Adverse Health Effects of Frailty in CKD Patients

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Cause

	Effect (descriptions)	Risk Difference	CKD severity	Frailty	Sample	Reference
				Assessment	Size	
Lifestyle	Smoking*	RR 1.18 (1.04-1.34)	CKD stage 5D	Fried	205	1
			(hemodialysis)	Phenotypes		
Ethnicity	Hispanic*	Frailty scores +0.6	CKD stage 5D	Fried	762	2
		points per year	(hemodialysis)	Phenotypes		
Biological						
Cardiovascular	Hypertension*	RR 1.6 (1.26-2.04)	CKD stage 5D	Fried	205	1
			(hemodialysis)	Phenotypes		
	Peripheral vascular disease*	RR 1.58 (1.34-1.8)	CKD stage 5D	Fried	205	1
			(hemodialysis)	Phenotypes		
	Left ventricular dysfunction*	RR 1.18 (1.03-1.36)	CKD stage 5D	Fried	205	1
			(hemodialysis)	Phenotypes		
	Endothelial dysfunction	r = -0.367 (p= 0.004)	CKD stages 3-5	Fried	61	3
		OR 3.86 (1.00-14.88)		Phenotypes		
Vascular access	Use of a permanent vascular	HR 0.71 (0.51-0.98)	CKD stage 5D	Fried	2275	4
	access (fistula or graft)		(hemodialysis)	Phenotypes		
Cerebrovascular	Cerebrovascular Accident	RR 1.34 (1.19-1.5)	CKD stage 5D	Fried	205	1
			(hemodialysis)	Phenotypes		
Pulmonary	COPD	OR 1.68 (1.16-2.45)	CKD stages 1-5	Fried	10256	5
				Phenotypes		

Inflammatory	IL-6*	Worse frailty	CKD stage 5D	Fried	762	2
			(hemodialysis)	Phenotypes		
	CRP	After adjustment, OR	Chronic kidney	Fried	5888	6
	Fibrinogen	1.76 (1.28-2.41) to	insufficiency, serum	Phenotypes		
		1.50 (1.07-2.09)	creatinine ≥ 1.3 mg/dL			
Endocrinologic/	Diabetes	Frailty scores +0.7	CKD stage 5D	Fried	762	2
Metabolic		points per year	(hemodialysis)	Phenotypes		
		OR 1.68 (1.16-2.45)	CKD stages 1-5	Fried	10256	5
				Phenotypes		
	Obesity (IMC ≥ 30 kg/m²)	OR 6.63 (1.16-36.77)	CKD stages 3-5	Fried	61	3
				Phenotypes		
	Higher parathyroid	r= 0.30 (p= 0.01)	CKD stages 3-5	Fried	61	3
	hormones (PTH)			Phenotypes		
Body Composition	Higher fat mass	r= 0.25 (p= 0.04)	CKD stages 3-5	Fried	61	3
				Phenotypes		
Cancer	Cancer	OR 1.89 (1.19-2.99)	CKD stages 1-5	Fried	10256	5
				Phenotypes		
Arthritis	Arthritis	OR 3.34 (2.08-5.38)	CKD stages 1-5	Fried	10256	5
				Phenotypes		
Laboratory Data	eGFR (mL/min/1.72m^2)					
	reference: > 60					
	eGFRcys < 30	Frailty prevalence 2.8	CKD stages 1-4	Fried	336	7

		eGFRcys 30-44	Frailty prevalence 2.1		Phenotypes		
	Se	erum Albumin	Frailty scores	CKD stage 5D	Fried	762	2
	C	oncentrations (g/dL)	-1.1 points per g/dL	(hemodialysis)	Phenotypes		
	Serum Creatinine <4 mg/dL*		RR 1.46 (1.22-1.71)	CKD stage 5D	Fried	205	1
				(hemodialysis)	Phenotypes		
	Te	estosterone, every 50%		CKD stage 5D	Fried	440	8
	lo	wer free form		(hemodialysis), men	Phenotypes		
		being frail	OR 1.40 (1.05-1.53)				
		becoming frail over 12	OR 1.40 (1.07-1.73)				
	months						
	Н	emoglobin	Adjusted, OR 1.76	Chronic kidney	Fried	5888	6
	LDL, HDL		(1.28-2.41) to 1.50	insufficiency, serum	Phenotypes		
			(1.07-2.09)	creatinine ≥1.3mg/dL			

