	8	4	9	16	10	11	9	S	61	45	106	10.29	2.09
	(4.9)	(6.6)	(8.8)	(26.2)	(16.4)	(18.0)	(8.8)	(8.2)	(100.0)	ļ			į
	15	26	76	305	466	365	116	34	1 424	273	1 697	10.5	1.31
	(1.1)	(1.8)	(8.9)	(21.4)	(32.7)	(25.6)	(8.1)	(2.4)	(100.0)				
₩.	126	284	1 026	2 901	4 744	3 415	1 181	456	14 133	2 288	16 421	10.51	1.32
	(0.0)	(2.0)	(7.3)	(20.5)	(33.6)	(24.2)	(8.4)	(3.2)	(100.0)				
0	999	1385	4 546	13 038	19 962	12 754	4 365	1661	58 375	9906	67 441	10.41	1.34
	(1.1)	(2.4)	(7.8)	(22.3)	(34.2)	(21.8)	(7.5)	(2.8)	(100.0)				
	1284	2858	9 391	24 844	34 269	19 779	5 806	1963	100 194	15 127	115 321	10.25	1.3
	(1.3)	(2.9)	(9.4)	(24.8)	(34.2)	(19.7)	(5.8)	(2.0)	(100.0)				
0	<del>\$</del>	1964	5 931	13 957	17 222	9 230	2 521	752	52 421	8 307	60 728	10.09	1.31
	(1.6)	(3.7)	(11.3)	(26.6)	(32.9)	(17.6)	(4.8)	(1.4)	(100.0)				
	43	104	297	969	, 720 ,	364	85	22	2231	405	2 636	96.6	1.34
	(1.9)	(4.7)	(13.3)	(26.7)	(32.3)	(16.3)	(3.8)	(1.0)	(100.0)				
tal	2979	6625	21 294	55 657	77 393	45 918	14 080	4893	228 839	35 511	264 350	10.27	1.32
	(1.3)	(2.9)	(6.3)	(24.3)	(33.8)	(20.1)	(6.2)	(2.1)	(100.0)				
formation available	. 0	. 0	0	, T	. 2	0	0	0	. 8	3	9	10.27	0.35
Total	2979	6625	21 294	55 658	77 395	45 918	14 080	4893	228 842	35 514	264 356	10.27	1.32
	(1.3)	(2.9)	(6.3)	(24.3)	(33.8)	(20.1)	(6.2)	(2.1)	(100.0)				
	66.91	67.31	66.82	65.87	64.76	63.63	62.43	61.33	64.88	64.79	64.87		
	12.51	12.48	12.49	12.42	12.50	12.83	12.92	12.82	12.65	13.08	12.71		

iron-binding capacity, transferrin saturation level, and serum ferritin concentration in all the dialysis patients over the past three years. To easily understand the changes, the percentages of the mean values in each year with respect to those in 2005 are also given.

As mentioned above, little change was observed in hemoglobin concentration; however, the serum iron concentration, transferrin saturation level, and serum ferritin concentration tended to increase from 2005 to 2006. In contrast, the total iron-binding capacity decreased. These changes may be due to the inclusion of the price of erythropoietin in the artificial kidney technical fee, which was determined on the basis of the system for medical treatment fee revised in 2006. That is, with the revision of the system, it was considered that a sufficient amount of iron has been supplemented to dialysis patients.

#### 6. Transferrin saturation level

Table 38 shows the relationship between hemoglobin concentration and transferrin saturation level. Patients with high hemoglobin concentrations tended to have high transferrin saturation levels.

#### 7. Serum ferritin concentration

Table 39 shows the relationship between hemoglobin concentration and serum ferritin concentration. Patients with high hemoglobin concentrations tended to have low serum ferritin concentrations.

In anemia therapies, both the serum ferritin concentration and transferrin saturation level are regarded as indices reflecting iron sufficiency. In general, it is understood that the decrease in either of the indices indicates the necessity of iron supplementation. Results of this survey, however, showed that the transferrin saturation level increased with increasing hemoglobin concentration, whereas the serum ferritin concentration decreased with increasing hemoglobin concentration. These findings suggest differences in the roles of iron metabolism between the transferrin saturation level and serum ferritin concentration.

#### 8. Serum C-reactive protein concentration

Table 40 shows the relationship between hemoglobin concentration and serum C-reactive protein (CRP) concentration. For patients with hemoglobin concentrations <10.0 g/dL, the percentage of patients with a high serum CRP concentration increased with decreasing hemoglobin concentration.

#### D. History of hip fracture

Conventionally, the history of fracture in dialysis patients has not been surveyed; this survey was the

 TABLE 36.
 Pre-dialysis hemoglobin concentrations and primary disease (all dialysis patients)

						,	,						
			Pre-dial	ysis hemogloł	Pre-dialysis hemoglobin concentration (g/dL)	ion (g/dL)				No			
Primary disease	<7.0	7.0-7.9	8.0–8.9	6.6-0.6	10.0-10.9	11.0–11.9	12.0–12.9	≥13.0	Subtotal	available	Total	Mean	SD
Chronic glomerulonephritis	1047	2424	7903	22 132	31 863	19 189	6113	2071	92 742	13 962	106 704	10.33	1.31
(%)	(1.1)	(2.6)	(8.5)	(23.9)	(34.4)	(20.7)	(6.6)	(2.2)	(100.0)	LCV	2 120	70 01	1 33
(%)	(1.1)	(3.0)	(9.4)	(24.1)	(33.9)	(20.2)	(6.3)	(2.0)	(100.0)	77†	0.110	10.7	1.32
Rapidly progressive glomerulonephritis	23	57	132	357	,466 ,33.3)	293	) (8)	26 (	1,449	293	1 742	10.23	1.34
(%) Nephropathy of pregnancy/pregnancy toxemia	(1.6) 16	(3.9) 38	(9.1) 135	(24.0) 423	(32.2)	(20.2) 301	(6.6) 81	(1.8) 18	(100.0) 1 570	205	1 775	10.22	1.18
(%) Other neathritides that connect he classified	(1.0)	(2.4)	(8.6)	(26.9)	(35.5)	(19.2)	(5.2)	(1.1)	(100.0)	155	1 21 4	10.35	1 35
(%)	(1.1)	(3.4)	(8.6)	(21.8)	(33.2)	(22.8)	(6.9)	(2.2)	(100.0)	661	+171	0.01	C:.1
Polycystic kidney	77	181	611	1 843	2 592	1 670	605	301	7 880	1 040	8 920	10.45	1.38
(''o') Nephrosclerosis	199	456	1 455	3 787	5 119	2 892	792	260	14 935	2 209	17 144	10.20	1.30
(%) Malignant hypertension	(1.3) 21	(3.1)	(9.7) 161	(25.4) 397	(34.3) 564	(19.4) 315	(5.1) $105$	(1.7) 45	(100.0) $1650$	306	1 956	10.29	1.38
(%) Diabetic nephropathy	(1.3) 1118	(2.5) 2388	(9.8) 7 796	(24.1) 18 979	(34.2) 25 626	(19.1) 14 771	(6.4) $4471$	(2.7) 1553	(100.0) 76 702	11 556	88 258	10.22	1.33
(%) Systemic lupus erythematosus nephritis	(1.5)	(3.1)	(10.2) $194$	(24.7) 504	(33.4) 632	(19.3) 362	(5.8)	(2.0) 32	(100.0) 1 918	343	2 261	10.14	1.30
(%) Amvloidal kidnev	(1.6)	(3.5)	(10.1) 46	(26.3)	(33.0)	(18.9) 94	(5.0)	(1.7)	(100.0) 432	81	513	10.21	1.32
(%)	(0.9)	(3.9)	(10.6)	(24.8)	(31.0)	(21.8)	(5.6)	(1.4)	(100.0)	1 140	1 257	10.41	1 22
(%)	(1.0)	(2.7)	(8.5)	(21.5)	(33.8)	(22.3)	(7.3)	(3.0)	(100.0)	143	1571	10.41	t.: ,
Renal failure due to congenital abnormality of metabolism	m	4	19	51	7.1	52	15	9	221	41	262	10.38	1.39
(%) Kidney and urinary tract tuberculosis	(1.4)	(1.8)	(8.6)	(23.1)	(32.1)	(23.5)	(6.8)	(2.7)	(100.0) 332	09	392	10.14	1.29
(%) Kidney and urinary tract stone	(0.6)	(3.0)	(12.7)	(30.1)	(29.2)	(16.3)	(5.7)	(2.4)	(100.0)	- 22	552	10.17	30
(%)	(1.9)	(3.1)	(9.4)	(26.0)	(33.3)	(19.2)	(5.6)	(1.5)	(100.0)	1	1	17:01	0
Kidney and urinary tract tumor	12	26	82 (14 4)	133	173	124	16	3 (5)	569	75	644	66.6	1.28
Obstructive urinary tract disease	14.	50°S	46	137	215	104		2000	596	96	692	10.29	1.40
(%) Myeloma	(2.3) 16	(3.4)	31	(23.0) 48	(30.1)	(17.4)	(o./) 6	(3.4)	(100.0) 175	32	207	9.45	1.57
(%) Hypoplastic kidney	(9.1)	(6.9) 8	(17.7) 40	(27.4) 98	(21.1) 162	(13.1) 114	(3.4) 34	(1.1)	(100.0) 472	92	548	10.43	1.30
(%) Undetermined	(1.1) 220	(1.7)	(8.5) 1589	(20.8) 4 003	(34.3) 5 420	(24.2) 3251	(7.2) 898	(2.3) 296	(100.0) 16 200	3 253	19 453	10.22	1.32
(%)	(1.4)	(3.2)	(9.8)	(24.7)	(33.5)	(20.1)	(5.5)	(1.8)	(100.0)	COC	1 00 4	10.25	20
Reintroduction after transplantation (%)	(1.6)	(3.3)	(8.1)	(22.1)	(32.7)	(22.3)	(7.4)	(2.5)	(100.0)	707	1 094	10.33	1.39
Others (%)	85 0 1	134	391	935	1 304	812	221	77	3 956	692	4 725	10.20	1.37
Total	2979	6622	21 289	55 639	77 364	45 907	14 078	4891	228 769	35 482	264 251	10.27	1.32
(%) No information available	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(6.5)	(9.3)	19	(55.8) 31 77.205	(20.1) 11 45 84 8	(6.2)	(2.1) 2 4003	(100.0) 73	32	105	10.22	1.20
10tal (%)	(1.3)	(2.9)	(9.3)	(24.3)	(33.8)	(20.1)	(6.2)	4893 (2.1)	(100.0)	55 514	204 330	10.7/	1.32

TABLE 37. Changes in the iron metabolism-related indices over the past three years (facility hemodialysis, hemodiafiltration, hemoadsorption)

	conc	Hemoglobin oncentration (g/dL)	bin (g/dL)	conce	Serum iron entration (µg/dL	n 1g/dL)	Tot	Fotal iron-binding capacity (µg/dL)	ding JL)	Trans	Transferrin saturation level (%)	ıration	S	Serum ferritin concentration (ng/mL)	n g/mL)
	Mean	SD	vs. 2005† (%)	Mean	SD	vs. 2005† (%)	Mean	SD	vs. 2005† (%)	Mean	SD	vs. 2005† (%)	Mean	SD	vs. 2005† (%)
The end of 2005 The end of 2006 The end of 2007	10.23 10.23 10.27	1.37 1.33 1.32	100.00 100.00 100.39	62.31 64.65 63.42†	29.38 30.28 29.54†	100.00 103.76 101.78	246.05 236.96 236.85	64.38 60.73 60.73	100.00 96.31 96.26	26.50 28.39 28.09	13.82 14.60 14.42	100.00 107.13 106.00	191.29 239.59 227.54	329.38 383.29 349.56	100.00 125.25 118.95

†The percentages of the mean values in each year with respect to those in 2005.

Pre-dialysis hemoglobin concentrations and transferrin saturation levels (all dialysis patients) TABLE 38.

