#NephJC transcript

Healthcare Social Media Transcript

From: Wed Mar 18 11:00:00 PDT 2015
To: Wed Mar 18 16:00:00 PDT 2015

What is #NephJC? Who were the influencers during this time period? #NephJC analytics

Healthcare Conference - Healthcare Tweet Chats - Healthcare Analytics

hswapnil @kidneydoc101 @Dr_Teacake @swissnephro @KoechKM @NephroMostapha - hope you join us for #NephJC in 2 hours! Warfarin in CKD
Wed Mar 18 11:08:20 PDT 2015

hswapnil @rsantamariao planning to join us for #nephJC tonight? Warfarin in CKD
Wed Mar 18 11:09:12 PDT 2015

hswapnil @dvdrry David, planning to join us for #nephJC tonight? Warfarin in CKD
Wed Mar 18 11:12:29 PDT 2015

dvdrry @hswapnil Sure, hot topic tonight! A #NephJC not to be missed!!
Wed Mar 18 11:45:46 PDT 2015

nephjc T-60 minutes to next GMT #NephJC Should CKD pts with AFib get warfarin?
http://t.co/E2khgfJ12u for details
Wed Mar 18 12:00:05 PDT 2015

nephjc T -15 minutes - is this thing on? #nephjc
Wed Mar 18 12:45:10 PDT 2015

rabpeel #nephjc in 4
Wed Mar 18 12:56:13 PDT 2015
hswapnil

Only 2 minutes left to brush up my best British accent for guest-hosting GMT #nephjc
Wed Mar 18 12:58:35 PDT 2015

nephjc

And welcome to another addition of #nephJC, EU/African edition! Your (guest) host is Swapnil Hiremath @hswapnil standing in for Tom/Fra/Paul
Wed Mar 18 13:00:02 PDT 2015

nephjc

The article we will chat about #nephjc is http://t.co/fDL0BTtVKD Summary writeup by @davidbaird86 & @paulphel at http://t.co/I8B8Gjo9U2
Wed Mar 18 13:00:25 PDT 2015

nephjc

Please introduce yourself, any affiliations, and declare any CoI (conflicts of interest) #NephJC
Wed Mar 18 13:00:43 PDT 2015

hswapnil

Swapnil Hiremath, #nephJC cofounder and nephrologist @OttawaHospital & @uOttawaMed - warfarin deprescriber. No other CoI
Wed Mar 18 13:01:11 PDT 2015

nephjc

Guess it’s just you and me tonight, Robert @rabpeel? #nephjc
Wed Mar 18 13:02:10 PDT 2015

hswapnil

“@paulphel: Hi @hswapnil Paul Phelan, nephrologist in Edinburgh.” #nephJC
Wed Mar 18 13:03:00 PDT 2015

nephjc

@hswapnil @paulphel hey paul, Welcome. Nice write up. Did you see any of those beautiful northern lights? #nephjc
Wed Mar 18 13:03:37 PDT 2015

dvdrry

David Arroyo, clinical nephrologist from Spain, very doubtful on anticoag in CKD - no COI #NephJC
Wed Mar 18 13:03:54 PDT 2015

rabpeel

#nephjc
Wed Mar 18 13:03:56 PDT 2015

nephjc

finally. welcome david and Robert. (nice pics, Robert BTW!) #nephjc
Wed Mar 18 13:04:23 PDT 2015

paulphel

@NephJC @hswapnil #nephjc no I’ve been in the hospital all day practising some serious nephrology!
Wed Mar 18 13:04:24 PDT 2015
nephjc  We recommend using tchat.io or http://t.co/S40TvV9956 to capture all the #nephJC conversation. And remember that hashtag its #nephjc
Wed Mar 18 13:04:26 PDT 2015

docthahir  Hi, Thahir , nephrologist UK. No COI #nephjc
Wed Mar 18 13:04:42 PDT 2015

nephjc  Ho thahir, thanks for joining in. #nephjc
Wed Mar 18 13:05:10 PDT 2015

kidney_boy  Joel Topf, One more patient in clinic #nephjc
Wed Mar 18 13:05:30 PDT 2015

docthahir  Thanks for this topic...very useful one #nephjc
Wed Mar 18 13:05:35 PDT 2015

nephjc  Ho Joel! nice lob last night #nephjc
Wed Mar 18 13:05:59 PDT 2015

nephjc  Warfarin is also pitched against statins in the first round of #nephmadness http://t.co/OlYTSfXwQO #nephjc http://t.co/WqZkWery1u
Wed Mar 18 13:06:19 PDT 2015

nephjc  Welcome! “@davidbaird86: @NephJC I'm David, I put the summary up of this weeks article up with Paul.” #nephJC
Wed Mar 18 13:06:42 PDT 2015

nephjc  @NephJC @davidbaird86 don't forget the hashtag David. Nice job! #nephjc
Wed Mar 18 13:06:58 PDT 2015

docthahir  @rabpeel nice pics..lucky you are living up there #nephjc
Wed Mar 18 13:07:03 PDT 2015

kidney_boy  Anyone aware of trazodone torsemide interaction? #EMRproblems #nephjc
Wed Mar 18 13:07:16 PDT 2015

nephjc  & though we are discussing one article on #nephJC, there are more studies cited on http://t.co/l8B8Gjo9U2, notably http://t.co/ELzjmjd3Is
Wed Mar 18 13:07:17 PDT 2015

nephjc  And http://t.co/YB3AfDsUr from @Fresenius in @JASN_News & http://t.co/DQXg8cpPBz (last one prospective, from Italy) #nephjc
Wed Mar 18 13:07:31 PDT 2015
docthahir

