TITLE: Initiation of Hemodialysis for Adults Experiencing Acute Renal Failure in an Intensive Care Unit Setting: Clinical and Cost Effectiveness

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RESEARCH QUESTIONS:

1. What is the clinical effectiveness of the initiation of hemodialysis in adult patients experiencing acute renal failure in an intensive care unit setting?

2. What is the cost effectiveness of the initiation of hemodialysis in adult patients experiencing acute renal failure in an intensive care unit setting?

METHODS:

A limited literature search was conducted on key health technology assessment resources, including PubMed, the Cochrane Library (Issue 1, 2009), University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, EuroScan, international health technology agencies, and a focused Internet search. Results include articles published between 2004 and February 2009, and are limited to English language publications only. Filters were applied to limit the retrieval to health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, controlled clinical trials, observational studies and economic studies. Internet links are provided, where available.

RESULTS:

HTIS reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by economic evaluations, randomized controlled trials (RCTs), controlled clinical trials, and observational studies.

One health technology assessment, two economic studies, one RCT, and nine observational studies were identified pertaining to the clinical and cost effectiveness of the initiation of
hemodialysis in adult patients experiencing acute renal failure in an intensive care unit setting. No systematic reviews, meta-analyses or controlled clinical studies were identified. Additional information that may be of interest has been included in the appendix.

Health technology assessments


Systematic reviews and meta-analyses
No literature identified.

Economic analyses and cost information


Randomized controlled trials


Controlled clinical trials
No literature identified.

Observational studies


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APPENDIX – FURTHER INFORMATION:

Economic studies and cost information


Review articles


Additional references