	SD	1.47		1.34		1.23		1.25		1.31		1.35		1.48		1.3		1.36	1.32			
	Mean	9.83		10.2		10.36		10.4		10.41		10.36		10.1		10.3		10.21	10.27			
	Total	7 230		37 735		53 534		31 890		12 718		2 000		2 566		153 673		110 683	264 356		28.09	14.42
No information	available	55		280		378		204		82		26		33		1 061		34 453	35 514		26.88	13.62
	Subtotal	7 175	(100.0)	37 455	(100.0)	53 156	(100.0)	31 686	(100.0)	12 633	(100.0)	4 974	(100.0)	5 533	(100.0)	152 612	(100.0)	76 230	228 842	(100.0)	28.10	14.43
	>13.0	111	(1.5)	811	(2.2)	1055	(2.0)	617	(1.9)	299	(2.4)	131	(2.6)	110	(2.0)	3134	(2.1)	1759	4893	(2.1)	28.53	14.58
	12.0-12.9	364	(5.1)	2 227	(5.9)	3 226	(6.1)	2 035	(6.4)	894	(7.1)	356	(7.2)	371	(6.7)	9 473	(6.2)		14 (	(6.2)		
on (g/dL)	11.0-11.9	1 064	(14.8)	6 961	(18.6)	11 424	(21.5)	7 099	(22.4)	2 860	(22.6)	1 056	(21.2)	1 022	(18.5)	31 486	(20.6)		45 918			
in concentration	10.0-10.9	1 903	(26.5)	12 110	(32.3)	19 267	(36.2)	11 608	(36.6)	4 411	(34.9)	1 652	(33.2)	1 665	(30.1)	52 616	(34.5)		77 395			
lysis hemoglobin concentration (g/dL)	6.6-0.6	1 855	(25.9)	9 6 16	(25.7)	12 659	(23.8)	7 242	(22.9)	2 791	(22.1)	1 150	(23.1)	1 332	(24.1)	36 645	(24.0)	19 013	55 658	(24.3)	27.59	14.50
Pre-dia	8.0-8.9	1 168	(16.3)	3 930	(10.5)	4 011	(7.5)	2 199	(6.9)	266	(7.9)	44	(8.9)	609	(11.0)	13 358	(8.8)	7 936	21 294	(6.3)	26.78	16.06
	7.0–7.9	500	(7.0)	1270	(3.4)	1059	(2.0)	268	(1.8)	241	(1.9)	125	(2.5)	265	(4.8)	4028	(2.6)	2597	6625	(2.9)	26.48	18.34
	<7.0	210	(2.9)	530	(1.4)	455	(0.9)	318	(1.0)	140	(1.1)	. 09	(1.2)	159	(2.9)	1872	(1.2)	1107	2979	(1.3)	28.89	20.17
Transferrin	saturation level (%)	<10	(%)	10-19	(%)	20-29	(%)	30–39	(%)	40-49	(%)	50-59	(%)	09≅	(%)	Subtotal	(%)	No information available	Total	(%)	Mean	SD

 TABLE 39.
 Pre-dialysis hemoglobin concentrations and serum ferritin concentrations (all dialysis patients)

Serum ferritin			Pre-dialy:	sis hemoglob	Pre-dialysis hemoglobin concentration (g/dL	tion (g/dL)				No information			
concentration (ng/mL)	<7.0	7.0–7.9	8.0–8.9	6.6–0.6	10.0-10.9	11.0-11.9	12.0-12.9	≥13.0	Subtotal	available	Total	Mean	SD
25	288	627	2 268	5 521	7 517	4 885	1 793	759	23 658	180	23 838	10.36	1.38
(%)	(1.2)	(2.7)	(9.6)	(23.3)	(31.8)	(20.6)	(7.6)	(3.2)	(100.0)				
25–49	240	545	1 742	5 119	7 848	5 205	1 759	767	23 225	154	23 379	10.45	1.35
(%)	(1.0)	(2.3)	(7.5)	(22.0)	(33.8)	(22.4)	(7.6)	(3.3)	(100.0)				
\$0_99	352	688	2 474	7 781	11 883	7 471	2 221	447	33 614	239	33 853	10.39	1.27
(%)	(1.0)	(2.0)	(7.4)	(23.1)	(35.4)	(22.2)	(9.9)	(2.2)	(100.0)				
100–149	282	592	2 141	6959	9 920	5 809	1 580	460	27 353	199	27 552	10.32	1.23
(%)	(1.0)	(2.2)	(7.8)	(24.0)	(36.3)	(21.2)	(5.8)	(1.7)	(100.0)				
150–199	221	465	1 707	5 064	7 222	4 287	1 146	288	20,400	156	20 556	10.29	1.24
(%)	(1.1)	(2.3)	(8.4)	(24.8)	(35.4)	(21.0)	(5.6)	(1.4)	(100.0)				
200–299	302	730	2 487	6 961	9 590	5 304	1 421	379	27 174	227	27 401	10.22	1.24
(%)	(1.1)	(2.7)	(9.2)	(25.6)	(35.3)	(19.5)	(5.2)	(1.4)	(100.0)				
300-499	328	962	2 526	6 138	8 250	4 482	1 300	355	24 175	190	24 365	10.17	1.3
(%)	(1.4)	(3.3)	(10.4)	(25.4)	(34.1)	(18.5)	(5.4)	(1.5)	(100.0)				
500–999	280	099	1 750	3 771	4 561	2 617	859	287	14 785	142	14 927	10.1	1.4
(%)	(1.9)	(4.5)	(11.8)	(25.5)	(30.8)	(17.7)	(5.8)	(1.9)	(100.0)				
≥1000	200	293	629	1 164	1 428	919	373	161	5 197	57	5 254	10.05	1.63
(%)	(3.8)	(5.6)	(12.7)	(22.4)	(27.5)	(17.7)	(7.2)	(3.1)	(100.0)				
Subtotal	2493	5396	17 754	48 088	68 219	40 979	12 452	4200	199 581	1 544	201 125	10.29	1.31
(%)	(1.2)	(2.7)	(8.9)	(24.1)	(34.2)	(20.5)	(6.2)	(2.1)	(100.0)				
No information available	486	1229	3540	7 570	9 176	4 939	1 628	693	29 261	33 970	63 231	10.11	1.39
Total	2979	6625	21 294	55 658	77 395	45 918	14 080	4893	228 842	35 514	264 356	10.27	1.32
(%)	(1.3)	(2.9)	(6.3)	(24.3)	(33.8)	(20.1)	(6.2)	(2.1)	(100.0)				
Mean	361.73	325.41	268.15	228.58	216.2	209.14	216.83	217.12	227.18	273.71	227.54		
SD	631.31	562.23	404.59	320.89	324.95	314.91	341.85	420.43	348.01	510.53	349.56		

**TABLE 40.** Pre-dialysis hemoglobin concentrations and serum C-reactive protein (CRP) concentrations (all dialysis patients)

	SD	1.21		1.32		1.36		1.46		1.48		1.56		1.59		1.62		1.68		1.64		1.31		1.37	1.32			
	Mean	10.39		10.34		10.16		66.6		9.79		9.59		9.47		9.3		9.39		9.35		10.28		10.24	10.27			
	Total	99 623		35 026		16 385		10526		9 3 6 3		2 381		1 208		705		788		562		173 569		20 787	264 356		0.64	2.04
No	available	999		243		130		79		47		19		11		∞		9		4		1 212		34 302	35 514		0.82	4.11
	Subtotal	98 958	(100.0)	34 783	(100.0)	16 255	(100.0)	10 447	(100.0)	6 318	(100.0)	2 362	(100.0)	1 197	(100.0)	269	(100.0)	782	(100.0)	558	(100.0)	172 357	(100.0)	56 485	228 842	(100.0)	0.64	2.02
	$\geq 13.0$	1862	(1.9)	840	(2.4)	338	(2.1)	207	(2.0)	113	(1.8)	38	(1.6)	23	(1.9)	11	(1.6)	12	(1.5)	∞	(1.4)	3452	(2.0)	1441	4893	(2.1)	0.58	1.80
	12.0-12.9	6 208	(6.3)	2 372	(6.8)	936	(5.8)	574	(5.5)	278	(4.4)	94	(4.0)	40	(3.3)	26	(3.7)	31	(4.0)	18	(3.2)	10 577	(6.1)	3 503	14 080	(6.2)	0.49	1.70
ion (g/dL)	11.0-11.9	21 736	(22.0)	7 261	(20.9)	2 955	(18.2)	1 696	(16.2)	826	(13.1)	275	(11.6)	122	(10.2)	63	(0.0)	85	(10.9)	28	(10.4)	35 077	(20.4)	10 841	45 918	(20.1)	0.45	1.60
Pre-dialysis hemoglobin concentration (g/dL)	10.0-10.9	36 168	(36.5)	11 831	(34.0)	5 243	(32.3)	3 027	(29.0)	1 746	(27.6)	555	(23.5)	283	(23.6)	133	(19.1)	167	(21.4)	122	(21.9)	59 275	(34.4)	18 120	77 395	(33.8)	0.50	1.65
is hemoglob	6.6-0.6	23 384	(23.6)	8 187	(23.5)	4 125	(25.4)	2 694	(25.8)	1 633	(25.8)	632	(26.8)	289	(24.1)	176	(25.3)	181	(23.1)	133	(23.8)	41 434	(24.0)	14 224	55 658	(24.3)	99.0	2.09
Pre-dialys	8.0-8.9	7 063	(7.1)	3 053	(8.8)	1 771	(10.9)	1 421	(13.6)	1 073	(17.0)	440	(18.6)	232	(19.4)	157	(22.5)	139	(17.8)	109	(19.5)	15 458	(0.0)	5 836	21 294	(6.3)	1.10	2.80
	7.0-7.9	1753	(1.8)	880	(2.5)	641	(3.9)	575	(5.5)	452	(7.2)	220	(6.3)	144	(12.0)	85	(12.2)	108	(13.8)	69	(12.4)	4927	(2.9)	1698	6625	(2.9)	1.70	3.34
	<7.0	784	(0.8)	359	(1.0)	246	(1.5)	253	(2.4)	197	(3.1)	108	(4.6)	64	(5.3)	46	(9.9)	59	(7.5)	41	(7.3)	2157	(1.3)	822	2979	(1.3)	1.98	3.99
Seriim CRP concentration	(mg/dL)	<0.2	(%)	0.2-0.4	(%)	0.5-0.9	(%)	1.0-1.9	(%)	2.0-3.9	(%)	4.0–5.9	(%)	6.0-7.9	(%)	8.0–9.9	(%)	10.0–14.9	(%)	≥15.0	(%)	Subtotal	(%)	No information available	Total	(%)	Mean	SD

**TABLE 41.** History of hip fracture and age (all dialysis patients)

					Age (years)	(s.					No information			
History of hip fracture	<20	20–29	30–39	40-49	50–59	69-09	62-02	68-08	> 06≥	Subtotal	available	Total	Mean	SD
Male														
Without a history	87	743		9 849	26 312	35 719	31 639	10 892	790	120 113	0	120 113	64.06	12.49
With a history	_	2	13	51	226	435	621	328	40	1 717	0	1717	70.51	11.11
Subtotal	88	745		0066	26 538	36 154	32 260	11 220	830	121 830	0	121 830	64.15	12.49
Fracture prevalence†	114.9	26.9		51.8	85.9	121.8	196.3	301.1	506.3	142.9	I	142.9		
Unspecified	0	7		77	214	345	354	109	7	1 153	0	1 153	65.22	12.29
No information available	47	252		3 206	8 474	11 581	10 410	3 660	307	39 236	4	39 240	64.17	12.60
Total	135	1004		13 183	35 226	48 080	43 024	14 989	1144	162 219	4	162 223	64.16	12.52
Female														
Without a history	62	412	2052	5 165	14 909	20 877	19 726	9 801	966	74 000		74 001	65.75	12.83
With a history	1	4	16	29	181	441	941	779	117	2 509	0	2 509	74.60	10.65
Subtotal	63	416	2068	5 194	15 090	21 318	20 667	10 580	1113	76 509	1	76 510	66.04	12.86
Fracture prevalence <sup>†</sup>	161.3	97.1	78.0	56.1	121.4	211.2	477.0	794.8	1174.7	339.1	0.0	339.0		
Unspecified	1	4	17	48	137	204	219	128	∞	99/	0	992	67.04	13.02
No information available	33	147	716	1 777	4 968	6 847	6 584	3 392	371	24 835		24 836	65.78	13.10
Total	26	267	2801	7 019	20 195	28 369	27 470	14 100	1492	102 110	2	102 112	65.98	12.92

†Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

 TABLE 42.
 History of hip fracture and duration of dialysis (all dialysis patients)

			Duratio	Durations of dialysis (years)	ears)					
History of hip fracture	A	2-4	5–9	10-14	15–19	20–24	≥25	Total	Mean	SD
Without a history	45 747	50 271	48 547	23 732	12 101	7082	6655	194 135	6.80	6.95
With a history	895	1 099	1 044	459	242	159	328	4 226	7.83	8.34
Subtotal	46 642	51 370	49 591	24 191	12 343	7241	6983	198 361	6.82	66.9
Fracture prevalence <sup>†</sup>	195.6	218.6	215.0	193.4	200.0	224.5	492.9	217.7		
Unspecified	562	430	439	230	125	62	71	1 919	6.61	7.26
No information available	14 934	16 770	16 046	7849	4 004	2300	2173	64 076	6.79	6.95
Total	62 138	68 570	920 99	32 270	16 472	9603	9227	264 356	6.81	86.9

Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

TABLE 43.	History of hip fracture and	presence or absence of diabetes	mellitus (all dialysis patients)
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History of hip fracture	Diabetic	Non-diabetic	Subtotal	No information available	Total
Male					
Without a history	43 751	76 330	120 081	32	120 113
With a history	704	1 013	1 717	0	1 717
Subtotal	44 455	77 343	121 798	32	121 830
Fracture prevalence <sup>†</sup>	160.9	132.7	143.0	_	142.9
Unspecified	499	654	1 153	0	1 153
No information available	14 116	25 085	39 201	39	39 240
Total	59 070	103 082	162 152	71	162 223
Female					
Without a history	21 223	52 769	73 992	9	74 001
With a history	859	1 649	2 508	1	2 509
Subtotal	22 082	54 418	76 500	10	76 510
Fracture prevalence <sup>†</sup>	404.7	312.5	339.0	1111.1	339.0
Unspecified	231	535	766	0	766
No information available	6 863	17 949	24 812	24	24 836
Total	29 176	72 902	102 078	34	102 112

<sup>&</sup>lt;sup>†</sup>Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

first to ask patients about the history of hip fracture as a fracture-related question. The rate of patients with a history of hip fracture per 10 000 dialysis patients is described as the "fracture prevalence" (equal to 100-fold of the percentage of patients with a history of fracture with respect to the total number of dialysis patients). It is known that bone metabolism markedly differs between male and female patients and between diabetic and non-diabetic patients; therefore, fracture prevalences were summarized according to gender, and then according to the presence or absence of diabetes mellitus.