RT @NephJC: Welcome! “@davidbaird86: @NephJC I'm David, I put the summary up of this weeks article up with Paul.” #nephJC
Wed Mar 18 13:08:08 PDT 2015

dvdrry

@NephJC #nephjc Statins vs warfarin! Wow, really tough choice!
Wed Mar 18 13:08:53 PDT 2015

nephjc

T0 topic is: Do you anticoagulate your CKD patient with AFib? How about ESRD patient with Afib? If so, who manages the INR? #NephJC
Wed Mar 18 13:08:55 PDT 2015

hswapnil

At @OttawaHospital we have a gr8 thrombosis program monitoring pts on warfarin #nephJC https://t.co/85wLiE39kH (w/ @ESaidenberg @DrKhamisa)
Wed Mar 18 13:09:21 PDT 2015

hswapnil

QFT “@vdrry: @NephJC #nephjc Statins vs warfarin! Wow, really tough choice!” #nephmadness both equally ineffective?
Wed Mar 18 13:09:56 PDT 2015

docthahir

We still warfarinise HD patients with Afib, Renal unit monitors INR #nephjc
Wed Mar 18 13:10:30 PDT 2015

dvdrry

T0 Up to now, prescribing warfarin in CKD patients with CHADSVASC of 2 or over, tho doubtfully... INR managed by Hematology #nephjc

paulphel

@hswapnil think that may be key. Known INR variability in #ESRD which may be less so in Scandinavian cohorts where warfarin benefit #nephjc

nephjc

RT @paulphel: @hswapnil think that may be key. Known INR variability in #ESRD which may be less so in Scandinavian cohorts where warfarin b…
Wed Mar 18 13:11:08 PDT 2015

rabpeel

wary about warfarin unless valve or visualised thrombus less keen by the day #nephjc
Wed Mar 18 13:11:09 PDT 2015

hswapnil

I try to not prescribe warfarin in dialysis pts w/ AFib. But usually started on by GP or cardiologist/hospitalist #nephjc

paulphel

RT @hswapnil: QFT “@vdrry: @NephJC #nephjc Statins vs warfarin! Wow, really tough choice!” #nephmadness both equally ineffective?
nephjc

RT @rabpeel: wary about warfarin unless valve or visualised thrombus less keen by the day #nephjc

dvdrry

T0 Choice for dialysis patients is discussed in a 1by1 basis, although there is a trend to prescribe less warf #nephjc

dvdrry

@hswapnil @NephJC Completely disagree (on statins), but that shall be another #NephJC
Wed Mar 18 13:12:11 PDT 2015

nephjc

lot of skepticism here - reluctant use. Lets move on to the data... #nephjc
Wed Mar 18 13:12:20 PDT 2015

nephjc

T1: let's dig into the methods here. Obviously no RCT; but do you like using registry data for this Q? #nephJC

docthahir

Actually I am against anticoagulation in HD patients, whether its for non-valvular AF or access patency #nephjc
Wed Mar 18 13:12:59 PDT 2015

dvdrry

@hswapnil #nephjc So, withdrawing is even a tougher decision!!

docthahir

RT @dvdrry: T0 Choice for dialysis patients is discussed in a 1by1 basis, although there is a trend to prescribe less warf #nephjc

nephjc

RT @docthahir: Actually I am against anticoagulation in HD patients, whether its for non-valvular AF or access patency #nephjc

nephjc

True. #deprescribing is an active decision RT @dvdrry: @hswapnil #nephjc So, withdrawing is even a tougher decision!!

paulphel

@dvdrry agree withdrawal can be tricky especially if patient been on it for long time #nephjc
Wed Mar 18 13:14:56 PDT 2015

nephjc

T1: and CHADS2VASC score use is a big part of this study for risk stratification. How useful is it in CKD - and dialysis? #NephJC
**dvdrry**

T1 If it is the best that we have, lets take observational data... But without forgetting limitations, especially with large cohorts #nephjc


**hswapnil**

@paulphel @dvdrry we withdrew once after GI bleed. Patient died of a stroke a week later. Sobering. #nephJC tough choices #catch22

Wed Mar 18 13:16:07 PDT 2015

**rabpeel**

@NephJC chadvasc won't have been validated in 1000s of dialysis patients #nephjc


**nephjc**

RT @dvdrry: T1 If it is the best that we have, lets take observational data... But without forgetting limitations, especially with large co…


**paulphel**

@NephJC not validated in ESRD as far as aware. Also HASBLED score include renal disease, older age, INR variability so both scores high #nephjc


**docthahir**

most of HD pts are hypertensive and some LV dysfunction, so automatically score 2 #nephjc


**nephjc**

This was how the CHADSVASC score were associated with outcomes overall #nephJC (supp data figure) http://t.co/Dz87TQ1Yh4

Wed Mar 18 13:16:54 PDT 2015

**docthahir**

RT @NephJC: T1: and CHADS2VASC score use is a big part of this study for risk stratification. How useful is it in CKD - and dialysis? #Neph…

Wed Mar 18 13:17:09 PDT 2015

**dvdrry**

@hswapnil @paulphel #nephjc Imagine that, and in a clear indicatgion of withdrawing... how about a stroke in a pt without previous bleeding

Wed Mar 18 13:17:11 PDT 2015

**nephjc**

See next tweet RT @docthahir: most of HD pts are hypertensive and some LV dysfunction, so automatically score 2 #nephjc


**nephjc**

And CHADs2Vasc score distribution from supp data. Non-dialysis CKD higher risk than dialysis make sense? #nephJC http://t.co/dynM5fH6q4

Wed Mar 18 13:17:46 PDT 2015
nephjc
How about HASBLED validity in advanced CKD? & see what they did here: excluded CKD and Labile INR from score! #NephJC http://t.co/PGE1EOOmba

hswapnil
RT @dvdrry: @hswapnil @paulphel #nephjc Imagine that, and in a clear indication of withdrawing... how about a stroke in a pt without prev…
Wed Mar 18 13:18:54 PDT 2015

rabpeel
what about those with AF just on dialysis? #nephjc
Wed Mar 18 13:19:06 PDT 2015

nephjc
Distribution of HASBLED from supp data #nephJc Somewhat higher scores in non- dialysis CKD than in dialysis? http://t.co/S0r6GVV7n0

toaster_pastry
Last night had great discussion on Twitter about anticoagulation with kidney disease and a-fib. Got to apply that today. #nephJC

paulphel
@NephJC but dialysis patients have an unmeasured vascular risk that arbitrary scores can't capture #NephJC

nephjc
Great point! RT @paulphel: @nephjc but dialysis patients have an unmeasured vascular risk that arbitrary scores can't capture #NephJC

julepinter
#nephjc hi Jule. I think study underestimated comorbidity score because data were analysed from prescription files
Wed Mar 18 13:20:05 PDT 2015

docthahir
RT @NephJC: And CHADs2Vasc score distribution from supp data. Non-dialysis CKD higher risk than dialysis make sense? #nephJC http://t.co/dy…
Wed Mar 18 13:20:08 PDT 2015

nephjc
@JulePinter welcome Jule. Thats a good point - underestimation of Comorbidity. but should be randomly wrong (not biased) I hope #nephjc

dvdrry
T1 Probably a wrong risk classification is part of the problem. Don't we need a specific score? http://t.co/8dzEEo7wo6 #nephjc
Wed Mar 18 13:21:05 PDT 2015

nephjc
Nice: the R2CHADS MT @dvdrry: T1 Probably a wrong risk classification. Don't we need a specific score? http://t.co/QDiE8k4TdB #nephjc
nephjc