Non-adjusted differences in comorbidity and system-based influences

	Effect (descriptions)	Prevalence	CKD Severity	Frailty	Sample	Reference
				Assessment	Size	
Biological						
Cardiovascular	Heart Failure (%)	30% vs 12%	CKD stages 1-4	Fried	336	7
				Phenotypes		
	Angina (%)	34% vs. 22%	CKD stages 1-4	Fried	336	7
				Phenotypes		
Cerebrovascular	Cerebrovascular Disease (%)	26.4 vs. 12.0	CKD stage 5D	Fried	324	9
			(hemodialysis)	Phenotypes		
Endocrinologic/	Diabetes (%)					
Metabolic		64% vs. 49%	CKD stages 1-4	Fried	336	7
				Phenotypes		
	Obesity (%)	F vs. NF				
		64% vs. 50%	CKD stages 1-4	Fried	336	7
				Phenotypes		
		51.8% vs.	CKD stage 5D	Fried	324	9
		23.9%	(hemodialysis)	Phenotypes		
	BMI based on dry weight	31.5 vs. 27.6	CKD stage 5D	Fried	324	9
			(hemodialysis)	Phenotypes		
	вмі	22.53 vs. 26.16	CKD stage 5D	Fried	320	10
			(hemodialysis)	Phenotypes		
Cognitive	Mini-Mental State Examination		Elderly, ≥65y/o	Edmonton Frail	137	11

	(MMSE)				Scale (EFS)		
		Spearman's correlation	-0.607				
		coefficient of EFS scores	(p<0.01)				
		with gross MMSE scores					
	Executive Fun	ction	F vs. NF				
		Trail Making Tests A +12		CKD stage 5D	Fried	324	9
		(TMTA) scores		(hemodialysis)	Phenotypes		
		Trail Making Tests B	+33.15	CKD stage 5D	Fried	324	9
		(TMTB) scores		(hemodialysis)	Phenotypes		
Immunological	Inflammatory						
		CRP (In CRP) (mg/dL)	1.12 vs 0.28	CKD stage 5D	Clinical Frailty	119	12
		IL6 (In IL6) (mg/dL)	2.45 vs. 1.58	(peritoneal	Scale (CFS)		
				dialysis)			
	Mycophenolate mofetil (MMF) dose		F vs. NF	CKD stage 5T	Fried	525	13
	reduction (MI	OR)			Phenotypes		
		1 year since KT (%)	44 vs 40				
		2 years since KT (%)	54 vs. 45				
		3 years since KT (%)	67 vs. 51				
	Viral infection		F vs. NF				
		HCV (n=37) (capitals)	36 vs. 1	CKD stage 5D	Fried	205	1
				(hemodialysis)	Phenotypes		
Body Composition	Appendicular	ı					
		Appendicular skeletal	6.8 vs. 7.7	CKD stage 1-5	Edmonton Frail	41	14
		muscle mass index			Scale (EFS)		

(ASMI)					
Appendicular fat percentage	FRAIL scale				
Left/Right lower extremity Left/Right upper extremity	t = 2.32; p = 0.03 (left); t = 2.05; p = 0.048 (right) t = 2.66; p = 0.01 (left); t = 3.09; p = <0.01	CKD stage 5D (hemodialysis)	FRAIL scale	44	15
Appendicular fat percentage	(right) Frail/Prefrail vs. Nonfrail				
Left/Right lower extremity	t = 2.31; p = 0.03 (left); t = 2.28; p = 0.03 (right)	CKD stage 5D (hemodialysis)	Self- report instrument evaluating five dimensions of	44	15
Right upper extremity	t = 2.35; p = 0.03		frailty (fatigue, resistance, ambulation, illnesses, and weight loss)		
Lower lean mass			weight 1055)		
	F/PF vs. NF				

		Whole body (kg)	34.7 vs. 43.1	CKD stage 5D	Self- report	44	15
		Cephalic/trunk (g)	3059 vs. 3288	(hemodialysis)	instrument		
			(cephalic);		evaluating five		
			17.4 vs. 22.1		dimensions of		
			(trunk)		frailty (fatigue,		
		Right/Left upper limb	1831 vs. 2493		resistance,		
		(g)	(right); 1869		ambulation,		
			vs. 2515 (left)		illnesses, and		
		Right/Left lower limb	4920 vs. 6114		weight loss)		
		(g)	(right); 4650				
			vs. 6349 (left)				
		Lean body mass (in frail	57.1%	CKD stage 1-5	Edmonton Frail	41	14
		vs. nonfrail) (%)	vs .14.7%		Scale (EFS)		
Laboratory Data	Prealbumin (PRAB) (mg/dL)		28.9 vs. 38.3	CKD stage 1-5	Edmonton Frail	41	14
					Scale (EFS)		
	Serum albumi	in (g/L)	Pearson	CKD stage 5D	Fried	74	16
			correlation	(hemodialysis)	Phenotypes		
			coefficient r = -				
			0.263 (p =				
			0.025)				
			38 vs. 41	CKD stage 1-5	Edmonton Frail	41	14
					Scale (EFS)		
			29.2 vs. 34.8	CKD stage 5D	Clinical Frailty	119	12
				(peritoneal	Scale (CFS)		