#### 1. Tabulation according to gender

- a. Gender. Table 41 shows the relationship between the history of hip fracture and age in male and female patients. The fracture prevalence in all the male patients was 142.9, whereas that in all the female patients was 339.0, which was more than twice that in all the male patients.
- b. Age. The relationship between the fracture prevalence and age was examined using the data shown in Table 41. In both male and female patients the fracture prevalence increased with age. The fracture prevalence in female patients was higher than that in male patients in all age groups. In particular, the gender difference was marked in patients aged 70 years or older.
- c. Duration of dialysis. The fracture prevalences are summarized according to the duration of dialysis in Table 42. The total fracture prevalences in all the

patients are shown by each duration because the durations of dialysis are not tabulated according to gender. The fracture prevalence sharply and discontinuously increased with dialysis durations exceeding 25 years.

- d. Presence or absence of diabetes mellitus. Table 43 shows the relationship between the history of hip fracture and the presence or absence of diabetes mellitus. In both males and females, the fracture prevalence in diabetic patients was higher than that in non-diabetic patients.
- e. Body mass index (BMI). Table 44 shows the relationship between a history of hip fracture and BMI. In both male and female patients, the lower the BMI, the higher the fracture prevalence. This suggests that malnourished patients are more prone to fracture.
- f. Pre-dialysis serum creatinine concentration. Table 45 shows the relationship between the history of hip fracture and pre-dialysis serum creatinine concentration. In both male and female patients, the fracture prevalence increased with decreasing serum creatinine concentration. This also suggests that, similar to BMI, malnourished patients are more prone to fracture.
- g. Pre-dialysis serum albumin concentration prior to starting dialysis. Table 46 shows the relationship between the history of hip fracture and pre-dialysis serum albumin concentration prior to starting

 TABLE 44.
 History of hip fracture and body mass index (BMI) (all dialysis patients)

							BMI (	BMI $(kg/m^2)$								.:	No		
History of hip fracture <12 12-13 14-15 16-17 1	<12	12–13	14-15	16–17	18–19	20–21	22–23	24–25	l .	26-27 28-29 30-31 32-33 34-35 36-37	30–31	32–33 3	4-35 3	5-37 ≥	≥38 S	Subtotal	available	Total	Mean SD
Male																			
Without a history	68	253	2104		21	26 157	19 737	10 513	4585	1929						<i>611 14</i>		120 113	21.50
With a history	2	15	100			324	185	29	23	11						1 362		1717	19.99 5.43
Subtotal	91	268	2204		21	26 481	19 922	10 580	4608	1940						99 141		121 830	21.48
Fracture prevalence <sup>†</sup> 224.7	224.7	592.9	7 592.9 475.3	270.6	174.3	123.9	93.7	63.7	50.2	57.0	36.7	0.0	52.9	0.0 20	205.5	139.3	159.0	142.9	
Unspecified	0	1	20			221	140	82	41	18						791		1 153	21.55 3.42
No information	4	29	280		7	3 188	2 401	1 241	514	250						11 751		39 240	21.51
available																			
Total	95	298	2504	10 960 24	24 361	29 890	22 463	11 903	5163	2208	933 ,	422 2	212 1	103 16	168 1	111 683	50 540	162 223	21.48 3.76
Female																			
Without a history 80 465 3266	80	465	3266	10 108	14 785	12 970										59 859	14 142	74 001	20.69
With a history	7	48	183	468	503	369										1 950	529	2 509	19.34
Subtotal	87	513	3449	10 576	15 288	13 339				1288	585	300 1	150	3 69	80	61 809	14 701	76 510	20.65 4.03
Fracture prevalence†	875.0	1032.3	560.3	463.0	340.2	284.5										325.8	395.3	339.0	
Unspecified	0	11	35	95	129	116										540	226	992	20.56
No information	6	65	387	1 302	1 846	1 589	1039	599	323							7 440	17 396	24 836	20.70 4.80
available																			
Total	96	589		3871 11973 17	17 263	15 044	9 773	5 509	2886	1437	673	337 1	171	5 92	91 (	68 486	32 323	102 112	20.65 4.12

Tracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

History of hip fracture and pre-dialysis serum creatinine concentration (all dialysis patients) TABLE 45.

			Pre-dialysis	serum creat.	inine concent	Pre-dialysis serum creatinine concentration (mg/dL)	L)			No information			
History of hip fracture	<4.0	4.0–5.9	4.0–5.9 6.0–7.9	8.0-9.9	10.0-11.9	12.0-13.9	14.0-15.9	>16.0	Subtotal	available	Total	Mean	SD
Male													
Without a history	1551	5012	12 714	23 031	29 940	26 066	14 459	6050	118 823	1 290	120 113	11.03	3.13
With a history	37	158	343	476	437	180	50	12	1693	24	1 717	9.21	2.67
Subtotal	1588	5170	13 057	23 507	30 377	26 246	14 509	6062	120 516	1 314	121 830	11.01	3.13
Fracture prevalence <sup>†</sup>	238.6	315.2	269.8	206.7	146.0	69.1	34.6	19.8	142.5	186.0	142.9		
Unspecified	22	61	134	264	292	201	94	35	1 103	50	1 153	10.41	3.05
No information available	274	845	2 046	4 013	5 243	4 454	2 477	1117	20 469	18 771	39 240	11.09	3.14
Total	1884	9209	15 237	27 784	35 912	30 901	17 080	7214	142 088	20 135	162 223	11.02	3.13
Female													
Without a history	1717	5341	13 593	22 780	19 939	8 100	1 450	271	73 191	810	74 001	9.29	2.56
With a history	117	407	870	738	267	59	7	2	2 467	42	2 509	7.62	2.25
Subtotal	1834	5748	14 463	23 518	20 206	8 159	1 457	273	75 658	852	76 510	9.24	2.57
Fracture prevalence†	681.4	762.0	640.0	324.0	133.9	72.8	48.3	73.8	337.1	518.5	339.0		
Unspecified	30	75	175	228	184	51	7	0	750	16	992	8.63	2.43
No information available	289	941	2 372	3 994	3 656	1 483	235	49	13 019	11 817	24 836	9.34	2.57
Total	2153	6764	17 010	27 740	24 046	9 693	1 699	322	89 427	12 685	102 112	9.24	2.57

†Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

TABLE 46.	History of hip fracture and	l pre-dialysis serum	albumin	(all dialysis patients)
IADLE 40.	This to i v or the tracture and	Die-aimvsis seimii	aivamin	tuu uuuvsis Duuenisi

			ysis serum entration (g				No information			
History of hip fracture	<3.0	3.0-3.4	3.5–3.9	4.0-4.4	≥4.5	Subtotal	available	Total	Mean	SD
Male										
Without a history	5182	18 332	54 480	32 273	3226	113 493	6 620	120 113	3.74	0.44
With a history	199	410	731	258	21	1 619	98	1 717	3.52	0.49
Subtotal	5381	18 742	55 211	32 531	3247	115 112	6 718	121 830	3.74	0.44
Fracture prevalence <sup>†</sup>	384.0	223.7	134.2	79.9	65.1	142.7	148.0	142.9		
Unspecified	59	201	593	222	9	1 084	69	1 153	3.66	0.42
No information available	894	3 089	9 229	5 481	597	19 290	19 950	39 240	3.74	0.44
Total	6334	22 032	65 033	38 234	3853	135 486	26 737	162 223	3.74	0.44
Female										
Without a history	3419	12 636	35 564	17 286	1189	70 094	3 907	74 001	3.70	0.42
With a history	284	741	1 020	270	17	2 332	177	2 509	3.47	0.47
Subtotal	3703	13 377	36 584	17 556	1206	72 426	4 084	76 510	3.69	0.43
Fracture prevalence <sup>†</sup>	830.7	586.4	286.8	156.2	143.0	332.7	453.0	339.0		
Unspecified	64	166	385	116	4	735	31	766	3.57	0.46
No information available	595	2 248	6 233	2 933	239	12 248	12 588	24 836	3.70	0.43
Total	4362	15 791	43 202	20 605	1449	85 409	16 703	102 112	3.69	0.43

<sup>&</sup>lt;sup>†</sup>Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

dialysis. In both male and female patients the fracture prevalence increased with decreasing serum albumin concentration. This also suggests that, similar to BMI and serum creatinine concentration, malnourished patients are more prone to fracture.

h. Percutaneous ethanol injection therapy (PEIT). Table 47 shows the relationship between the history of hip fracture and the use of PEIT for secondary hyperparathyroidism. In both males and females, the fracture prevalence in patients who had been treated with PEIT was clearly higher than that in patients who had not been treated.

i. Parathyroidectomy (PTx). Table 48 shows the relationship between the history of hip fracture and treatment of secondary hyperparathyroidism with PTx. Similarly to the results for PEIT, the fracture prevalence was higher in patients who had been treated with PTx than in those who had not been treated.

*j. Serum intact parathyroid hormone (iPTH) concentration.* Table 49 shows the relationship between the history of hip fracture and serum iPTH concentration. The fracture prevalences in male patients with serum iPTH concentrations of 140–800 pg/mL were

**TABLE 47.** History of hip fracture and treatment with percutaneous ethanol injection therapy (PEIT) (all dialysis patients)

	PEIT tre	atment			No information	
History of hip fracture	No	Yes	Subtotal	Unspecified	available	Total
Male						
Without a history	116 336	956	117 292	1441	1 380	120 113
With a history	1 534	74	1 608	39	70	1 717
Subtotal	117 870	1030	118 900	1480	1 450	121 830
Fracture prevalence <sup>†</sup>	131.9	774.1	137.1	270.6	507.2	142.9
Unspecified	159	8	167	980	6	1 153
No information available	955	62	1 017	2	38 221	39 240
Total	118 984	1100	120 084	2462	39 677	162 223
Female						
Without a history	71 424	781	72 205	924	872	74 001
With a history	2 270	74	2 344	59	106	2 509
Subtotal	73 694	855	74 549	983	978	76 510
Fracture prevalence <sup>†</sup>	317.8	947.5	324.6	638.5	1 215.6	339.0
Unspecified	143	1	144	619	3	766
No information available	598	50	648	0	24 188	24 836
Total	74 435	906	75 341	1602	25 169	102 112

<sup>&</sup>lt;sup>†</sup>Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

	PTx perf	formed			No information	
History of hip fracture	No	Yes	Subtotal	Unspecified	available	Total
Male						
Without a history	112 956	5115	118 071	951	1 091	120 113
With a history	1 474	154	1 628	28	61	1 717
Subtotal	114 430	5269	119 699	979	1 152	121 830
Fracture prevalence <sup>†</sup>	130.5	301.1	137.9	294.4	559.1	142.9
Unspecified	263	10	273	874	6	1 153
No information available	1 425	288	1 713	3	37 524	39 240
Total	116 118	5567	121 685	1856	38 682	162 223
Female						
Without a history	68 115	4626	72 741	591	669	74 001
With a history	2 188	177	2 365	44	100	2 509
Subtotal	70 303	4803	75 106	635	769	76 510
Fracture prevalence <sup>†</sup>	321.2	382.6	325.1	744.5	1 494.8	339.0
Unspecified	166	12	178	585	3	766
No information available	835	284	1 119	0	23 717	24 836
Total	71 304	5099	76 403	1220	24 489	102 112

**TABLE 48.** History of hip fracture and treatment with parathyroidectomy (PTx) (all dialysis patients)

relatively lower than those in the other male patients, and the fracture prevalences in female patients with serum iPTH concentrations of 60–600 pg/mL were relatively lower than those in the other female patients. Outside these serum iPTH concentration ranges the fracture prevalence tended to be high in both male and female patients.

#### (1) Tabulation considering BMI

As described above, the history of fracture is strongly related to BMI; therefore, the relationship between the history of hip fracture and serum iPTH concentration was examined by taking the classification according to BMI into consideration, which is shown in the three-dimensional graphs in Figure 3. Here, the graphs were prepared on the basis of the data collected as of June 2008 (2). In patients with a low BMI, a U-shaped relationship was observed between the serum iPTH concentration and the fracture prevalence, with both excessively high and low serum iPTH concentrations related to a high fracture prevalence. This tendency weakened with increasing BMI, showing little relationship between serum iPTH concentration and the fracture prevalence in patients with a high BMI.

## (2) Tabulation considering serum albumin concentration

Similarly, the relationship between the history of hip fracture and serum iPTH concentration was examined by taking the classification according to serum albumin concentration into consideration, which is shown in three-dimensional graphs in Figure 4. These graphs were also prepared on the basis of the

data collected as of June 2008 (2). Similarly to the case of BMI, a U-shaped relationship was observed between serum iPTH concentration and the fracture prevalence in patients with low serum albumin concentrations. A weak relationship was observed between serum iPTH concentration and the fracture prevalence in patients with high serum albumin concentrations.

k. Pre-dialysis serum calcium concentration. Table 50 shows the relationship between the history of hip fracture and pre-dialysis serum calcium concentration. The serum calcium concentrations shown in this table were corrected using serum albumin concentrations using the equation shown below (when the serum albumin concentration is <4.0 g/dL):

Corrected serum Ca concentration (mg/dL) =Serum Ca concentration (mg/dL) +(4.0 - Serum albumin concentration <math>(g/dL))

In male patients, it is clear that the fracture prevalence decreased with decreasing serum calcium concentration, and increased with increasing serum calcium concentration. A similar tendency was observed in female patients; however, the fracture prevalence was also high in female patients with serum calcium concentrations <7.0 mg/dL, which is different from the male patients.