T1: last night @methodsmanmd & @EWeinhandl suggested marginal structural modelling for warfarin use vary across time. Any thoughts? #nephjc

docthahir

Its a no, no for >75, frail and bedbound #nephjc

hswapnil

T0: shameless self promotion #1: our SR on AFib prevalence/incidence http://t.co/gbNvkzddIL (free access) #nephjc http://t.co/C6pPfVSBgA

paulphel

@NephJC @methodsmanmd @EWeinhandl can we have an interpreter Swapnil? ;)
#NephJC

jessicafastball

RT @Toaster_Pastry: Last night had great discussion on Twitter about anticoagulation with kidney disease and a-fib. Got to apply that today…

nephjc

Agree, everyone? @docthahir: Its a no, no for >75, frail and bedbound #nephjc
Wed Mar 18 13:24:02 PDT 2015

docthahir

@NephJC @methodsmanmd @EWeinhandl marginal structural modelling..sounds latin to me #nephjc

dvdrry

@docthahir #nephjc I assume that your >75 are frankly worse than mine, who are mostly active well-doing pts! Age is just a number!

paulphel

@NephJC @docthahir Agree. I have to have a very strong reason to use it for A Fib. Valves and VTE is another story. No alternative. #NephJC

nephjc

@paulphel Yes we do! MSM = Cox proportional hazards + propensity score matching + time-varying covariate adjustment. Sort quasiRCT #nephjc

rabpeel

@NephJC @docthahir but we don't dialyse the bed bound here in NHS Highland #nephjc
Wed Mar 18 13:26:01 PDT 2015

T2: lets walk through the results. Warning: lots of data, tables hard to interpret. #NephJC
nephjc  Wed Mar 18 13:26:05 PDT 2015

RT @hswapnil: T0: shameless self promotion #1: our SR on AFib prevalence/incidence http://t.co/gbNvkzdL (free access) #nephjc http://t.co…
Wed Mar 18 13:26:21 PDT 2015

nephjc  Wed Mar 18 13:26:35 PDT 2015

Interesting - anyone know Danish practice? RT @rabpeel: @docthahir but we don't dialyse the bed bound here in NHS Highland #nephjc #nephjc
Wed Mar 18 13:26:35 PDT 2015

nephjc  Wed Mar 18 13:26:48 PDT 2015

T2: results. Figure 1 patient flow. CKD at baseline/followup grouped together 4 outcome (but not table 1!) #NephJC http://t.co/sKuQD6sheh

paulphel  Wed Mar 18 13:26:59 PDT 2015

Nice "@NephJC:Yes we do! MSM=Cox proportional hazards + propensity score matching + time-varying covariate adjustment.Sort quasiRCT #nephjc"


@rabpeel @NephJC @docthahir #nephjc Touché... If the pt "deserves" dialysis, should we deny other treatments?


t2: Also CKD status validated only in a very large sample size of ......110! #nephjc


RT @dvdrry: @rabpeel @NephJC @docthahir #nephjc Touché... If the pt "deserves" dialysis, should we deny other treatments?


Table 1: again this is data based on baseline data - not how the data analyzed. Anything stick out for you? #NephJC http://t.co/MI62ngbBP7


@rabpeel @NephJC @docthahir , sometimes its quite difficult if the patient asks for it #nephjc


From table 1: RRT patients are younger than CKD - unusual. Is there anything different about the state of Denmark? #NephJC


@hswapnil Are you suggesting something is rotten in the state of Denmark? #NephJC
Also, from table 1; minority of patients received warfarin. Raises questions selection bias issue perhaps? 


@dochthahir @NephJC @dochthahir explain risk benefit I guess 


RT @dvdrry: @rabpeel @NephJC @dochthahir #nephjc Touché... If the pt "deserves" dialysis, should we deny other treatments? 

Wed Mar 18 13:30:21 PDT 2015

RT @hswapnil: Swapnil Hiremath, #nephJC cofounder and nephrologist @OttawaHospital & @uOttawaMed - warfarin deprescriber. No other CoI 

Wed Mar 18 13:30:27 PDT 2015

@dvdrry @rabpeel @NephJC @dochthahir if there is more harm then we shouldn't 

Wed Mar 18 13:30:44 PDT 2015

Besides, a 15 year inclusion period, there must be some differences in prescription trends... 

Wed Mar 18 13:30:51 PDT 2015

Hey Graham, welcome back. On lunch break again? 

Wed Mar 18 13:30:57 PDT 2015

@GrahamAbra 


Just getting my daily Vitamin K :) 


Absolutely "@NephJC: minority of patients received warfarin. Raises questions selection bias issue perhaps? 


T2 What about that Warfarin+Aspirin 10%? 

Wed Mar 18 13:32:08 PDT 2015

Table 2: crude rates of stroke and TE by CKD status, warfarin use and CHADSVASC score. 


cazadoreterno

RT @NephJC: Table 2: crude rates of stroke and TE by CKD status, warfarin use and CHADSVASC score. #nephJC http://t.co/K4ZHW20JdS
Wed Mar 18 13:32:46 PDT 2015

hswapnil

T0: shameless self promotion #2: mortality and stroke in dialysis PTs w & w/out AFib #nephJC http://t.co/Pry6B13Lui
Wed Mar 18 13:33:10 PDT 2015

grahamabra

16% DMII and 53% HTN in ESRD seems very low... Undercapture? #NephJC

rabpeel

@dvdrry go the full hog band add clopidogrel #nephjc

nephjc

Figure 2b shows similar result: having CKD and being on RRT is not good wrt stroke/TE #NephJC http://t.co/JRWoxmu0m

paulphel

@NephJC US data would disagree with this. More stroke (total) with warfarin in some cohorts. Depends which study you read #NephJC
Wed Mar 18 13:34:08 PDT 2015

dvdrry

@rabpeel #nephjc and ticagrelor!! LOL
Wed Mar 18 13:34:08 PDT 2015

nephjc

Missing /sarcasm/ tag? RT @rabpeel: @vdrry go the full hog band add clopidogrel #nephjc
Wed Mar 18 13:34:13 PDT 2015

nephjc

RT @paulphel: @NephJC US data would disagree with this. More stroke (total) with warfarin in some cohorts. Depends which study you read #Ne...
Wed Mar 18 13:34:44 PDT 2015

nephjc

Table 3 is Adjusted analysis of stroke/TE in CKD and RRT pts comp 2 nonCKD. All w A fib, all w/out warfarin #NephJC http://t.co/9R9ruc6U3o
Wed Mar 18 13:35:00 PDT 2015

dvdrry

T1 Anyway, how can we consider an early CKD category G3a similar to a CKD G5 not on dialysis? #nephjc
Wed Mar 18 13:35:04 PDT 2015

paulphel

@GrahamAbra this may be just Scandinavian dialysis patients Graham.US dialysis patients are sicker than Europeans with more diabetes #NephJC
Wed Mar 18 13:35:20 PDT 2015
nephjc

