

# Continuous EPO receptor activator therapy of anemia in children under peritoneal dialysis

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### Resumen

The short half-life of erythropoietin (rHuEPO) leads to repeated fluctuations in hemoglobin levels and the need for frequent administration. Continuous erythropoietin receptor activator (CERA) therapy has been approved for once or twice a month in adult dialysis patients. To evaluate the efficacy and safety of CERA therapy in the management of anemia in pediatric peritoneal dialysis (PD) stable PD children under twice-a-week EPO were converted to a subcutaneous CERA, scheduled every 2 weeks. The follow-up was 6 months. The primary efficacy parameter was hemoglobin > 11 g/dL. The exclusion criteria were ferritin < 100 ng/ml and Hb saturation < 20%. Sixteen children, aged 9.75 +/- 3.6 years, including 11 boys, participated in the study. Mean Hb level at month 0 was 10.8 +/- 1.9 g/dL. A decrease in hemoglobin to 10.38 +/- 1 g/dL at month 2 was observed. The CERA dose was increased from 0.86 +/- 0.33 to 1.67 +/- 0.4 mu g/kg at month 3. The target Hb level was reached by the 3rd month. The Hb level and CERA dose were 12.2 +/- 1.2 and 1.6 +/- 0.67 mu g/kg respectively at the end of the study. No adverse events were observed during the protocol. CERA is an effective and safe therapy for maintaining hemoglobin levels when administered twice, up to once a month, in PD children. Doses required to reach target Hb were higher than published experiences in adult populations.

### Palabras clave

**Palabras clave de autor:** Erythropoietin; EPO; CERA; Anemia; Children; Peritoneal dialysis

**KeyWords Plus:** CHRONIC KIDNEY-DISEASE; RECOMBINANT-HUMAN-ERYTHROPOIETIN; GLYCOL-EPOETIN-BETA; EVERY 2 WEEKS; DARBEPOETIN-ALPHA; HEMODIALYSIS-PATIENTS; HEMOGLOBIN LEVEL; CLINICAL-TRIAL; VARIABILITY; MANAGEMENT