#### 2. Pre-dialysis serum phosphorus

Table 51 shows the relationship between the history of hip fracture and pre-dialysis serum phosphorus concentration. In both males and females, the fracture prevalence increased with decreasing

<sup>&</sup>lt;sup>†</sup>Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

History of hip fracture and serum intact parathyroid hormone (iPTH) concentration (all dialysis patients) CABLE 49.

of hip fracture								Serum iP.	TH conce	Serum iPTH concentration (pg/mL)	g/mL)							No			
thout a history 5629 7992 7398 7334 7162 6867 6782 6154 5457 5053 22 079 8413 2043 859 stored by a history 100 111 112 107 106 114 107 81 66 69 274 111 24 113 24 113 and the history 100 111 112 107 106 114 106.0 1578 131.6 120.9 1366 124.1 131.9 17.5 131.3 151.3 specified 62 119 104 66 76 50 54 51 55 34 172 579 117.5 131.3 117.5 131.3 specified 62 119 104 66 76 50 54 55 55 55 55 55 55 55 55 55 55 55 55	History of hip fracture			40–59	62-09	66-08	100-119	120-139	140-159	160-179	180–199	200–359	360–599	662-009	800–999	>1000	Subtotal	available	Total	Mean	SD
a history 5629 7992 7398 7334 7162 6867 6782 6154 5457 5053 22 079 8413 2043 859 a history 100 111 112 107 166 114 107 81 66 69 274 111 24 13	Male																				
a history   100   111   112   107   106   114   107   81   66   69   274   111   24   13    stal   5729   8103   7510   7441   7268   6881   6889   6235   5523   5122   22353   8524   2067   872    ecificad   62   119   104   66   76   50   54   51   55   34   172   131.9   117.5   151.3    ecificad   621   119   104   66   76   50   54   51   55   34   172   57   14   4    ecificad   629   9403   8640   8577   8420   8043   7846   7250   6405   5973   26 094   9971   2411   1035   131    a history   130   224   185   138   147   141   127   104   104   89   398   140   54   18    a history   3766   5539   4972   4656   4550   4196   3873   3767   3221   3001   13629   5771   1473   733    ecified   42   78   52   46   38   441   44   46   42   23   2137   396.3   3973   396.3   3374   338.3   3477   339.0   2839   333.7   305.6   300.8   248.6   380.5   251.7    ecified   42   78   52   46   38   4873   4874   437   3756   3486   15 883   6790   1727   874    ecified   4363   6455   5771   5388   5738   4873   4874   477   375   3756   3486   15 883   6790   1727   874    expressible   4363   6455   6450	Without a history	5629	7992	7398	7334	7162	2989	6782	6154	5457		22 079	8413	2043	859		100 109	20 004	120 113	192.49	201.44
tral jerovalence 177.7 138.9 151.4 145.9 148.0 166.0 157.8 131.6 120.9 136.6 124.1 131.9 177.5 151.3 ecified 62 119 104 66 76 50 54 51 51 55 34 172 57 14 4 4 4 4 6 576 877 842 883 148.1 1026 1070 1076 1012 903 964 827 817 3569 1390 330 159 151.3 ecified 6629 9403 8640 8577 8420 8043 7846 7250 6405 5973 26 094 9971 2411 1035 1 103	With a history	100	111	112	107	106	114	107	81	99		274	111	24	13		1 414	303	1 717	195.48	279.09
ure prevalence*         177.7         138.9         151.4         145.9         148.0         166.0         157.8         131.6         120.9         136.6         124.1         131.9         117.5         151.3           ecfied         62         119         104         66         76         50         54         51         55         34         172         57         14         4         4           formation         838         1181         1026         1070         1076         1012         903         964         827         817         3569         1390         330         159           allable         6629         9403         8640         8577         8420         8043         7846         7250         6405         5973         26 094         9971         2411         1035         1           aut a history         366         531         440         455         346         356         363         317         2912         1323         660         4         155         1         4         4         4         1         1         1         1         1         1         1         1         1         1         1	Subtotal	5729	8103	7510	7441	7268	6981	6889	6235	5523		22 353	8524	2067	872		101 523	20 307	121 830	192.53	202.73
ecffied 62 119 104 66 76 50 54 51 55 34 172 57 14 4 4 formation 838 1181 1026 1070 1076 1012 903 964 827 817 3569 1390 330 159 aliable 6629 9403 8640 8577 8420 8043 7846 7250 6405 5973 26.094 9971 2411 1035 13 a history 130 224 185 138 140 345 574 141 127 104 104 89 398 140 54 18 18 anistory 130 224 185 138 147 340 3873 3767 3221 3001 13629 5771 1473 733 recipied 42 78 52 46 38 44 46 42 23 22 117 36 310 413 380. 248.6 380.8 243.1 36 313 348 147 380. 348 148 149 380. 348 149 380. 348 149 380. 348 149 380. 348 149 380. 348 380. 34	Fracture prevalence <sup>†</sup>	177.7	138.9	151.4	145.9	148.0	166.0	157.8	131.6	120.9		124.1	131.9	117.5	151.3		141.2	151.5	142.9		
formation 838 1181 1026 1070 1076 1012 903 964 827 817 3569 1390 330 159 ailable 6629 9403 8640 8577 8420 8043 7846 7250 6405 5973 26 094 9971 2411 1035 1 2 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Unspecified	62	119	104	99	9/	20	54	51	55		172	57	14	4		919	234	1 153	154.81	157.84
6629 9403 8640 8577 8420 8043 7846 7250 6405 5973 26 094 9971 2411 1035 1 a history 3636 5315 4787 4518 4403 4055 3746 3663 3117 2912 13.231 5631 1419 715 and anistory 3636 5539 4972 4656 4550 4196 3873 3767 3221 3001 13.629 5771 1473 733 ure prevalence 357.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 300.8 248.6 380.5 251.7 ecified 42 78 52 46 38 44 46 42 23 22 117 36 11 6 6 formation 555 838 747 686 650 633 585 518 512 463 2137 983 243 135 aniable 4363 6455 5771 5388 5738 4873 4874 437 3756 3486 15.883 6790 1727 874	No information available	838	1181	1026	1070	1076	1012	903	964	827		3 569	1390	330	159		15 320	23 920	39 240	201.98	211.90
a history 3636 5315 4787 4518 4403 4055 3746 3663 3117 2912 13.231 5631 1419 715 a history 236 5539 4972 4656 4550 4196 3873 3767 3221 3001 13.629 5771 1473 733 ure prevalence 357.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 300.8 248.6 380.5 251.7 cified 42 78 52 46 38 44 46 42 23 22 117 36 11 6 6 formation 555 838 747 686 650 633 585 518 512 463 2137 983 243 135 aliable 4363 6455 5771 5388 5738 4873 4804 4327 3756 3486 15.883 6790 1727 874	Total	6629	9403		8577	8420	8043	7846	7250	6405	5973	26 094	9971	2411	1035	1065	117 762	44 461	162 223	193.46	203.69
a history 3636 5315 4787 4518 4403 4055 3746 3663 3117 2912 13231 5631 1419 715 story 130 224 185 138 147 141 127 104 104 89 398 140 54 18 18 prevalence 356 5539 4972 4656 4550 4196 3873 3767 3221 3001 13629 5771 1473 733 prevalence 35.5.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 370.8 248.6 380.5 251.7 ed 42 23 22 117 36 11 6 6 nation 555 838 747 686 650 633 585 518 512 463 2137 983 243 135 ble 4363 6455 5771 5388 5738 4873 4504 4327 3756 3486 15.883 6790 1727 874	Female																				
story 130 224 185 138 147 141 127 104 104 89 398 140 54 18  3766 5539 4972 4656 4550 4196 3873 3767 3221 3001 13 629 5771 1473 733  prevalence 357.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 300.8 248.6 380.5 251.7 184  42 78 52 46 38 44 46 42 23 22 117 36 11 6  nation 555 838 747 686 650 633 585 518 512 463 2137 983 243 135  ble 4363 6455 5771 5388 5238 4873 4504 4327 3756 3486 15 883 6790 1727 874		3636	5315	4787	4518	4403		3746	3663	3117		13 231	5631	1419	715	704	61 852	12 149	74 001	199.98	220.11
3766 5539 4972 4656 4550 4196 3873 3767 3221 3001 13 629 5771 1473 733 prevalence* 357.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 300.8 248.6 380.5 251.7 led 42 23 22 117 36 11 6 anation 555 838 747 686 650 633 585 518 512 463 2137 983 243 135 ble 4363 6455 5771 5388 5738 4873 4504 4327 3756 3486 15 883 6790 1727 874		130	224	185	138	147		127	104	104		398	140	54	18	42	2 041	468	2 509	201.97	282.04
357.5 421.4 386.5 305.4 333.9 347.7 339.0 283.9 333.7 305.6 300.8 248.6 380.5 251.7 42 78 52 46 38 44 46 42 23 22 117 36 11 6 55 838 747 686 650 633 585 518 512 463 2137 983 243 135 4363 6455 5771 5388 5738 4873 4504 4327 3756 3486 15.883 6790 1727 874	•	3766	5539	4972	4656	4550		3873	3767	3221		13 629	5771	1473	733	746	63 893	12 617	76 510	200.04	222.35
42     78     52     46     38     44     46     42     23     22     117     36     11     6       555     838     747     686     650     633     585     518     512     463     2137     983     243     135       4363     6455     5771     5388     5738     4873     4504     4327     3756     3486     15 883     6790     1727     874		357.5	421.4	386.5	305.4	333.9		339.0	283.9	333.7		300.8	248.6	380.5	251.7	596.6	330.0	385.2	339.0		
555 838 747 686 650 633 585 518 512 463 2137 983 243 135 4363 6455 5771 5388 5238 4873 4504 4327 3756 3486 15883 6790 1727 874		42	78	52	46	38		46	42	23		117	36	11	9	2	909	161	992	166.06	173.71
4363 6455 5771 5388 5238 4873 4504 4327 3756 3486 15883 6790 1727 874		555	838	747	989	059		285	518	512		2 137	983	243	135	155	9840	14 996	24 836	213.24	245.10
	Total	4363	6455	5771	5388	5238	4873	4504	4327	3756	3486	15 883	0629	1727	874	903	74 338	27 774	102 112	201.51	225.21

Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

serum phosphorus concentrations, and decreased with increasing serum phosphorus concentrations.

## 3. Tabulation according to the presence or absence of diabetes mellitus

The following results are based on the data collected as of June 2008 (2).

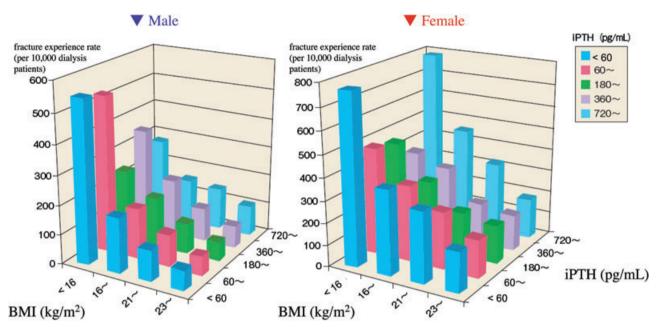
a. Serum iPTH concentration and BMI. Figure 5 shows three-dimensional graphs obtained by summarizing the relationship between the fracture prevalence, serum iPTH concentration, and BMI separately in diabetic and non-diabetic patients. Note that the scale of the fracture prevalence in the graph for diabetic patients is much greater than that for non-diabetic patients because the rate in the former is higher than that in the latter generally.

In the diabetic patients with a low BMI, there was a clear relationship between serum iPTH concentration and fracture prevalence; specifically, the fracture prevalence in patients with high serum iPTH concentration was very high. Moreover, the fracture prevalence tended to be rather high in patients with low serum iPTH concentrations; however, the relationship between serum iPTH concentration and the fracture prevalence weakened as BMI increased.

For the non-diabetic patients with a low BMI there was some relationship between the serum iPTH concentration and the fracture prevalence. Unlike in diabetic patients, however, the fracture prevalence in the non-diabetic patients with low serum iPTH concentrations tended to be rather high, and the increase in the fracture prevalence in patients with high serum iPTH concentrations was not so marked; however, the relationship between the serum iPTH concentration and the fracture prevalence weakened as BMI increased, similarly to the case of diabetic patients.

b. Serum iPTH and serum albumin concentrations. Figure 6 shows three-dimensional graphs obtained by summarizing the relationship between the fracture prevalence, serum iPTH concentration, and serum albumin concentration separately in diabetic and non-diabetic patients. Note that the scale of fracture prevalence in the graph for diabetic patients is much greater than that for non-diabetic patients.

The tendency in serum albumin concentration was similar to that in BMI. That is, for diabetic patients with a low serum albumin concentration, a U-shaped relationship was found between serum iPTH concentration and the fracture prevalence, where the fracture prevalence was high for both the high and low



**FIG. 3.** Relationship between the history of hip fracture, serum intact parathyroid hormone concentration (iPTH), and body mass index (BMI) (all dialysis patients).

serum iPTH concentrations. The increase in the fracture prevalence in the high serum iPTH concentration region was significant.

For non-diabetic patients with low serum albumin concentrations there was also a clear relationship between serum iPTH concentration and the fracture prevalence; however, a marked increase in the fracture prevalence was observed in non-diabetic patients with low serum iPTH concentrations, unlike in diabetic patients. For both diabetic and non-diabetic patients, the relationship between serum iPTH concentration and the fracture prevalence was weak in the region of high serum albumin concentration.

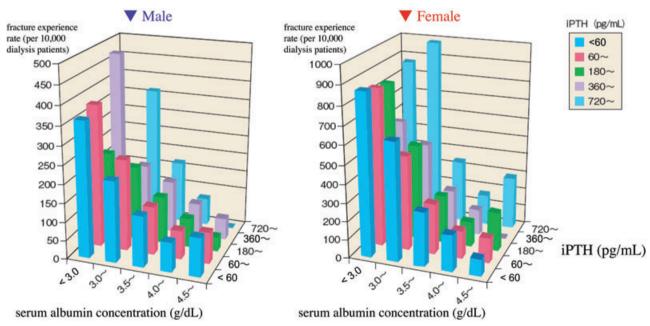


FIG. 4. Relationship between the history of hip fracture, serum intact parathyroid hormone concentration (iPTH), and serum albumin concentration (all dialysis patients).

