General

Title
Advanced chronic kidney disease (CKD): percent of patients with blood pressure checked at every erythropoietin or analogue dose.

Source(s)

Measure Domain

Primary Measure Domain
Clinical Quality Measures: Process

Secondary Measure Domain
Does not apply to this measure

Brief Abstract

Description
This measure assesses the percent of patients with blood pressure checked at every erythropoietin or analogue dose among patients with advanced chronic kidney disease (CKD) who are receiving erythropoietin or analogue.

Rationale
Anemia is common in patients with advanced chronic kidney disease (CKD) and can lead to a variety of detrimental effects. In addition to the direct effects of anemia on performance and ischemic symptoms, it has also been suggested that mortality and major complications during end-stage renal disease (ESRD) are associated with anemia that develops early in the course of CKD. Correcting anemia before the initiation of renal replacement therapy (RRT) may improve health outcomes.

Blood pressure control often deteriorates with erythropoietin therapy. Seven small studies suggest at least some increase in the risk of developing hypertension or of suffering an exacerbation of hypertension associated with erythropoietin therapy.

Evidence for Rationale


Primary Health Components
Advanced chronic kidney disease; anemia; erythropoietin; blood pressure monitoring

Denominator Description
The number of adult patients with advanced chronic kidney disease (CKD) for at least three months, not currently receiving renal replacement therapy who are receiving an erythropoietin or analogue

Numerator Description
The number of patients from the denominator with blood pressure checked at every erythropoietin or analogue dose

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure
A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence
A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences
A systematic review of the clinical research literature (e.g., Cochrane Review)

Additional Information Supporting Need for the Measure

- Two studies have identified anemia as being prevalent in patients with advanced chronic kidney disease and it is also clear that the severity of anemia increases considerably with worsening renal function.
- Anemia is associated with increased mortality, detrimental effects on cardiac function, exercise capacity, quality of life, and cognitive function.

Evidence for Additional Information Supporting Need for the Measure


Extent of Measure Testing

Unspecified

State of Use of the Measure
State of Use
Current routine use

Current Use
not defined yet

Application of the Measure in its Current Use

Measurement Setting
Ambulatory/Office-based Care
Hospital Outpatient

Professionals Involved in Delivery of Health Services
not defined yet

Least Aggregated Level of Services Delivery Addressed
Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size
Unspecified

Target Population Age
Age greater than or equal to 18 years

Target Population Gender
Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim
Better Care

National Quality Strategy Priority
Prevention and Treatment of Leading Causes of Mortality
Institute of Medicine (IOM) National Health Care Quality Report

Categories

IOM Care Need
Living with Illness

IOM Domain
Effectiveness

Data Collection for the Measure

Case Finding Period
Unspecified

Denominator Sampling Frame
Patients associated with provider

Denominator (Index) Event or Characteristic
Clinical Condition
Patient/Individual (Consumer) Characteristic
Therapeutic Intervention

Denominator Time Window
not defined yet

Denominator Inclusions/Exclusions

Inclusions
Adult patients age 18 years and older with chronic kidney disease stage 4 or 5 (glomerular filtration rate [GFR] less than or equal to 30 mL/min/1.73 m²) for at least three months not currently receiving renal replacement therapy who are receiving an erythropoietin or analogue

Exclusions
Unspecified

Exclusions/Exceptions
not defined yet

Numerator Inclusions/Exclusions
Inclusions
The number of patients from the denominator who have their blood pressure checked at every erythropoietin or analogue dose

Exclusions
Unspecified

Numerator Search Strategy
Episode of care

Data Source
Administrative clinical data
Laboratory data
Paper medical record
Pharmacy data

Type of Health State
Does not apply to this measure

Instruments Used and/or Associated with the Measure
Unspecified

Computation of the Measure

Measure Specifies Disaggregation
Does not apply to this measure

Scoring
Rate/Proportion

Interpretation of Score
Desired value is a higher score

Allowance for Patient or Population Factors
not defined yet

Standard of Comparison
not defined yet
Identifying Information

Original Title
Number of patients with blood pressure checked at every erythropoietin or analogue dose / number of patients receiving an erythropoietin or analogue.

Measure Collection Name
Clinical Performance Measures on Appropriate Patient Preparation for Renal Replacement Therapy

Measure Set Name
Anemia Recommendations

Submitter
Renal Physicians Association - Medical Specialty Society

Developer
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Funding Source(s)
Ortho Biotech Products, LP

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Financial Disclosures/Other Potential Conflicts of Interest

There were none disclosed.

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2002 Oct

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in March 2016.

Measure Availability

Source not available electronically.

For more information, contact the Renal Physicians Association (RPA) at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; Phone: 301-468-3515; Fax: 301-468-3511; Web site: www.renalmd.org; E-mail: rpa@renalmd.org

NQMC Status

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The information was reaffirmed by the measure developer on March 11, 2016.

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For more information, contact RPA at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; phone: 301-468-3515; fax: 301-468-3511; Web site: www.renalmd.org; e-mail: rpa@renalmd.org.

Production

Source(s)


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