

Ferric Citrate in management of iron deficiency anemia and slowing down the progression of chronic kidney disease

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Ferric citrate has been reported to reduce serum phosphate and increase iron availability in patients with dialysis dependent (DD) and non-dialysis dependent (NDD) chronic kidney disease (CKD). Ferric citrate significantly reduced serum phosphate and FGF23 compared with placebo and had a non-inferior effect compared with active treatment. Ferric citrate also improved hemoglobin, transferrin saturation and ferritin levels in DD and NDD CKD patients. In our previous study, the Meta-analysis showed that ferric citrate effectively alleviated hyperphosphatemia and iron deficiency, as well as increased hemoglobin levels in patients with CKD stage 3-5 and DD patients. A pilot study further showed a low ratio (23%) of initiated dialysis in ferric citrate group during the study period as compared with a high ratio (48%) of patients randomized to usual care ($P=0.001$) among NDD CKD patients. Besides, ferric citrate treatment resulted in significantly lower annualized hospital admissions, fewer days in hospitalization, and a lower incidence of the composite end-point of death, provision of dialysis, or transplantation ($P=0.002$).