History of hip fracture and corrected pre-dialysis serum calcium concentration<sup>†</sup> (all dialysis patients)

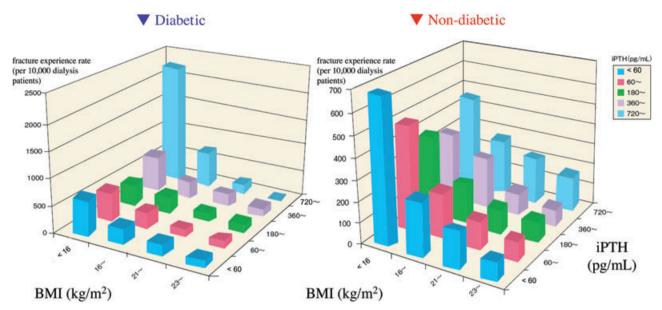
					Corre	cted pre-d	ialysis ser	um calciui	n concent.	Corrected pre-dialysis serum calcium concentration <sup>†</sup> (mg/dL)	/dL)					No			
History of hip fracture	<6.0	<6.0 6.0-6.4 6.5-6.9 7.0-7.4 7.5-7.9	6.5-6.9	7.0–7.4	7.5–7.9	8.0-8.4	8.5–8.9	9.0-9.4	9.5-9.9	10.0-10.4	10.5–10.9	$9.0-9.4$ $9.5-9.9$ $10.0-10.4$ $10.5-10.9$ $11.0-11.4$ $11.5-11.9$ $\ge 12.0$	11.5-11.9	>12.0	Subtotal	available	Total	Mean	SD
Male																			
Without a history	114	147	308	856	3414	12 307			20 295	12 279	5747	2081	774	999	113 190	6 923	120 113	9.25	0.89
With a history	1	2	3	4	51	144			307	160	93	36	16	15	1 610	107	1 717	9.31	0.94
Subtotal	115	149	311	396	3465	12 451		28 509	20 602	12 439	5840	2117	790	581	114 800	7 030	121 830	9.25	0.89
Fracture prevalence <sup>‡</sup>	87.7	136.1	97.4	41.8	149.4	117.0			151.3	130.3	161.8	173.0	206.7	265.0	142.2	154.6	142.9		
Unspecified	0	_	2	7	20	118			201	128	61	10	S	∞	1 080	73	1 153	9.29	0.87
No information available	27	33	59	172	625	2 106			3 253	2 052	1008	370	125	164	18 633	20 607	39 240	9.28	1.03
Total	142	183	372	1141	4110	14 675	30 815		24 056	14 619	6069	2497	920	753	134 513	27 710	162 223	9.25	0.91
Female																			
Without a history	62	74	137	423	1381	4 902	12 785		15 152	9 492	4724	1762	999	469	69 901	4 100	74 001	9.44	0.91
With a history	$\mathfrak{C}$	7	9	12	36	170	466		466	272	183	69	33	59	2 323	186	2 509	9.46	0.98
Subtotal	65	9/	143	435	1417	5 072	13 251		15 618	9 764	4907	1831	669	498	72 224	4 286	76 510	9.44	0.91
Fracture prevalence*	483.9	270.3	438.0	283.7	260.7	346.8	364.5		307.6	286.6	387.4	391.6	495.5	618.3	332.3	453.7	339.0		
Unspecified	0	1	Τ	7	6	45	133	189	163	109	4	26	9	7	735	31	992	9.49	0.91
No information available	10	16	30	63	221	839	2 2 0 6		2 461	1 612	877	297	117	115	11 884	12 952	24 836	9.46	1.02
Total	75	93	174	200	1647	2 956	15 590		18 242	11 485	5828	2154	822	620	84 843	17 269	102 112	9.44	0.93

<sup>†</sup>When the serum albumin concentration is <4.0 g/dL: Corrected serum calcium concentration (mg/dL) = Serum calcium concentration (mg/dL) + (4.0 – Serum albumin concentration (g/dL)). <sup>‡</sup>Fracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.

History of hip fracture and pre-dialysis serum phosphorus concentration (all dialysis patients) TABLE 51.

			Pre-dialysis se	rum phosphor	ysis serum phosphorus concentration (mg/dL)	on (mg/dL)				No information			
History of hip fracture	<3.0	3.0–3.9	4.0-4.9	5.0-5.9	6.9-0.9	7.0-7.9	8.0-8.9	≥9.0	Subtotal	available	Total	Mean	SD
Male													
Without a history	5198	15 487	30 054	32 411	20 541	8868	3695	2187	118 561	1 552	120 113	5.30	1.51
With a history	140	299	466	416	233	85	32	18	1 689	28	1 717	4.90	1.50
Subtotal	5338	15 786	30 520	32 827	20 774	9 073	3727	2205	120 250	1 580	121 830	5.29	1.51
Fracture prevalence <sup>†</sup>	269.3	193.1	155.1	128.4	113.4	94.6	9.98	82.3	142.5	180.4	142.9		
Unspecified	46	147	293	310	179	99	32	14	1 087	99	1 153	5.20	1.43
No information available	923	2 535	4 971	5 430	3 510	1 537	574	358	19 838	19 402	39 240	5.29	1.51
Total	6307	18 468	35 784	38 567	24 463	10 676	4333	2577	141 175	21 048	162 223	5.29	1.51
Female													
Without a history	3398	9 463	19 515	20 557	12 336	4 981	1798	1019	73 067	934	74 001	5.22	1.46
With a history	215	449	713	603	289	115	49	19	2 452	57	2 509	4.80	1.46
Subtotal	3613	9 912	20 228	21 160	12 625	2 096	1847	1038	75 519	991	76 510	5.20	1.46
Fracture prevalence†	632.7	474.5	365.4	293.3	234.3	230.9	272.5	186.5	335.6	610.3	339.0		
Unspecified	41	123	219	184	110	42	18	~	745	21	992	5.03	1.47
No information available	663	1 661	3 176	3 523	2 288	860	285	172	12 628	12 208	24 836	5.21	1.46
Total	4317	11 696	23 623	24 867	15 023	2 998	2150	1218	88 892	13 220	102 112	5.20	1.46

Tracture prevalence: the rate of patients with a history of hip fracture per 10 000 dialysis patients.



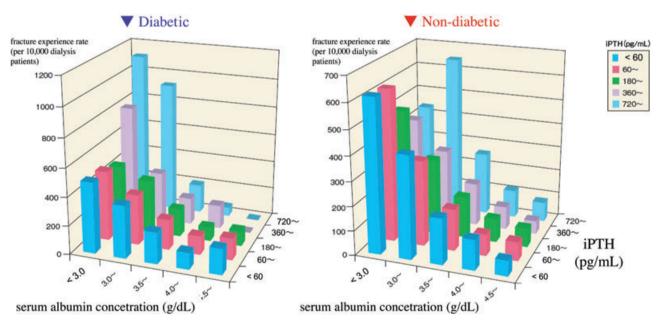
**FIG. 5.** Relationship between the history of hip fracture, serum intact parathyroid hormone concentration (iPTH), and body mass index (BMI) (all dialysis patients categorized into diabetic and non-diabetic groups). Note: the scale of fracture prevalence in the graph for diabetic patients is greater than that for non-diabetic patients.

c. Serum calcium and phosphorus concentrations. Figure 7 shows three-dimensional graphs obtained by summarizing the relationship between the serum calcium and phosphorus concentrations, and the fracture prevalence separately for diabetic and non-diabetic patients. No matter whether the patients are diabetic or non-diabetic, the fracture prevalence increased with decreasing serum phosphorus concen-

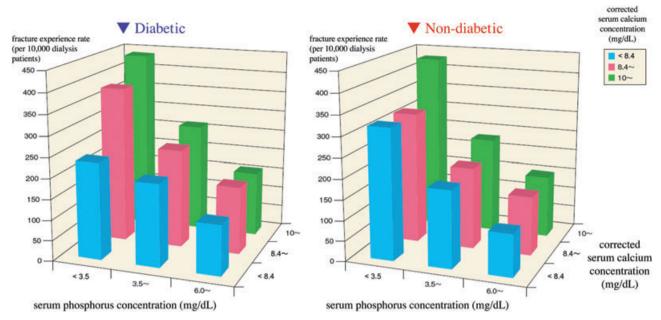
tration and with increasing corrected serum calcium concentration prior to the dialysis session.

## E. Clinical condition of patients at the start of dialysis

In the survey conducted at the end of 2007, the clinical condition of the patients when dialysis was



**FIG. 6.** Relationship between the history of hip fracture, serum intact parathyroid hormone concentration (iPTH), and serum albumin concentration (all dialysis patients categorized into diabetic and non-diabetic groups). Note: the scale of fracture prevalence in the graph for diabetic patients is greater than that for non-diabetic patients.



**FIG. 7.** Relationship between the history of hip fracture, corrected serum calcium concentration, and serum phosphorus concentration prior to the introduction to dialysis (all dialysis patients). Note 1: fracture prevalence for diabetic patients is greater than that for non-diabetic patients. Note 2: when the serum albumin concentration is <4.0 g/dL, the following equation is used: Corrected serum calcium concentration (mg/dL) = Serum calcium concentration (mg/dL) + (4.0 - Serum albumin concentration [g/dL]).

fist carried out was examined following the previous survey. The subjects of the survey on the clinical condition should be the patients who were newly begun on dialysis in 2007 and responded to the questionnaire using floppy disks concerning their clinical condition. The number of patients who satisfied these criteria was 30 510 (male, 19 748; female, 10 762). The survey results regarding renal function were analyzed for the 17 765 patients whose data were available at the start of dialysis.

The following are the summaries of the treatment methods for end-stage renal failure, the renal function of the patients when beginning dialysis, as well as major symptoms experienced at the start of dialysis.

## 1. Treatment methods at the end of the first year of dialysis

Table 52 shows a summary of treatment methods for renal failure examined at the end of 2007 for all subject patients. The following are the treatment methods examined at the end of 2007 for the patients who began dialysis in 2007, of whom 92.0% underwent hemodialysis. The percentages of patients who underwent hemodiafiltration (2.5%) and peritoneal dialysis (5.4%) were slightly higher than those in the previous year (the results of the 2006 survey were: facility hemodialysis, 92.4%; hemodiafiltration, 2.2%; hemofiltration, 0.2%; hemoabsorption, 0.0%; home

hemodialysis, 0.0%; continuous ambulatory peritoneal dialysis (CAPD), 5.0%; and intermittent peritoneal dialysis (IPD), 0.2% (1)).

## 2. Clinical symptoms and signs of patients at the introduction of dialysis

Table 53 shows a summary of the various clinical symptoms and signs and disorders experienced by the patients with respect to the items related to the clinical symptoms included in the criteria for the introduction of dialysis in patients with chronic renal failure (CRF) (12), which was provided by a renal failure research group of the Ministry of Health, Labor and Welfare, and those related to the calculation of Carlsson's scores (13). Regarding the symptoms related to the criteria for the introduction of dialysis in CRF patients, digestive symptoms, retention of body fluid, and fluid abnormalities were observed in approximately one-half of the patients. Following these symptoms, blood abnormalities and cardiovascular symptoms were observed in approximately 40% of the patients; moreover, impaired eyesight was observed in 22.9%, and nervous disorder symptoms in 13.8% of the patients. The percentages of these symptoms were almost the same as those in the 2006 survey. Regarding the items related to Carlsson's score, diabetes mellitus, congestive cardiac failure, and brain infarction were observed as major contributing factors.

Pre-dialysis serum creatinine concentrations of the first dialysis and treatment methods used at the end of 2007 (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) 52. TABLE

	ЗD	3.55	3.85		2.32		ı	1.63		3.34		3.55	
	Mean	8.32	8.16		6.99		1	12.35		8.77		8.34	- 1
	<sub>‡</sub> %	92.0	2.5		0.1		0.0	0.0		5.4		100.0	
	Total	28 059	992		22		3	3		1 657		30 510	
noit	No informa aldaliava	11 798	193		12		8	_		738		12 745	
	<sub>‡</sub> %	91.5	3.2		0.1		0.0	0.0		5.2		100.0	
	Subtotal	16 261	573	(100.0)	10	(100.0)	0	2	(100.0)	919	(100.0)	17 765	(100.0)
	>20.0	170	6.6	(1.6)	0	(0.0)	0	0	(0.0)	14	(1.5)	193	(1.1)
	6.61-0.61	45	(0.0)		0	(0.0)	0	0	(0.0)	2	(0.2)	47	(0.3)
	9.81-0.81	99	9	(1.0)	0	(0.0)	0	0	(0.0)	-	(0.1)	73	(0.4)
	6.71 <u>–</u> 0.71	82	4	(0.7)	0	(0.0)	0	0	(0.0)	С	(0.3)	68	(0.5)
	6.81-0.81	112	) (8)	(0.5)	0	(0.0)	0	0	(0.0)	10	(1.1)	125	(0.7)
	6.21-0.21	176	4	(0.7)	0	(0:0)	0	0	(0.0)	6	(1.0)	189	(1.1)
g/dL)	6.41-0.41	221	6	(1.6)	0	(0.0)	0	0	(0.0)	19	(2.1)	249	(1.4)
dialysis (mg/dL	6.EI–0.EI	367	9	(1.0)	0	(0.0)	0	_	(50.0)	24	(5.6)	398	(2.2)
first dia	12.0-12.9	553	18	(3.1)		(10.0)	0	0	(0.0)	34	(3.7)	909	(3.4)
n of the	6.11-0.11	827	24:2	(4.2)	0	(0:0)	0	1	(50.0)	09	(6.5)	912	(5.1)
centratio	6.01–0.01	1251	38	(9.9)	0	(0.0)	0	0	(0.0)	80	(8.7)	1369	(7.7)
inine con	6.6-0.6	1837	53	(9.2)	_	(10.0)	0	0	(0.0)	66	(10.8)	1990	(11.2)
rum creat	6.8-0.8	2510	96	(16.8)		(10.0)	0	0	(0.0)	185	(20.1)	2792	(15.7)
dialysis se	6.7 <u>–</u> 0.7	2310	82	(14.3)	-	(10.0)	0	0	(0.0)	118	(12.8)	2511	(14.1)
Pre-dia	6.8–0.8	1971	72	(12.6)	7	(20.0)	0	0	(0.0)	121	(13.2)	2166	(12.2)
	6.≿–0.≳	1625	4	(11.2)	2	(20.0)	0	0	(0.0)	61	(9.9)	1752	(6.9)
	6.4-0.4	1116	46	(8.0)	7	(20.0)	0	0	(0.0)	4	(4.5)	1205	(8.9)
	6.ε–0.ε	623	19	(3.3)	0	(0.0)	0	0	(0.0)	22	(2.4)	664	(3.7)
	6.2–0.2	308	13	(2.3)	0	(0.0)	0	0	(0.0)	10	(1.1)	331	(1.9)
	0.2>	91 3							(0.0)				
	Method of dialysis	Facility hemodialysis	Hemodiafiltration	(%)	Hemofiltration	(%)	Hemoadsorption (%)	s	(%)		(%)		

Percentage of the left cell value relative to the total number of its column. Values in parentheses below each figure represent the percentage relative to the total of each row.