				dialysis)			
			36.1 vs. 38.5	CKD stage 5D	Fried	320	10
				(hemodialysis)	Phenotypes		
		Frail with depression vs.	32.9 vs. 34.9	CKD stage 5D	In-house	178	17
		Frail without depression	vs. 35.8	(peritoneal	Chinese		
		vs. Nonfrail	(p=0.025)	dialysis)	questionnaire		
	Calcium (mm	ol/L)	2.24 vs. 2.36	CKD stage 1-5	Edmonton Frail	41	14
					Scale (EFS)		
			Pearson	CKD stage 5D	Fried	74	16
			correlation	(hemodialysis)	Phenotypes		
			coefficient r = -				
			0.336 (p =				
			0.004)				
			6.49 vs. 8.07 (p				
			= 0.037)				
			10.35 vs. 10.97	CKD stage 5D	Fried	320	10
				(hemodialysis)	Phenotypes		
	25-hydroxy vi	tamin D (ng/mL)	Pearson	CKD stage 5D	Fried	74	16
			correlation	(hemodialysis)	Phenotypes		
			coefficient r = -				
			0.363 (p =				
			0.002)				
			11.58 vs. 17.09				

		(p = 0.005)				
Miscellaneous	Dialysis clearance rate (Kt/V and urea	↑	CKD stage 5D	FRAIL scale	46	18
	reduction ratio)		(chronic dialysis)			
Composite	Number of complications	Spearman's	Elderly (≥ 60 yo),	Edmonton Frail	35	28
	(complications identified at data	correlation	with diagnosis of	Scale (EFS)		
	collection: High Pressure Cramping,	0.666 (p =	CKD			
	Anemia, Weight loss Pain, Weakness,	0.000 in table)				
	Weight gain Constipation, Heart	(p < 0.05 in				
	Arrhythmia, Headache, Itch, Recurrent	text)				
	infections, Arterial hypertension)					
	Higher number of comorbid conditions	6 vs. 4 (p =	CKD stage 1-5	Edmonton Frail	41	14
		0.03)		Scale (EFS)		
	Charlson's comorbidity score	Spearman's	CKD stage 5D	Chinese	193	26
		rank	(peritoneal	questionnaire		
		correlation	dialysis)			
		coefficient r =				
		0.40 (p <				
		0.0001)				
unctional Status	Disability	F vs. NF				
	≥1 disability in	15% vs. 5%	CKD stages 1-4	Fried	336	7
	activities of daily			Phenotypes		
	Living (ADLs)					
	≥1 disability in	60% vs. 28%				
	instrumental					

		activities of daily living (IADLs) ≥1 disability in mobility tasks Less ADL- independent	40% vs. 18% 55% vs. 91%	≥ 65 yo, predialysis, eGFR < 20 mL/min	Groningen frailty indicator (GFI)	65	19
daily living		33.33% vs 76.4% 38.8% vs.	CKD stage 5D (hemodialysis)	Fried Phenotypes	320	10	
			84.7%				
Gut microbiota	Abundance of unclassified Mogibacteriaceae and Oscillospira Abundance of Akkermansia,		7.6 vs. 3.9 Directly proportional to MIS Inversely proportional to MIS	Stage 3b-4, eGFR 15-45ml/min	Fried Phenotype score	64 (and 15 control subjects)	20
	Bacterial Abundance of some genera (Mogibacteriacee, Coriobacteriacee, Eggerthella, Erwinia, Coprobacillus,		1				

	Anaerotrun	icus, etc)					
Neurological							
EEG	Brain Wave		F vs. NF	ESRD, under	FRAIL scale	46	18
		Global DAR	283 ± 679 vs.	chronic dialysis			
			2971 ± 4859				
		DARs (left frontal)	135 ± 250 vs.				
			3073 ± 4702				
		DAR (left TO)	197 ± 318 vs.				
			3708 ± 6398				
		DAR (central)	55 ± 96 vs.				
			1773 ± 3262				
		DAR (right TO)	187 ± 261 vs.	1			
			4400 ± 7763				
		Global DTABR	191 ± 469 vs.	1			
			1781 ± 2793				
		DTABR (left frontal)	86 ± 158 vs.				
			1680 ± 2388				
		DTABR (left TO)	130 ± 210 vs.				
			1884 ± 2828				
		DTABR (central)	39 ± 65 vs.				
			1132 ± 1957				
		DTABR (right TO)	126 ± 178 vs.				
			2960 ± 5271				
Psychological							