RT @paulphel: @GrahamAbra this may be just Scandinavian dialysis patients Graham.US dialysis patients are sicker than Europeans with more d…
Wed Mar 18 13:35:49 PDT 2015

nephjc

QFT @dvdrry: T1 Anyway, how can we consider an early CKD category G3a similar to a CKD G5 not on dialysis? #nephjc
Wed Mar 18 13:36:16 PDT 2015

grahamabra

@paulphel Good point. That or Seattle Life or Death Panels are still in the picture #NephJC
Wed Mar 18 13:36:40 PDT 2015

nephjc

Figure 2: the meat of the results. Only CKD/RRT patients w AFib. Referent grp no ASA/warfarin #nephJC http://t.co/RVmSn31GLn
Wed Mar 18 13:37:06 PDT 2015

nephjc

From fig 2 - Clearly ASA + warfarin worse in low risk patients compared to no Rx (makes sense) #nephJC
Wed Mar 18 13:37:31 PDT 2015

nephjc

Fig 2: among high risk, warfarin superior in all cause mortality in CKD and RRT patients both. #nephJc Everyone buy that result?
Wed Mar 18 13:37:45 PDT 2015

dvdrry

T3 Note that: ref population is nonCKD pop, not those without aspirin. And: pts could change treatment and CKD status through time #nephjc
Wed Mar 18 13:37:56 PDT 2015

sabaghabed

RT @NephJC: Table 3 is Adjusted analysis of stroke/TE in CKD and RRT pts comp 2 nonCKD. All w A fib, all w/out warfarin #NephJC http://t.co…

julepinter

#nephjc. Illustration indicates that only ckd Patients benefit of warfarin in reduction of fatal stroke/ bleeds.

sabaghabed

RT @NephJC: Table 2: crude rates of stroke and TE by CKD status, warfarin use and CHADSVASC score. #nephJC http://t.co/K4ZH20JdS

nephjc

@dvdrry exactly why time-varying covariate analysis would make more sense? #nephjc
sabaghabed

RT @paulphel: @NephJC US data would disagree with this. More stroke (total) with warfarin in some cohorts. Depends which study you read #Ne...

cazadorretorno

RT @NephJC: Fig 2: among high risk, warfarin superior in all cause mortality in CKD and RRT patients both. #nephJc Everyone buy that result...

sabaghabed

RT @NephJC: Missing /sarcasm/ tag? RT @rabpeel: @dvdrry go the full hog band add clopidogrel #nephjc

paulphel

Nope "@NephJC: among high risk, warfarin superior in all cause mortality in CKD & RRT patients both #nephJc Everyone buy that result?"

sabaghabed

RT @paulphel: @GrahamAbra this may be just Scandinavian dialysis patients Graham.US dialysis patients are sicker than Europeans with more d...
Wed Mar 18 13:39:45 PDT 2015

nephjc

@JulePinter Benefit mainly in high risk (by CHADS2VASC score) #nephjc

sabaghabed

RT @NephJC: QFT @vdrry: T1 Anyway, how can we consider an early CKD category G3a similar to a CKD G5 not on dialysis? #nephjc

sabaghabed

RT @NephJC: Figure 2: the meat of the results. Only CKD/RRT patients w AFib. Referent grp no ASA/warfarin #nephJC http://t.co/RVmSn31GLn
Wed Mar 18 13:40:10 PDT 2015

nephjc

T2: results - confounding by indication? Patients not Rx warfarin quite diff than those given? Why not propensity score matching? #nephJc

sabaghabed

RT @NephJC: From fig 2 - Clearly ASA + warfarin worse in low risk patients compared to no Rx (makes sense) #nephJc
Wed Mar 18 13:40:30 PDT 2015

sabaghabed

RT @NephJC: Fig 2: among high risk, warfarin superior in all cause mortality in CKD and RRT patients both. #nephJc Everyone buy that result...
Wed Mar 18 13:40:36 PDT 2015
paulphel

@NephJC at a stretch maybe in a specific well managed Scandinavian population #NephJC
Wed Mar 18 13:40:36 PDT 2015

nephjc

Overall result (not risk stratified) showing benefit of warfarin in CKD and RRT Figure 2c
#nephJc http://t.co/e91lYE3yFT
Wed Mar 18 13:41:01 PDT 2015

docthahir

@NephJC high risk by CHADS2VASC #nephjc
Wed Mar 18 13:41:05 PDT 2015

sabaghabed

RT @NephJC: T2: results - confounding by indication? Patients not Rx warfarin quite diff than those given? Why not propensity score matchin…

docthahir

RT @NephJC: Fig 2: among high risk, warfarin superior in all cause mortality in CKD and RRT patients both. #nephJc Everyone buy that resul…
Wed Mar 18 13:41:40 PDT 2015

nephjc

Another bias - some dialysis pts may have rec'd warfarin in unit without prescription - so misclassified #nephJc http://t.co/Hamx1jm5MY
Wed Mar 18 13:41:42 PDT 2015

sabaghabed

RT @paulphel: Nope "@NephJC: among high risk, warfarin superior in all cause mortality in CKD & RRT patients both #nephJc Everyone buy that…

sabaghabed

RT @paulphel: @NephJC at a stretch maybe in a specific well managed Scandinavian population #NephJC

grahamabra

@paulphel @NephJC Agree. Don't buy it. Particularly in ESRD where CV death was not decreased so why would all-cause death go down? #NephJC

sabaghabed

RT @NephJC: Overall result (not risk stratified) showing benefit of warfarin in CKD and RRT Figure 2c #nephJc http://t.co/e91lYE3yFT