3. Pre-dialysis serum creatinine concentration of the first dialysis

The pre-dialysis serum creatinine concentration of the first dialysis (hereafter, serum creatinine concentrations at the introduction of dialysis) are summarized below.

a. Treatment method at the end of the first year of dialysis. The relationship between the treatment method at the end of the first year of dialysis and the serum creatinine concentration at that time is already shown in Table 52. No clear difference in the trend of serum creatinine concentration at the start of dialysis was observed between the treatment methods.

b. Gender. Table 54 shows the relationship between the serum creatinine concentration at the introduction to dialysis and gender. The mean serum creatinine concentrations in male and female patients at the introduction to dialysis were 8.69 and 7.69 mg/dL, respectively; the level was higher in male patients than in female patients. Both levels were nearly the same as those in the 2006 survey.

c. Age. Table 55 shows the relationship between the serum creatinine concentration at the introduction to dialysis and age. The serum creatinine concentration at the introduction to dialysis in patients aged less than 15 years was low, and that in patients aged 15 years or older tended to decrease with age.

d. Primary disease. Table 56 shows the relationship between the serum creatinine concentration at the introduction to dialysis and primary disease. The serum creatinine concentration at the introduction to dialysis in patients with diabetic nephropathy as the primary disease was lower than that in patients with chronic glomerulonephritis.

4. Estimated glomerular filtration rate of patients at the introduction to dialysis. The estimated glomerular filtration rate (eGFR) (mL/min/1.73 m²) of patients was calculated and tabulated in terms of gender, age, and serum creatinine concentration of the patients at the introduction to dialysis. The eGFR was obtained by multiplying the value obtained using the modification of diet in renal disease (MDRD) equation by the Japanese factor (14).

When the serum creatinine concentration was measured by the Jaffe method, the following equation was used:

**TABLE 53.** Items related to clinical symptoms at the introduction of dialysis (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks)

Clinical symptoms and signs or disorder at the introduction of dialysis	Symptom free	Experiencing symptoms	Subtotal	Unspecified	No information available	Total
Retention of body fluid: generalized edema, severe hypoproteinemia, pneumonedema	7 421	7541	14 962	502	15 046	30 510
(%) Fluid abnormality: uncontrollable electrolyte and acid–base imbalance	(49.6) 7 572	(50.4) 7210	(100.0) 14 782	611	15 117	30 510
(%) Digestive system: nausea, vomiting, loss of appetite, diarrhea	(51.2) 7 169	(48.8) 7549	(100.0) 14 718	658	15 134	30 510
(%) Cardiovascular system: serious hypertension, cardiac failure, pericarditis	(48.7) 9 101	(51.3) 5611	(100.0) 14 712	539	15 259	30 510
(%) Nervous system: central and peripheral nervous disorder, mental disorder	(61.9) 12 696	(38.1) 2035	(100.0) 14 731	647	15 132	30 510
(%) Blood abnormalities: severe anemia, bleeding tendency (%)	(86.2) 8 594 (57.9)	(13.8) 6245 (42.1)	(100.0) 14 839 (100.0)	498	15 173	30 510
Impaired eyesight: uremic retinopathy, diabetic retinopathy	11 243	3343	14 586	825	15 099	30 510
(%) History of cardiac infarction before the start of dialysis (%)	(77.1) 14 620 (90.4)	(22.9) 1558 (9.6)	(100.0) 16 178 (100.0)	371	13 961	30 510
Congestive cardiac failure (%)	11 625 (72.2)	4465 (27.8)	16 090 (100.0)	364	14 056	30 510
History of quadruple amputation, complication of arteriosclerosis obliterans, or aortic aneurysm ≥6 cm (%)	15 295 (93.5)	1055 (6.5)	16 350 (100.0)	261	13 899	30 510
History of brain infarction or transient ischaemic attack (%)	13 711 (84.8)	2458 (15.2)	16 169 (100.0)	398	13 943	30 510
Dementia (%) Chronic lung disease	14 871 (91.3) 15 557	1412 (8.7) 592	16 283 (100.0) 16 149	225 253	14 002 14 108	30 510 30 510
(%) Collagen diseases	(96.3) 15 786	(3.7) 410	(100.0) 16 196	233	14 108	30 510
(%) Peptic ulcer	(97.5) 14 539	(2.5) 876	(100.0) 15 415	739	14 356	30 510
(%) Chronic hepatic disease (without portal hypertension) or chronic hepatitis	(94.3) 15 145	(5.7) 970	(100.0) 16 115	233	14 162	30 510
(%) Diabetes mellitus (without end-stage organ damage, patients treated by dietary therapy alone are not included)	(94.0) 11 605	(6.0) 4302	(100.0) 15 907	257	14 346	30 510
(%) Hemiplegia	(73.0) 15 231	(27.0) 952	(100.0) 16 183	182	14 145	30 510
(%) Diabetes mellitus: severe retinopathy, nervous disorder, renal disorder, labile diabetes	(94.1) 10 452	(5.9) 5530	(100.0) 15 982	249	14 279	30 510
(%) Malignant tumors (those without metastasis and who have survived five years since diagnosis are not included)	(65.4) 15 188	(34.6) 994	(100.0) 16 182	234	14 094	30 510
(%) Leukemia (acute and chronic)	(93.9) 16 146	(6.1) 109	(100.0) 16 255	175	14 080	30 510
(%) Lymphoma (%)	(99.3) 16 065 (99.3)	(0.7) 113 (0.7)	(100.0) 16 178 (100.0)	233	14 099	30 510
Moderate and end-stage hepatic disease (%)	(99.3) 15 782 (97.3)	430 (2.7)	(100.0) 16 212 (100.0)	188	14 110	30 510
Metastasizing malignant tumors (%)	15 897 (98.4)	257 (1.6)	16 154 (100.0)	232	14 124	30 510
Acquired immunodeficiency syndrome (%)	13 544 (99.4)	75 (0.6)	13 619 (100.0)	2724	14 167	30 510

Pre-dialysis serum creatinine concentration at the introduction to dialysis and gender (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 54.

ı			ν.	v			ν.
	SD	9 3.61	9 3.35		t.		4 3.55
	Меап	8 8.69	2 7.69	0	5.0	0	0 8.34
	IstoT	19 748	10 762	20 5 17	01000		30 510
noit	No informa available	8 303	4 442	377 CT	C+ / 71	0	12 745
	Subtotal	11 445	6 320	(100.0)	(100.0)	0	17 765 (100.0)
	0.02≤	149	<u>.</u> 4	(0.7)	(1.1)	,0	193
	6.61 <u>–</u> 0.61	94 6	(2.5)	(0.1)	(0.3)	0	(0.3)
	6.81–0.81	61	12	(0.2)	(0.4)	0	73 (0.4)
	6.71 <u>-</u> 0.71	67	(0.0)	(0.3)	(0.5)	,0	(0.5)
	6.81-0.81	ı		(0.5)			125 (0.7)
g/dL)	6.21 <u>–</u> 0.21	144	(5.1.) 45	(0.7)	(1.1)	0	189
introduction to dialysis (mg/dL	14:0-14:9	186	(4.0)	(1.0)	(1.4)	,0	249
ı to dial	6.E1-0.E1	296	102	(1.6)	(2.2)	,0	398 (2.2)
oduction	6.21-0.21	446	160	(2.5)	(3.4)	,0	606
at the intro	6.11 <u>-</u> 0.11	673	239	(3.8)	(5.1)	,0	912 (5.1)
tion at	6.0I-0.0I	961	408	(6.5)	(7.7)	0	1369
um creatinine concentration	6.6-0.6	1366	624	(9.9)	(11.2)	0	1990 (11.2)
eatinine	6.8-0.8	1850	942	(14.9)	(15.7)	0	2792 (15.7)
	6 <sup>.</sup> L=0 <sup>.</sup> L	1643	898	(13.7)	(14.1)	0	2511 (14.1)
re-dialysis ser	6.8–0.8	1290	876	(13.9)	(12.2)	0	2166 (12.2)
Pre	6.2–0.2	1017	735	(11.6)	(9.9)	,0	1752 (9.9)
	6.4-0.4	633	572	(9.1)	(6.8)	,0	1205 (6.8)
	6.€–0.€	334	330	(5.2)	(3.7)	0	(3.7)
	6.2–0.2	149	182	(2.9)	(1.9)	,0	331 (1.9)
	0.2>	1		(0.9)			104
	Gender	Male	( ^0 ) Female	(%) Subtestal	340totai (%)	No information available	

Values in parentheses below each figure represent the percentage relative to the total of each row.

Pre-dialysis serum creatinine concentration at the introduction to dialysis and age (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 55.

	S	1.93	5.55	4.91	3.88	3.13	3.01	2.48	3.55	1.77	3.55		
	Mean	5.83	12.81	10.96	9.44	8.29	7.27	6.33	8.34	3.35	8.34		
	Total	28	251	1 606	5 957	12 467	9 762	421	30 492	18	30 510	67.33	13.22
	No information available	17	117	706	2 421	5 193	4 087	188	12 729	16	12 745	67.29	13.41
	i Subtotal	11	(100.0) 134	(100.0)	(100.0) 3 536	(100.0) 7 274	(100.0) 5 675	(100.0)	(100.0) 17 763	(100.0)	17 765	(100.0) 67.37	13.08
	0.02≤	0 8	(0.0)	(9.0)	(4.9)	(2.2)	(0.6)	(0.3)	(0.0) 193	(1.1)	193	(1.1) 52.56	15.40
	6.61-0.61	0 8	33	(2.2)	(2.0)	(0.4)	(0.2)	(0.0)	(0.0)	(0.3)	47	(0.3)	13.93
	9.81-0.81	0 9	(0.0) 8	(6.0) 18	(2.0)	(0.5)	(0.3)	(0.1)	(0.0)	(0.4)	73	(0.4)	17.20
	6.71 <u>–</u> 0.71	0 8	(0.0) 6	(4.5)	(2.2)	(0.8)	(0.4)	(0.1)	(0.0)	(0.5)	68	(0.5)	15.06
g/dL)	6.61-0.81	0 9	3	(2.2)	(2.1)	(1.5)	(0.5)	(0.2)	(0.0)	(0.7)	125	(0.7)	13.78
sis (m	9.21-0.21								(0.0)		189	(1.1) 56.31	14.55
o dialy	6.41-0.41	0	(0.0)	(3.7)	(2.9)	(2.2)	(1.5)	(0.6)	(0.0)	(1.4)	249	(1.4)	13.34
tion to	6.EI-0.EI								(0.4)		398	(2.2)	13.61
troduc	12.0-12.9								(1.7)		909	(3.4) 61.85	13.27
the in	6.11-0.11								(1.7)		912	(5.1) 62.75	13.30
ions at	6.01-0.01								(4.3)		6981	(7.7)	12.88
tinine concentrations at the introduction to dialysis (mg/dL	6.6-0.6								(7.3)		0661	(11.2) 65.60	12.47
ine con	6.8–0.8	0 9	(0.0)	(112) 118	(13.1) 591	(16.7)	(16.5) 837	(14.7)	(12.0)	(15.7)	2622	(15.7) 67.18	12.27
_ =	6.7–0.7	4 6 6 6 6 6	(50.4)	(2.2)	(7.9)	(11.7)	(14.9) 914	(16.1)	(10.3)	(14.1)	2511	(14.1) 69.29	11.62
serum	6.8–0.8									(12.2)	2166	(12.2) 70.34	11.64
Pre-dialysis serum crea	6.8–0.8	1 (10)	3	(2.2)	(4.6) 214	(6.1)	(9.4)	(13.5)	(16.7) 1752	(9.9)	1752	(9.9) 71.58	11.54
Pre-	6.4-0.4	2 2 2 2 2 2	(16.2) 4	(3.0)	(2.9)	(4.0) 426	(5.9)	(10.1)	(12.9)	(6.8)	1205	(6.8) 72.31	12.00
	6.€–0.€	1 0	(9.1)	(1.5)	(1.3)	(2.2)	(3.4)	(5.4)	(8.6)	(3.7)	664	(3.7)	11.65
	6.2-0.2	1 6	(9.1)	(1.5)	(0.9)	(1.1)	(1.4)	(2.9)	(6.4)	(1.9)	331	(1.9)	13.44
	0.2>	0 9	0.0)	(0.0)	(0.1)	(0.3)	(0.6)	(0.8)	(2.1)	(0.6)	104	(0.6) 73.23	10.62
	Age (years)	< 15	(%) 15–29	(%) 304	(%) 45–59	(%) 60–74	(%) 75–89	(%)	(%) Subtotal	(%) No information available	Total	(%) Mean	SD

Values in parentheses below each figure represent the percentage relative to the total of each row.

