RealWorld Dynamix

Exploring the Patient Journey

Dialysis (US)

OVERVIEW

The management of renal anemia in dialysis patients as well as in those with later stage chronic kidney disease is becoming increasingly complex. In the dialysis setting, clinical management is further complicated by a reimbursement model that treats commonly used therapies like erythropoiesis stimulating agents (ESAs) and iron therapies as cost centers. Novel products in development such as the oral HIF-Ph inhibitors offer a new mechanism approach and may change the treatment paradigm in both the dialysis and CKD-ND settings.

This annual report series focuses on tracking key performance metrics for ESAs and iron products (oral iron, IV iron and dialysate iron) in both the dialysis and CKD-ND settings. Emphasis is placed on the growing familiarity with pipeline agents as well as the potential role of Keryx's Auryxia as a treatment for iron-deficiency anemia in non-dialysis patients.

SAMPLE & METHODOLOGY

RealWorld Dynamix™: Dialysis is based on a deep, robust patient chart analysis of 1,021 dialysis patients. Each nephrologist (n=200) completed an in -depth medical history of the most recent 3-7 patients who met the study inclusion criteria. An excellent augmentation to claims data, ***RealWorld Dynamix™*** also captures the clinician's perspective on the why behind treatment decisions. In addition to patient demographics and treatment history, clinical assessments, diagnostic tests and laboratory values are included to provide insight into the real world treatment patterns in dialysis.

KEY QUESTIONS ANSWERED

- What are the treatment patterns in renal anemia in the dialysis setting and do these changes vary by chains (i.e. DaVita, FMC)? By dialysis modality?
- How frequently are the doses of renal medications adjusted and for what reason?
- What percent of the treated and non-treated population (for ESAs, IV Iron, Active Vitamin S, Sensipar and Phosphate Binders) are within the target ranges? Among the non-treated patients what percent were previously discontinued?
- How do nephrologists rate their patients on adherence levels to dialysis treatments, oral medications and phosphate binders? How do the patient profiles differ?
- What percent of the dialysis patients were followed by the same nephrologists in pre-dialysis? For patients referred with no dialysis care, what percent are referred by the hospital/ER? What percent are treated with renal medications in pre-dialysis and do patients stay on the same brand when transitioning from CKD to dialysis?
- How do certain co-morbid conditions such as Type 2 diabetes, influence the treatment patterns?
- What patient types are the newer phosphate binders, Velphoro and Auryxia, being used in?

Products Profiled

Sensipar (Amgen), Auryxia (Keryx) , Mircera (Roche, FMC), Venofer (FMC, generics), Velphoro (Vifor-FMC), Renvela (Sanofi), Fosrenol (Shire), Feraheme (AMAG), Ferrlecit,/ Hectorol (Sanofi, generics) Aranesp (Amgen), Epogen (Amgen), Procrit (JNJ), Triferic (Rockwell Medical), Zemplar (AbbVie, generics), Veltassa (Relypsa), calcitriol, calcium acetate, calcium carbonate

Key Dates

- June Publication

Deliverables

- PowerPoint report
- Frequency Tables & Summary Statistics
- On-site or web-based presentation
- Copy of de-identified patient record database
- Proprietary questions (for purchasers of the report)

Related Reports 2017

- RealWorld Dynamix:™ Hyperkalemia US
- RealWorld Dynamix™: Chronic Kidney Disease US
- RealTime Dynamix:™ Renal Anemia US/EU5
- RealTime Dynamix:™ Bone and Mineral Metabolism US/EU5
- RealTime Dynamix:™ Hyperkalemia US/EU5
- RealTime Dynamix:™ Renal Dietitians US
- Market Dynamix: Diabetic Kidney Disease
- Market Dynamix™: Renal Anemia
- RealTime Dynamix™: Nurse Practitioners US

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- $79,500

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