docthahir

RT @NephJC: From fig 2 - Clearly ASA + warfarin worse in low risk patients compared to no Rx (makes sense) #nephJC

paulphel

RT @GrahamAbra: @paulphel @NephJC Agree. Don't buy it. Particularly in ESRD where CV death was not decreased so why would all-cause death g…
nephjc
So - does everyone agree with benefit of Warfarin in CKD/RRT patients, esp wrt hi-risk? (Paul does not, others?) #nephjc

nephjc
RT @GrahamAbra: @paulphel @NephJC Agree. Don't buy it. Particularly in ESRD where CV death was not decreased so why would all-cause death g…

sabaghbed
RT @NephJC: Another bias - some dialysis pts may have rec’d warfarin in unit without prescription - so misclassified #nephJc http://t.co/Ha…
Wed Mar 18 13:43:02 PDT 2015

dvdrry
@GrahamAbra @paulphel @NephJC Many confounders, but it does not need that its not true! Maybe CV would too if properly analyzed? #nephjc

hswapnil
Some recent Canadian data: warfarin associated with higher bleeding in 1st 30 days in CKD http://t.co/By6O9T EWTe in @bmj_latest #NephJC

sabaghbed
RT @NephJC: So - does everyone agree with benefit of Warfarin in CKD/RRT patients, esp wrt hi-risk? (Paul does not, others?) #nephjc
Wed Mar 18 13:43:34 PDT 2015

grahamabra
@NephJC Whoah. Nonprescription warfarin? How about that for a yardsale waiting to happen #NephJC

dvdrry
1. Is high-risk real high-risk? 2. For the time being, yes, more data needed. 3. Very doubtful about lower risk pts @NephJC #nephjc
Wed Mar 18 13:44:08 PDT 2015

rabpeel
@NephJC still has to be balanced against did benefits frailty falls risk etc… #nephjc

nephjc
@GrahamAbra @NephJC I guess Warfarin supplied by hospital/unit and not captured by outpatient script? #nephjc
Wed Mar 18 13:44:37 PDT 2015

paulphel
@NephJC I'm just not convinced by the data (or lack of it), this included. Add in concerns re calcification & I'm v wary of warfarin #NephJC
docthahir  

@NephJC My question is how do you stratify as high risk? #nephjc  
Wed Mar 18 13:44:56 PDT 2015

dvdrry  

Treatment individualization is a must! @rabpeel @NephJC #nephjc  
Wed Mar 18 13:45:12 PDT 2015

nephjc  

can't disagree: @dvdrry: 1. Is high-risk real? 2. For the time being, yes, more data needed. 3. Very doubtful about lower risk pts #nephjc  
Wed Mar 18 13:45:36 PDT 2015

grahamabra  

@NephJC Man, I hope so. Hopefully not OTC rat poison. #NephJC  
Wed Mar 18 13:45:43 PDT 2015

nephjc  

RT @rabpeel: @NephJC still has to be balanced against did benefits frailty falls risk etc... #nephjc  
Wed Mar 18 13:46:00 PDT 2015

grahamabra  

Calciphylaxis? MT @paulphel: Add in concerns re calcification & I'm v wary of warfarin #NephJC  

nephjc  

RT @paulphel: @NephJC I'm just not convinced by the data (or lack of it), this included. Add in concerns re calcification & I'm v wary of w...  

dvdrry  

And... not to forget the importante of INR stability, I believe it is a key question to balance risks and benefits! #nephjc  

julepinter  

RT @docthahir: @NephJC My question is how do you stratify as high risk? #nephjc  

nephjc  

shared decision making was big last night: http://t.co/araNupzMBe #nephjc (h/t @Toaster_Pastry and @wittykidney) http://t.co/2EEWtC3QRX  

paulphel  

@docthahir @NephJC exactly.CHADS says high risk of stroke & same HD pt likely to have high HASBLED score. Need validation in HD #NephJC  
grahamabra

RT @NephJC: shared decision making was big last night: http://t.co/araNupzMBe #nephJC (h/t @Toaster_Pastry and @wittykidney) http://t.co/2E…

nephjc

RT @dvrry: And... not to forget the importante of INR stability, I believe it is a key question to balance risks and benefits! #nephjc
Wed Mar 18 13:47:10 PDT 2015

dvrry

Not only calciphylaxis! Also vascular calcification.... @NephJC @paulphel #nephjc

dothahir

first of all Im not sure of the validity of CHADS2VASC IN HD patients #nephjc

nephjc

INR stability - that was a factor in the Italian NDT study. And Paul, any comments? Didn't you study this? #nephjc

nephjc

RT @paulphel: @dothahir @NephJC exactly.CHADS says high risk of stroke & same HD pt likely to have high HASBLED score. Need validation in …

dothahir

lots of data ( not RCT though) indicating there is more..... bleeding risk #nephjc

nephjc

So now let's move on to T3: what should we do now? What population would be in your #dreamrct? Warfarin or a NOAC such as edoxaban? #NephJC

paulphel

@NephJC yes. Calcification in general & obviously the dreaded calciphylaxis. There's a Vit K dialysis RCT ongoing right? #nephjc

nephjc

And public service announcement: NOACs (dabigatran Rivaroxaban Apixaban) should not be used in dialysis http://t.co/ZE6iBzm9IO #nephJc

rabpeel

@dvrry certainly time in therapeutic range crucial to cost effective ratios vs NOAC because of risk most strokes inr <2 #nephjc
Wed Mar 18 13:49:03 PDT 2015

dvrry

Totally unsure about shared decisions on such subjects: pts will do what they think we advise @NephJC @Toaster_Pastry @wittykidney #nephjc
nephjc  #DreamRCT population: obviously only in high risk - ?using RCHADS score perhaps? Equipoise to do an RCT in this pop? #nephjc

nephjc  RT @dvdrry: Totally unsure about shared decisions on such subjects: pts will do what they think we advise @NephJC @Toaster_Pastry @wittykid…
Wed Mar 18 13:49:45 PDT 2015

docthahir  Dabigatran-80% renal clearance, Rivoroxaban- 33% and apixaban 27% #nephjc
Wed Mar 18 13:49:54 PDT 2015

docthahir  Im really hesitant to use NOAC in Hd patients #nephjc

dvdrry  T3 Should we first properly assess real risks? (Of stroke, of bleeding…) #nephjc