 TABLE 56.
 Pre-dialysis serum creatinine concentration at the introduction to dialysis and primary diseases (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks)

																					ı			
					-	Pre-dialy	sis serum	creatinin	e concent	Pre-dialysis serum creatinine concentrations at the introduction to dialysis (mg/dL)	the intrc	duction	to dialys	is (mg/d	<u>[]</u>					1	toite			
Primary disease	0.2>	6.2-0.2	6.€–0.€	6.4-0.4	6.2–0.2	6.8–0.8	6.7 <u>–</u> 0.7	6.8-0.8	6.6-0.6	6.01-0.01	6.11-0.11	12.0-12.9	9.61-0.61	14.0–14.9	9.21-0.21	6.81-0.81	6.71-0.71	9.81-0.81	0.02≤	Subtotal	No informa available	Total	Mean	SD
Chronic glomerulonephritis (%) (%) Chronic pyelonephritis (%) Rapidly progressive	19 (0.5)	58 (1.4) 1 (0.8)	99 (2.4) 4 (3.0) 9	203 (5.0) 4 (3.0) 23	339 (8.4) 15 (11.3) 30	426 (10.5) 12 (9.0) 39	535 (13.2) 16 (12.0) 34	661 (16.4) 19 (14.3) 34	'	352 (8.7) 18 (13.5) 22	242 (6.0) 8 (6.0) 18	169 (4.2) 5 (3.8) 15	(2.8) (2.8) (4.5) 12	80 (2.0) 2 (1.5) 6	72 (1.8) 2 (1.5) 3	38 (0.9) 4 (3.0) 3	30 3 (0.7) ( 0 (0.0) (	30 19 (0.7) (0 1 0 (0.8) (0	19 75 (0.5) (1.9) 0 1 (0.0) (0.8) 1	4042 9) (100.0) 133 8) (100.0) 295	2 958 (0) 81 (0) 216	8 7 000 1 214 5 511	0 9.03 4 9.12 1 8.50	3 4.04 2 3.80 0 3.52
glomerulonephritis (%) Nephropathy of pregnancy /	(0.3)	(2.4)	(3.1)	(7.8)	(10.2) 2	(13.2)	(11.5)	(11.5)			(6.1)	(5.1)	(4.1) 0	(2.0)	(1.0) 0			_				1 39	9 9.04	1 5.36
pregnancy toxema (%) Other nephritides that cannot	(0.0)	(0.0)	(0.0)	(10.7)	(7.1)	(10.7)	(21.4)	(14.3)			(3.6)	(3.6)	(0.0)	(3.6)	(0.0)			(0.0) (0			.0) 50	0 131	1 9.31	3.65
be classified (%) Polycystic kidney disease	(0.0)	(1.2)	(6.2)	(1.2)	(7.4)	(9.9)	(9.9)	(16.0)			(3.7)	(6.2)	(6.2)	(1.2)	(3.7)							5 694	4 9.37	7.3.77
(%) Nephrosclerosis (%)	(0.2)	(0.0) (1.4)	(0.5)	(2.5) 142 (6.9)	(5.5) 212 (10.2)	(11.4)	(16.9) 302 (14.6)	(20.0) 344 (16.6)			(7.3)	(3.9) 56 (2.7)	(3.0) 43 (2.1)	(2.1)	(1.6) 15 (0.7)						.0) 1 308 .0)			5 3.06
Malignant hypertension (%)	0.0)	(1.0)	(1.0)	(1.0)	(7.8) (7.8)	(13.6)	(10.7)	16 (15.5)			6 (5.8)	(3.9)	(6.8)	(1.0)	(1.0)							5 188	8 9.91	1 4.17
(%) Systemic lupus erythematosus	(0.6)	(2.0)	(4.3)	(7.5)	(10.9)	(13.2)	(15.0)	(15.6)			(4.6)	(2.9)	(1.8)	(1.0)	0.7)									
nephritis (%) Amyloidal kidney	(0.7)	(3.6)	(8.0)	(17.4)	(8.0)	(9.4)	(15.2)	(13.8)			(2.2)	(3.6)	(0.7)	(0.7)	(0.0)								7 6.97	7 2.60
(%) Gouty kidney (%)	(T.T) 0 (9	(4.6) 1 (1.6)	(4.6) 4 (6.3)	(11.5)	(18.4)	(10.3)	(13.8)	(16.1) 13 (20.6)			(4.6) (8.8)	2	(2.3) (3.2)	(1.1) 3 (4.8)	(0.0) (8.8)							22 85	5 9.32	3.49
Renal failure due to congenital abnormal metabolism	0.0	1	1	1	1	3	4	4			3 (1.6)	1	1	0	1								5 8.91	3.66
(%) Kidney and urinary tract	(0.0)	(4.0)	(4.0)	(4.0)	(4.0)	(12.0)	(16.0)	(16.0)			(12.0)	(4.0)	(4.0)	(0.0)	(4.0)							4 16	6 7.14	1 2.61
(%) Kidney and urinary tract stone	(0.0)	(8.3)	(8.3)	(8.3)	(0.0)	(0.0)	(41.7)	(16.7)			(0.0)	(0.0)	(0.0)	(0.0)	(0.0)									7 5.14
(%) Kidney and urinary tract tumor	(0.0)	(2.7)	(0.0)	3.6	(5.4)	(13.5)	(13.5)	(5.4) 6 (9.4)			(5.4)	(8.1)	(2.7)	(0.0)	(0.0)							8 144	4 7.95	3.82
Obstructive urinary tract difficulty	(8:8)	0.0	(7.6)	(8.5)	(10.2)	3 (5.5)	9 (16.4)	(e. ) (e. ) (e. )			33	3 (5.0)	1 1 8	0 0	(5.0) (5.0)									3 4.31
(%) Myeloma (%)	0.0	0.0	(0.0) 4 &	0.6	1 2	(C.C) 9 (0.51)	11 (14.7)	16 21 3)			(C.C) 4 &	(5.5)	0 0	(0.0) (5.0)	1 (3.6)									3.56
(%) Hypoplastic kidney (%)	1 (0.0)	1 (3.6)	1 (3.5)	2 (7.1)	0 0	3 (10.7)	2 (71)	6 (214)			22	1 (3.5)	1 (0.0)	1 (5.7)									7 10.07	7 5.80
(%)	6.6	6.03	2.4.4	124	145	184	192	230			94 (6.0)	65 (4.1)	545	29.53	20.0)								5 8.50	3.83
Reintroduction after transplantation (%)	0.0)	0.0)	(2.0)	4 (7.8)	(9.8)	4 (7.8)	(19.6)	(21.6)			0.0)	4 (7.8)	(3.9)	0.0)	(2.0)						.0) 40	0 91		
(%) Subtotal	(2.9)	(4.8) 331	(7.2) 664	4, (11.2) 1204	(13.2) 1752	(10.0) 2166	(10.8) 2508	(11.0) 2792			(3.1) 912	(2.2)	(1.2) 398	(0.7) 249	(0.0) 189								9 8.34	3.55
(%) No information available Total (%)	(0.6) 0 104 (0.6)	(1.9) 0 331 (1.9)	(3.7) 0 664 (3.7)	(6.8) 1 1205 (6.8)	(9.9) 0 1752 (9.9)	(12.2) 0 2166 (12.2)	(14.1) 3 2511 (14.1)	(15.7) 0 2792 (15.7)			(5.1) 0 912 (5.1)	(3.4) 0 606 (3.4)	(2.2) 0 398 (2.2)	(1.4) 0 249 (1.4)	(1.1) 0 189 (1.1)		(0.5) ( 0 0 89 7 (0.5) (	(0.4) (0 0 0 73 47 (0.4) (0	(0.3) (1.3 0 0 47 193 (0.3) (1.3			5 10 5 30 51	1 7.97 0 8.34	7 2.19

Values in parentheses below each figure represent the percentage relative to the total of each row.

Estimated glomerular filtration rates (eGFR) at the introduction to dialysis and the treatment methods used at the end of year of introduction (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 57.

	ЗD	3.39	3.63		1.82		I	0.25		4.11		3.43	
	Меап	5.44	5.70		5.86		I	3.25		5.19		5.43	
	Total	28 059	992		22		ю	æ		1 657		30 510	
noit	No informa available	13 926	338		12		ю	1		894		15 174	
	Subtotal	14 133	(100.0) 428	(100.0)	10	(100.0)	0	2	(100.0)	763	(100.0)	15 336	(100.0)
	0.0€≤	29	0.7)	(0.0)	. 0	(0.0)	0	0	(0.0)	, CO	(0.4)	32	(0.2)
	6.62-0.82	5 6 6	1	(0.2)	.0	(0.0)	0	0	(0.0)	. —	(0.1)		(0.0)
	6.72-0.82	13	(0.1)	(0.2)	. 0	(0.0)	0	0	(0.0)	. —	(0.1)	15	(0.1)
	6.25-0.42	15	(0.1)	(0.2)	.0	(0.0)	0	0	(0.0)	.0	(0.0)	16	(0.1)
	6.62-0.22	12	(0.1)	(0.2)	0	(0.0)	0	0	(0.0)	. —	(0.1)	14	(0.1)
	6.12-0.02	26	(0. <sub>2</sub> )	(0.5)	.0	(0.0)	0	0	(0.0)	. —	(0.1)	59	(0.2)
/1.73 m <sup>2</sup> )	6.61-0.81	47	(0.5)	(0.5)	0	(0.0)	0	0	(0.0)	. —	(0.1)	20	(0.3)
mL/min	6.71 <u>–</u> 0.81	87	(0.0)	(1.6)	. 0	(0.0)	0	0	(0.0)	0	(0.0)	94	(0.0)
dialysis (	6.21-0.41	106											(0.7)
ction to	9.£1-0.21	203	7.1	(1.6)	0	(0.0)	0	0	(0.0)	9	(0.8)	216	(1.4)
e introdu	6.11 <u>–</u> 0.01	370	(5.0) 6	(2.1)	0	(0.0)	0	0	(0.0)	14	(1.8)	393	(5.6)
eGFR at th	6.6–0.8	843	(0.0) 26	(6.1)	. —	(10.0)	0	0	(0.0)	35	(4.6)	905	(5.9)
)e	6.7-0.8	2126	(15.0)	(14.3)	m	(30.0)	0	0	(0.0)	96	(12.6)	2286	(14.9)
	6.2-0.4	5390	(30.1)	(41.1)	. 5	(50.0)	0	0	(0.0)	315	(41.3)	5886	(38.4)
	6.2-0.2	4513	(51.9)	(28.7)	. —	(10.0)	0	2	(100.0)	273	(35.8)	4912	(32.0)
	6.1–0.1	326	(c:-7) 6	(2.1)	, 0	(0.0)	0	0	(0.0)	12	(1.6)	347	(2.3)
	0.1>	22	1	(0.2)	0	(0.0)	0	0	(0.0)	0	(0.0)	23	(0.1)
	Method of dialysis	Facility hemodialysis	( ′o) Hemodiafiltration	(%)	Hemofiltration	(%)	Hemoadsorption (%)	Home hemodialysis	(%)	Peritoneal dialysis	(%)	Total	(%)

Values in parentheses below each figure represent the percentage relative to the total of each row.

Estimated glomerular filtration rates (eGFR) at the introduction to dialysis and gender (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 58.

	SD	3.49	3.29	3.43		I	3.43
	Меап	5.68	4.99	5.43		I	5.43
	IstoT	19 748	10 762	30 510		0	30 510
noiti	No informa available	668 6	5 275	15 174	(	0	15 174
	Subtotal	9 849	5 487	(100.0) 15 336	(100.0)	0	15 336 (100.0)
	0.0€≤	21	11	(0.2)	(0.2)	0	32 (0.2)
	6.62-0.82	3	4 (0.0)	(0.1)	(0.0)	0	(0.0)
	6.72-0.82	8 (1.0)	7	(0.1)	(0.1)	0	(0.1)
	6.25-0.42	14	2	(0.0) 16	(0.1)	0	(0.1)
	6.62-0.22	8	6	(0.1)	(0.1)	0	(0.1)
	6.12-0.02	16	13	(0.2) 29	(0.2)	0	(0.2)
$.73 \text{ m}^2$ )	6.61-0.81	35	15	(0.3)	(0.3)	0	50 (0.3)
L/min/1	6.71-0.81	65	29	(0.5)	(0.6)	0	94 (0.6)
ialysis (m	14.0–15.9	68	43	(0.8)	(0.7)	0	(0.7)
uction into dialysis (mL/min/1.73 m <sup>2</sup> )	9.61-0.21	153	(4:0)	(1.1) 216	(1.4)	0	216 (1.4)
introduct	6.11-0.01	280	113	(2.1) 393	(2.6)	0	393 (2.6)
eGFR at	6.6–0.8	661	242.7	(4.4) 905	(5.9)	0	905 (5.9)
	6.7-0.8	1649	(10.7)	(11.6) 2286	(14.9)	0	2286 (14.9)
	6.2-0.4	4169	1717	(31.3) 5886	(38.4)	0	5886 (38.4)
	6.2-0.2	2515	2397	(43.7) 4912	(32.0)	0	4912 (32.0)
	6.1-0.1	174	173	(3.2)	(2.3)	0	347 (2.3)
	0.1>	10	(0.1)	(0.2)	(0.1)	0	(0.1)
	Gender	Male	Female	(%) Subtotal	(%)	No information available	Total (%)

Values in parentheses below each figure represent the percentage relative to the total of each row.