nephro_sparks  RT @NephJC: Warfarin is also pitched against statins in the first round of #nephmadness http://t.co/OlYTSfXwQO #nephjc http://t.co/WqZkWer…
Wed Mar 18 13:51:06 PDT 2015

hswapnil  @paulphel @NephJC Right, this is one: https://t.co/JrNtNjvurJ #nephJC from @signindoc team
Wed Mar 18 13:51:10 PDT 2015

grahamabra  @NephJC RCT of low dose NOAC vs placebo in high risk ESRD #NephJC #dreamrct

paulphel  @NephJC thanks for the mention! we showed in an Irish dialysis cohort swinging variability around median INR #NephJC http://t.co/n5f1qFKJb7

nephjc  Agree - @docthahir: Im really hesitant to use NOAC in Hd patients #nephjc

dvdrry  Certainly not the first drugs whose way on dialysis pts started off-label. Otherwise few drugs would get to them! @NephJC #nephjc

paulphel  RT @hswapnil: @paulphel @NephJC Right, this is one: https://t.co/JrNtNjvurJ #nephJC from @signindoc team
Wed Mar 18 13:52:01 PDT 2015
RT @NephJC: And public service announcement: NOACs (dabigatran Rivaroxaban Apixaban) should not be used in dialysis http://t.co/ZE6iBzm9I0 ...

RT @paulphel: @NephJC thanks for the mention! we showed in an Irish dialysis cohort swinging variability around median INR #NephJC http://t...

RT @NephJC: INR stability - that was a factor in the Italian NDT study. And Paul, any comments? Didn't you study this? #nephjc

Yes! @dvdrry: T3 Should we first properly assess real risks? (Of stroke, of bleeding...) #nephjc
Wed Mar 18 13:53:00 PDT 2015

Dabigatran- I wont go near--80% renal clearance #nephjc
Wed Mar 18 13:53:06 PDT 2015

May be Apixaban but still hesitant #nephjc

RT @hswapnil: @paulphel @NephJC Right, this is one: https://t.co/JrNtNjvurJ #nephJC from @signindoc team

So would anyone randomize their patient in a #dreamRCT of warfarin in dialysis at all? #nephjc
Wed Mar 18 13:54:01 PDT 2015

how about RCHADS score combined with HASBLED score with apixaban or edoxaban..dream RCT #nephjc

RT @GrahamAbra: @NephJC RCT of low dose NOAC vs placebo in high risk ESRD #NephJC #dreamrct

@NephJC yep #nephjc
Wed Mar 18 13:54:44 PDT 2015

@dvdrry @NephJC @Toaster_Pastry @wittykidney how can we expect patients to make decisions re this with the data we have #nephjc
@paulphel @NephJC Yes Rachel Holden is PI (thanks @hswapnil) #nephjc

@GrahamAbra @NephJC which is your NOAC of choice/ Apixaban? or maybe Edoxaban? #nephjc

Last few minutes. Any final thoughts? #nephJC

Yes I would despite my bias needs to b done MT "@NephJC: would anyone randomize their patient in #dreamRCT of warfarin in dialysis? #nephjc"

T3 Warfarin vs placebo in non-dialysis CKD pts at intermediate risk... would it be unethical? #nephjc #dreamedRCT

RT @jmwoods87: @dvdrty @NephJC @Toaster_Pastry @wittykidney how can we expect patients to make decisions re this with the data we have #nep...

Warfarin in CKD guru! @signindoc: @paulphel @NephJC Yes Rachel Holden is PI (thanks @hswapnil) #nephjc"

RT @paulphel: Yes I would despite my bias needs to b done MT "@NephJC: would anyone randomize their patient in #dreamRCT of warfarin in dia...

Good Q: RT @dvdrty: T3 Warfarin vs placebo in non-dialysis CKD pts at intermediate risk... would it be unethical? #nephjc #dreamedRCT
Wed Mar 18 13:56:50 PDT 2015

what about valvular AF , big atria on echo, thrombus on echo? are we still as negative? #nephjc
Wed Mar 18 13:57:08 PDT 2015

@docthahir none of the NOAC are indicated for GFR <15, so can't use in dialysis patients #nephjc
Wed Mar 18 13:57:08 PDT 2015

Totally agree! Throwing balls out and a little bit of unresponsibility (POV) @jmwoods87 @NephJC @Toaster_Pastry @wittykidney #nephjc
docthahir

@NephJC @GrahamAbra Apixaban!! #nephjc
Wed Mar 18 13:57:30 PDT 2015

grahamabra

@docthahir @NephJC Apixaban is the only one I've used #NephJC
Wed Mar 18 13:57:56 PDT 2015

docthahir

@wittykidney @docthahir I agree, that's why I said I am not happy to use #nephjc

nephjc

I would use in this pt -> @rabpeel: what about valvular AF , big atria on echo, thrombus on echo? are we still as negative? #nephjc
Wed Mar 18 13:58:12 PDT 2015

jmwoods87

@NephJC yes, yet to be convinced by NOACs #nephjc

sabaghabed

RT @NephJC: :can't disagree: @dvdrry: 1. Is high-risk real? 2. For the time being, yes, more data needed. 3. Very doubtful about lower ris…

sabaghabed

RT @NephJC: shared decision making was big last night: http://t.co/araNupzMBe #nephJC (h/t @Toaster_Pastry and @wittykidney) http://t.co/2E…

dvdrry

Shouldn't, not can't... Really NO pt benefits? @wittykidney @docthahir #nephjc
Wed Mar 18 13:58:30 PDT 2015

nephjc

RT @paulphel: Warfarin in CKD guru! @signindoc: @paulphel @NephJC Yes Rachel Holden is PI (thanks @hswapnil) #nephjc*

julepinter

#nephjc shared decision based on applicable risk score specific for this cohort, incl aparent thrombotic & bleeding risk factors
Wed Mar 18 13:58:36 PDT 2015

docthahir

@NephJC @rabpeel I agree for valvular AF with left atrium >4cmss #nephjc

nephjc

RT @JulePinter: #nephjc shared decision based on applicable risk score specific for this cohort, incl aparent thrombotic & bleeding risk fa…
sabaghabed RT @dvdrry: And... not to forget the importante of INR stability, I believe it is a key question to balance risks and benefits! #nephjc

nephjc Thanks everyone for a fantastic chat! Now go fill out your #nephmadness brackets at http://t.co/OiYSTfXwQO #NephJC
Wed Mar 18 13:59:30 PDT 2015

sabaghabed RT @paulphel: @docthahir @NephJC exactly.CHADS says high risk of stroke & same HD pt likely to have high HASBLED score. Need validation in ...
Wed Mar 18 13:59:45 PDT 2015

nephjc Don’t forget to sign up for our #nephJC low volume, fun and entertaining mailing list at http://t.co/5aumn8ImwF

sabaghabed RT @NephJC: So now let’s move on to T3: what should we do now? What population would be in your #dreamrct? Warfarin or a NOAC such as edox…

paulphel @NephJC gotta run. This adds little but may b best we get. Conflicting observational data forcing us 2 make a call. gr8 job @hswapnil #NephJC

sabaghabed RT @NephJC: And public service announcement: NOACs (dabigatran Rivaroxaban Apixaban) should not be used in dialysis http://t.co/ZE6iBzm9iO …
Wed Mar 18 14:00:05 PDT 2015

grahamabra @NephJC @rabpeel Good clinical example of MD judgement. That along w/ a risk/benefit discussion w/ the pt w/ ESRD is what’s needed #NephJC
Wed Mar 18 14:00:10 PDT 2015

nephjc RT @paulphel: @NephJC gotta run. This adds little but may b best we get. Conflicting observational data forcing us 2 make a call. gr8 job @hs…
Wed Mar 18 14:00:11 PDT 2015

nephjc RT @GrahamAbra: @NephJC @rabpeel Good clinical example of MD judgement. That along w/ a risk/benefit discussion w/ the pt w/ ESRD is what’…
Wed Mar 18 14:00:28 PDT 2015

sabaghabed RT @NephJC: #DreamRCT population: obviously only in high risk - ?using RCHADS score perhaps? Equipoise to do an RCT in this pop? #nephjc
Wed Mar 18 14:00:28 PDT 2015
wittykidney

@jmwoods87 @dvdrry @NephJC @Toaster_Pastry agree can't use SDM in all, but in patients who wish to know risks over benefits #nephjc
Wed Mar 18 14:00:32 PDT 2015

dothahir

RT @NephJC: And public service announcement: NOACs (dabigatran Rivaroxaban Apixaban) should not be used in dialysis http://t.co/ZE6iBzm9iO ...
Wed Mar 18 14:00:45 PDT 2015

renalpages

RT @NephJC: And public service announcement: NOACs (dabigatran Rivaroxaban Apixaban) should not be used in dialysis http://t.co/ZE6iBzm9iO ...
Wed Mar 18 14:00:46 PDT 2015

signindoc

@JulePinter strongly agree. Although mostly for stopping warfarin in dialysis patients. They are often reluctant to stop. #nephjc
Wed Mar 18 14:00:53 PDT 2015

sabaghhabed

RT @dvdrry: Totally unsure about shared decisions on such subjects: pts will do what they think we advise @NephJC @Toaster_Pastry @wittykid...
Wed Mar 18 14:00:56 PDT 2015

iakdag16

RT @NephJC: Figure 2: the meat of the results. Only CKD/RRT patients w AFib. Referent grp no ASA/warfarin #nephJC http://t.co/RVmSn31GLn
Wed Mar 18 14:01:00 PDT 2015

nephjc

Again: Don't forget to sign up for our #nephJC low volume, fun and entertaining mailing list at http://t.co/HHrJs3YpKL
Wed Mar 18 14:01:16 PDT 2015

dothahir

Thanks Swapnil for your time. Well done! #nephjc
Wed Mar 18 14:01:24 PDT 2015

sabaghhabed

RT @hswapnil: @paulphel @NephJC Right, this is one: https://t.co/JrNtNjvurJ #nephJC from @signindoc team
Wed Mar 18 14:01:30 PDT 2015

sabaghhabed

RT @paulphel: @NephJC yes. Calcification in general & obviously the dreaded calciphylaxis. There's a Vit K dialysis RCT ongoing right? #nep...
Wed Mar 18 14:01:34 PDT 2015

jmwoods87

@NephJC important area and we really don't yet know the answer #nephjc
Wed Mar 18 14:01:41 PDT 2015

nephjc

RT @signindoc: @JulePinter strongly agree. Although mostly for stopping warfarin in dialysis patients. They are often reluctant to stop. #n...
rabpeel

RT @paulphel: @NephJC yes. Calcification in general & obviously the dreaded calciphylaxis. There’s a Vit K dialysis RCT ongoing right? #nep...
Wed Mar 18 14:01:55 PDT 2015

grahamabra

@doctahir +1 #NephJC
Wed Mar 18 14:01:59 PDT 2015

sabaghabed

RT @paulphel: @NephJC thanks for the mention! we showed in an Irish dialysis cohort swinging variability around median INR #NephJC http://t...
Wed Mar 18 14:02:01 PDT 2015

signindoc

RT @GrahamAbra: @NephJC @rabpeel Good clinical example of MD judgement. That along w/ a risk/benefit discussion w/ the pt w/ ESRD is what’...
Wed Mar 18 14:02:02 PDT 2015

sabaghabed

RT @NephJC: INR stability - that was a factor in the Italian NDT study. And Paul, any comments? Didn't you study this? #nephjc
Wed Mar 18 14:02:04 PDT 2015

dvdrry

This one was a great discussion! Hoping for the next one! #nephjc
Wed Mar 18 14:02:05 PDT 2015

sabaghabed

RT @NephJC: Agree - @doctahir: Im really hesitant to use NOAC in Hd patients #nephjc
Wed Mar 18 14:02:09 PDT 2015

sabaghabed

RT @NephJC: Yes! @vdrry: T3 Should we first properly assess real risks? (Of stroke, of bleeding...) #nephjc
Wed Mar 18 14:02:21 PDT 2015

nephjc

Oft like for most things in Nephrology! @jmwoods87: @NephJC important area and we really don't yet know the answer #nephjc
Wed Mar 18 14:02:23 PDT 2015

sabaghabed

RT @NephJC: So would anyone randomize their patient in a #dreamRCT of warfarin in dialysis at all? #nephjc
Wed Mar 18 14:02:44 PDT 2015

nephjc

thanks everyone for joining in! Stay tuned for next #NephJC. Will be in April (skipping March 31st/Apr 1). @hswapnil signing off #nephjc
Wed Mar 18 14:03:10 PDT 2015

julepinter

#nephjc great Job and great discussion. Thank you @ nephJC @hswapnil
Wed Mar 18 14:03:13 PDT 2015
sabaghabed  RT @paulphel: Yes I would despite my bias needs to b done MT "@NephJC: would anyone randomize their patient in #dreamRCT of warfarin in dia… Wed Mar 18 14:04:04 PDT 2015