Estimated glomerular filtration rates (eGFR) at the introduction to dialysis and age (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 59.

	SD	3.14	3.60	2.72	3.27	3.54	3 37	Š	4.16	3.43			3.43		
	Mean	89.6	4.51	4.54	4.96	5.37	5 01	7.71	29.9	5.43			5.43		
	Total	28	251	1 606	5 957	12 467	C9L0	7016	421	30 492	0	10	30 510	67.33	13.22
noit	No informa available	18	137	832	2 928	6 144	2887	700	215	15 156	0		15 174		13.37
	Istotdu2	10	(100.0) 114	(100.0) 774	(100.0) 3 029	(100.0) 6 323	(100.0)	(100.0)	206	15 336	(100.0)	0	15 336	(100.0) 67.39	13.07
	0.0€≤	0 9	(0.0) 1	(0.9)	(0.0)	(0.2)	(0.2)	(0.2)	2 5	32	(0.2)	)	32	(0.2) 68.91	14.59
	6.62-0.82	0 9	(0.0) 0	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	0 0	7.0)	(0.0)	0	7	(0.0)	13.65
	6.72-0.82	0 8	(0.0) 0	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)	0 0	15	(0.1)	0	15	(0.1) 69.80	12.43
	6.25-0.42	0 8	(0:0) 0	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)	0 0	(0.0) 16	(0.1)	0	16	(0.1)	11.07
	6.62-0.22	0 9	(0.0) 0	(0.0)	(0.0)	(0.0)	(0.1)	(0.1)	1	14	(0.1)	0	14	(0.1)	10.53
	6.12-0.02	0 8	(0.0) 0	(0.0)	(0.5)	(0.1)	(0.2)	(0.2)	1	29	(0.2)	)	29	(0.2)	16.50
/1.73 m²	6.9I <i>–</i> 0.8I	0 8	(0:0) 0	(0.0)	(0.0)	(0.3)	(0.3)	(0.4)	1	20.5)	(0.3)	0	50	(0.3)	11.70
mL/min	6.71–0.81	0 0	(0.0) 0	(0.0)	(0.5)	(0.5)	(0.5)	(0.9)	5 5	94	(0.6)	0	94	(0.6)	12.51
lialysis (	14.0 <u>–15.9</u>	1 2 6 6 7	(10.0) 2	(1.8)	(0.4)	(0.5)	(0.6)	(1.0)	4 5	111	(0.7)	0	111	(0.7)	15.11
introduction to dialysis (mL/min/1.73 $m^2$ )	12.0-13.9	2 5	(20.0)	(0.9) 4	(0.5)	(1.0)	(1.3)	(1.8)	8 8	(5.2)	(1.4)	0	216	(1.4)	12.79
ne introd	6.11 <u>-</u> 0.01	1 0 0 0 0	(10.0)	(2.6)	(1.7)	(1.8)	(2.3)	(3.4)	- E	393	(2.6)	0	393	(2.6)	12.95
JFR at the	6.6–0.8	3	(30.0)	(1.8)	(4.1) 125	(4.1)	(5.0)	(8.3)	22	905	(5.9)	>	905	(5.9)	12.92
9a	6· <i>L</i> -0·9	1 2 6 5	(10.0)	(8.8)	(8.8)	(12.1)	(14.9)	(17.5)	43	2286	(14.9)	0	2286	(14.9)	12.30
	6.8-0.4	2 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	(20.0) 29	(25.4)	(33.2) 1105	(36.5)	(39.7)	(39.3)	68	5886	(38.4)	0	5886	(38.4)	12.41
	6.2–0.2	0 0	(0.0) 52	(45.6) 329	(42.5) 1170	(38.6)	(32.7)	(25.5)	46	(223) 4912	(32.0)	0	4912	(32.0)	13.26
	6.I <i>-</i> 0.1	0	(0.0)	(12.3) 56	(7.2)	(3.9)	(1.8)	(0.9)	1	347	(2.3)	>	347	(2.3) 57.26	15.35
	0.1>				(0.4)									(0.1)	
	Age (years)	<15	(%) 15–29	(%) 30-4	(%) 45–59	(%) 60–74	(%)	(%)	≥90 (%)	Subtotal	(%)	available	Total	(%) Mean	SD

Values in parentheses below each figure represent % relative to the total of each row.

Estimated glomerular filtration rates (eGFR) at the introduction to dialysis and primary diseases (only patients begun on dialysis in 2007 who responded to the questionnaire using floppy disks) TABLE 60.

						eGFR 8	GFR at introduction into dialysis (mL/min/1.73 m <sup>2</sup> )	tion into G	fialysis (m	.T/min/1.7	3 m <sup>2</sup> )							uc			
Primary disease	0.1>	6.I-0.I	6.2-0.2	6.2–0.4	6.7–0.8	6.6-0.8	6.11 <u>-</u> 0.01	9.61-0.21	6.21-0.41	6.71–0.81	6.61-0.81	6.12-0.02	6.52-0.22	6.25-0.42	6.72-0.32	6.62–0.82 0.0£≤	Subtotal	Vo informati Sldaliava	Total	Меап	SD
Chronic glomerulonephritis (%) Chronic pyelonephritis (%) Rapidly progressive	8 (0.2) 1 (0.9)	(3.7) (3.7) (3.7) (3.7)	1338 (38.7) 46 (42.2) 94	1273 (36.8) 37 (33.9) 83	416 (12.0) 13 (11.9) 37	(4.2) (4.2) 6 (5.5) 15	60 (1.7) 0 (0.0)	29 (0.8) 0 (0.0)	(0.5) (0.9) (0.9)	19 (0.5) 1 (0.9) 2	6 (0.2) 0 (0.0)	2 (0.1) (0.0) 0	(0.1) (0.0) (0.0) (0.0)	3 3 3 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3 1 (0.0) (0.0) (0.0) (0.0) (0.0)	1 8 (0.0) (0.2) (0.0) (0.0) (0.0) (0.0)	3461 (100.0) 109 (100.0) 253	3 539 105 258	7 000 214 511	4.94 4.63 5.08	3.30 2.31 2.99
glomerulonephritis (%) Nephropathy of pregnancy /	(0.0)	(4.3)	(37.2)	(32.8)	(14.6)	(5.9)	(2.4)	(0.4)	(0.8)	(0.8)	(0.4)	0.0)	0.0)	0.4) ((0.4)	0.0) (0.0)	(0.0) (0.0)		16	39	3.96	1.70
pregnancy toxernia (%) Other nephritides that cannot be	(4.3)	(0.0)	(52.2)	(30.4)	(13.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	0.0)	(0.0)	0.0) (0.0)	(0.0) (0.0)	(0.0) (0.0)		09	131	4.84	2.65
(%) Polycystic kidney disease (%)	(0.0) 2 (0.5)	(4.2) 15 (3.9)	(42.3) 163 (42.0)	(33.8) 155 (39.9)	(9.9) 43 (11.1)	(4.2) 6 (1.5)	(4.2) 2 (0.5)	(0.0)	(0.0)	(1.4)	(0.0)						(100.0) 388 (100.0)	306	694	4.41	1.79
Nephrosclerosis (%) Malignant hypertension	0.0)	25 (1.4) 5	610 (33.4) 30	709 (38.8) 36	268 (14.7) 13	(6.0)	4.2)	29 (1.6)	10 (0.5)	8 (0.4)	(0.2) 0							1555	3 380	5.31	2.90
(%) Diabetic nephropathy (%)	(0.0)	(5.8) 82 (1.2)	(34.9) 1852 (27.0)	(41.9) 2785 (40.6)	(15.1) 1170 (17.1)	(1.2) 468 (6.8)	(1.2) 199 (2.9)	(0.0) 120 (1.7)	(0.0) 49 (0.7)	(0.0) 41 (0.6)	(0.0)	(0.0) (17 (0.2) (	(0.0)	(0.0)	(0.0) (0.0) 8 2 (0.1) (0.0)	(0.0) (0.0) (0.2)		6 511	13 371	5.73	3.44
Systemic tupus etytinematosus nephritis (%) Amyloidal kidnev	(0.8)	0.0)	36 (29.8) 22	(33.9) (19	(15.7)	(11.6) 8	(2.5)	(0.8)	2 (1.7) 0	(0.8)	(0.8)							86	22.3	6.48	5.50 4.50
(%) Gouty kidney	0.0)	0.0)	(31.0)	(26.8)	(21.1)	(11.3)	(2.8)	(1.4)	0.0	1 1 2 2	(1.4)		(0:0)	0.0	(0.0) (1.4) 0 0	(4) (0.0)		31	85	5.40	3.07
( %) Renal failure due to congenital abnormal metabolism	0.0)	1	(29.0) 4	9 (4.4)	(14.8)	0	0	0 (5)	0.0)	0 0	0.0)							19	35	4.30	1.37
(%) Kidney and urinary tract	(0.0)	(6.3)	(25.0)	(56.3)	(12.5)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)			0.0)	0.0) (0.0)	(0.0) (0.0		4	16	5.97	3.70
(%) Kidney and urinary tract stone	(0.0)	(0.0)	(25.0)	(50.0)	(8.3)	(0.0)	(8.3)	(0.0)	(8.3)	(0.0)	(0.0)							24	54	4.63	2.99
(%) Kidney and urinary tract tumor	0000	(13.3) 1 (1.5)	(36.7)	(33.3) 20 30 80 80 80	(10.0)	0000	(3.3) 4 4 (5.3)	(0.0)	(0.0)	(3.3)	() () () () () () () () () () () () () (							79	144	7.35	8.65
(%) Obstructive urinary tract difficulty	0.0	3 (6.3)	(55.6) 21 (43.8)	(30.6)	(10.4)	0.0	(0.0) 0	0 0	0 0	(3.1) 0 0 0	0.0)							49	26	4.07	1.39
(%) Myeloma (%)	0000	4 6	24.6 6.6.0	26.2)	3 (5.0)	2.0	1 (0.0)	0.00	0000	000	0000							79	139	4.25	1.78
Hypoplastic kidney	0 0	4 4 (15.4)	10	(53.1)	1 (3)	2 5	1 (3.8)	1 (3.8)	0 0	0 0	1 (3.8)							21	47	5.24	4.00
Unspecified (%)	(0.0)	51 (3.8)	453 (33.7)	464 (34.5)	183 (13.6)	86 (6.4)	(3.4)	(1.6)	(1.2)	(0.9)	5 (0.4)							1 680	3 025	5.45	3.60
Reintroduction after transplantation (%)	0.0)	0.0)	10 (22.7)	20 (45.5)	6 (13.6)	6 (13.6)	(4.5)	0.0)	0.0)	0 (0:0)	0.0)							47	91	5.45	2.23
Others (%)	) (0.0)	(1.7)	103 (28.4)	(30.6)	(16.5)	(8.0)	(4.1)	9 (2.5)	(3.0)	(1.1)	, 5 (0.6)							403	992	6.85	5.45
Subtotal (%)	23 (0.2)	347 (2.3)	4910 (32.0)	5884 (38.4)	2286 (14.9)	904 (5.9)	393 (2.6)	216	(0.7)	94 (0.6)	50 (0.3)							15 078	30 409	5.43	3.43
No information available Total (%)	0 23 (0.1)	0 347 (2.3)	2 4912 (32.0)	2 5886 (38.4)	0 2286 (14.9)	905	0 393 (2.6)	216 (1.4)	0 1111 (0.7)	0 46 (0.0)	0 50 (0.3)	29 1	(0.1)	0.13 0.13 0.13 0.13	0 0 15 7 (0.1) (0.0)	, 0 32 (0.2)		96 15 174	$\frac{101}{30510}$	5.31	2.45
		1																			

Values in parentheses below each figure represent the percentage relative to the total of each row.

eGFR of male patients =  $186 \times$  (serum creatinine concentration prior to first dialysis<sup>(-1.154</sup>) × (age at introduction into dialysis<sup>(-0.203)</sup>) × 0.881

When the serum creatinine concentration was determined by the enzyme method, the following equation was used:

eGFR of male patients =  $175 \times (\text{serum creatinine} \text{ concentration prior to first dialysis}^{(-1.154)}) \times (\text{age at introduction to dialysis}^{(-0.203)}) \times 0.741$ 

The eGFR of female patients was calculated by multiplying the value obtained using the above equations, that is, the eGFR of male patients, by 0.742.

- a. Treatment method at the end of year of introduction into dialysis. Table 57 shows the relationship between eGFR at the introduction to dialysis and the treatment method at the end of the year of introduction (2007). The mean eGFR at the introduction to dialysis of patients who underwent home hemodialysis was as low as 3.25 ( $\pm 0.25$ ) mL/min, which was difficult to evaluate accurately because the number of patients evaluated was only two. No significant difference in eGFR was found among the patients who were treated by other methods.
- b. Gender. Table 58 shows the relationship between eGFR at the introduction to dialysis and gender. Similarly to the result of the 2006 survey, the eGFR of female patients was lower than that of male patients, despite the fact that the serum creatinine concentration at the introduction to dialysis of the female patients was lower than that of the male patients.
- c. Age. Table 59 shows the relationship between eGFR at the introduction to dialysis and age. The eGFR of the patients tended to increase with age, which was similar to that in the 2006 survey.
- d. Primary disease. Table 60 shows the relationship between eGFR at the introduction to dialysis and primary disease. The eGFR tended to be high for patients with renal or urinary tract tumors, amyloid nephropathy, SLE nephritis, and diabetic nephropathy as the primary diseases.

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