sabaghabed  RT @paulphel: Warfarin in CKD guru! @signindoc: @paulphel @NephJC Yes Rachel Holden is PI (thanks @hswapnil) #nephjc* Wed Mar 18 14:04:42 PDT 2015

sabaghabed  RT @NephJC: Good Q: RT @dvdrry: T3 Warfarin vs placebo in non-dialysis CKD pts at intermediate risk… would it be unethical? #nephjc #drea… Wed Mar 18 14:05:09 PDT 2015

rabpeel  @NephJC @hswapnil great job #nephjc back to #nephmadness oh and #24HrsAE Wed Mar 18 14:05:23 PDT 2015

sabaghabed  RT @NephJC: I would use in this pt -> @rabpeel: what about valvular AF , big atria on echo, thrombus on echo? are we still as negative? #ne… Wed Mar 18 14:05:43 PDT 2015

nephro_sparks  RT @rabpeel: @NephJC @hswapnil great job #nephjc back to #nephmadness oh and #24HrsAE Wed Mar 18 14:06:06 PDT 2015

nephro_sparks  RT @hswapnil: QFT "@dvdrry: @NephJC #nephjc Statins vs warfarin! Wow, really tough choice!" #nephmadness both equally ineffective? Wed Mar 18 14:06:23 PDT 2015

sabaghabed  RT @JulePinter: #nephjc shared decision based on applicable risk score specific for this cohort, incl apparent thrombotic & bleeding risk fa… Wed Mar 18 14:06:40 PDT 2015

sabaghabed  RT @paulphel: @NephJC gotta run. This adds little but may b best we get.Conflicting observational data forcing us 2 make a call. gr8 job @hs… Wed Mar 18 14:07:57 PDT 2015

sabaghabed  RT @NephJC: Last few minutes. Any final thoughts? #nephJC Wed Mar 18 14:07:59 PDT 2015

sabaghabed  RT @GrahamAbra: @NephJC @rabpeel Good clinical example of MD judgement. That along w/ a risk/benefit discussion w/ the pt w/ ESRD is what’… Wed Mar 18 14:09:06 PDT 2015

sabaghabed  RT @NephJC: Again: Don't forget to sign up for our #nephJC low volume, fun and
entertaining mailing list at http://t.co/HHrJs3YpKL
Wed Mar 18 14:09:52 PDT 2015

sabaghabed
RT @signindoc: @JulePinter strongly agree. Although mostly for stopping warfarin in dialysis patients. They are often reluctant to stop. #n... 
Wed Mar 18 14:10:37 PDT 2015

sabaghabed
RT @Neph.JC: Oft like for most things in Nephrology! @jmwoods87: @NephJC important area and we really don't yet know the answer #nephjc 
Wed Mar 18 14:11:28 PDT 2015

sabaghabed
RT @NephJC: thanks everyone for joining in! Stay tuned for next #NephJC. Will be in April (skipping March 31st/Apr 1). @hswapnil signing of... 
Wed Mar 18 14:12:23 PDT 2015

wittykidney
@jmwoods87 @dvdrry @NephJC @Toaster_Pastry maybe, but if one look at calculations for statins or VKAs, in fact we r overusing these #nephjc 
Wed Mar 18 14:18:25 PDT 2015

nephjc
#NephJC GMT chat gathering steam. Analytics from @healthhashtags http://t.co/iuFfm1TSwH 
Wed Mar 18 14:22:56 PDT 2015

nephjc
The #NephJC #GMT chat influencers from @healthhashtags http://t.co/dwnhwf8y6y 
Wed Mar 18 14:36:31 PDT 2015

hswapnil
RT @dvdrry: Certainly not the first drugs whose way on dialysis pts started off-label. Otherwise few drugs would get to them! @NephJC #nep... 
Wed Mar 18 14:45:06 PDT 2015

hswapnil
@dvdrry therapeutic nihilism (Renalism) and the fact that RCTs exclude dialysis patients makes this painfully true #NephJC 
Wed Mar 18 14:46:05 PDT 2015

toaster_pastry
@wittykidney @jmwoods87 @dvdrry @nephjc I also mention 75% of strokes related to atrial fibrillation are usually massive (death). #nephjc 
Wed Mar 18 14:50:08 PDT 2015

signindoc
@dvdrry @hswapnil @NephJC Don't even need to get to dialysis to be excluded. Personal experience from bisphosphonate trials. #NephJC 
Wed Mar 18 14:52:04 PDT 2015

dvdrry
RT @signindoc: @dvdrry @hswapnil @NephJC Don't even need to get to dialysis to be excluded. Personal experience from bisphosphonate trials.... 
Wed Mar 18 14:53:11 PDT 2015
hswapnil
RT @signindoc: @dvrry @hswapnil @NephJC Don't even need to get to dialysis to be excluded. Personal experience from bisphosphonate trials."
Wed Mar 18 14:59:32 PDT 2015

docthahir
@cairoqualunque Didn't see you in #NephJC today?!
Wed Mar 18 15:01:33 PDT 2015

hswapnil
NSAIDs and CKD/AKI article http://t.co/ZtWV2YONub via @RonanTKavanagh & @medpagetoday Potential #rheumjc and #NephJC candidate? @psufka
Wed Mar 18 15:16:48 PDT 2015

beaverspharmd
RT @NephJC: Distribution of HASBLED from supp data #nephJc Somewhat higher scores in non- dialysis CKD than in dialysis? http://t.co/S0r6GV…
Wed Mar 18 15:29:34 PDT 2015

docthahir
RT @hswapnil: NSAIDs and CKD/AKI article http://t.co/ZtWV2YONub via @RonanTKavanagh & @medpagetoday Potential #rheumjc and #NephJC candida…
Wed Mar 18 15:32:08 PDT 2015

psufka
RT @hswapnil: NSAIDs and CKD/AKI article http://t.co/ZtWV2YONub via @RonanTKavanagh & @medpagetoday Potential #rheumjc and #NephJC candida…
Wed Mar 18 15:37:56 PDT 2015

imperivita
RT @hswapnil: NSAIDs and CKD/AKI article http://t.co/ZtWV2YONub via @RonanTKavanagh & @medpagetoday Potential #rheumjc and #NephJC candida…
Wed Mar 18 15:40:35 PDT 2015