Mood	Mood Change	Negative	CKD stage 5D	Edmonton Frail	N/A	21
		change	(hemodialysis)	Scale (EFS)		
Mental Health						
Anxiety	Hospital Anxiety and Depression Scale	<u>Women</u> : ↑ in	ESRD, under	N/A	97	22
	(HADS)	global,	online-			
		psychological,	haemodiafiltration			
		social frailty	(OL-HDF)			
		<u>Men</u> : ↑ in				
		Physical frailty				
Depression	Hospital Anxiety and Depression Scale	<u>Men</u> ↑ in	ESRD, under	N/A	97	22
	(HADS)	global,	online-			
		psychological,	haemodiafiltration			
		physical frailty	(OL-HDF)			
	Incidence (%) (Self-reported Major	83 vs. 6	CKD stage 1-5	Edmonton Frail	41	14
	Depression Inventory)			Scale (EFS)		
Mental Function	Post-KT delirium	9.0% vs. 3.9%	CKD stage 5T	Fried	893	23
				Phenotypes		
ociological						
Interaction	Interaction with family	Good				24
Physical activity	Minnesota Leisure Time Activity (LTA)	95 vs. 735	CKD stage 5D	Fried	68	25
		(p<0.001)	(hemodialysis)	Phenotypes		
	Low Physical Activity Questionnaire	280 vs. 798				
	(LoPAQ)	(p=0.003)				
	Sitting (hours/day)	6.5 vs. 5				

			(p=0.04)				
Nutritional Status	Overall subject	tive global assessment	5.04 vs. 5.41	CKD stage 5D	In-house	178	17
	(SGA) (weight	loss, anorexia,	vs. 5.75 (p <	(peritoneal	Chinese		
	subcutaneous	fat, muscle mass) (Frail	0.0001)	dialysis)	questionnaire		
	with depressio	on vs. Frail without	Spearman's	CKD stage 5D	Chinese	193	26
	depression vs.	Nonfrail)	rank	(peritoneal	questionnaire		
			correlation	dialysis)			
			coefficient r = -				
			0.44, p <				
			0.0001				
	Malnutrition in	nflammation score (MIS)	9.48 vs. 7.13	CKD stage 5D	In-house	178	17
	(frail with depr	ression vs. frail without	vs. 5.12 (p <	(peritoneal	Chinese		
	depression vs.	nonfrail)	0.0001)	dialysis)	questionnaire		
			Spearman's	CKD stage 5D	Chinese	193	26
			rank	(peritoneal	questionnaire		
			correlation	dialysis)			
			coefficient r =				
			0.40, p <				
			0.0001				
Quality of Life	HRQoL						
		SF-36					
		Scores in physical	\downarrow	CKD stage 1-5	Edmonton Frail	41	14
		functioning, blood			Scale (EFS)		
		pressure, role					

	Kidney Diseas	physical, and physical component summary domains	F vs. NF				
		Physical health Kidney disease effects	33.7 vs. 40.7 51.6 vs. 66.8	ESRD CKD stage 5D (conventional hemodialysis)	Fried Phenotypes	151	27
Independence	Functional Ind (FIM)	dependence Measure		Elderly, ≥65y/o	Edmonton Frail Scale (EFS)	137	11
	Spearman's correlation coefficient	Frailty diagnosis with global FIM Frailty diagnosis with motor FIM Frailty diagnosis with cognitive FIM EFS scores with gross FIM	-0.703 (p<0.001) -0.714 (p<0.001) -0.575 (p<0.001) -0.53 (p<0.01)				
Health-care utilization	Hospitalizatio	n	90% vs. 53% (p = 0.04)	≥ 65 yo, predialysis, eGFR < 20 mL/min	Groningen frailty indicator (GFI)	65	19
		Cumulative number of inpatient health-care visits Cumulative number of	↑	CKD stage 1-5	Edmonton Frail Scale (EFS)	41	14

	emergency health-care					
	visits					
	Cumulative number of					
	total health-care visits					
	Admissions/year	0.77727 vs.	CKD stage 5D	Fried	320	10
		0.2838	(hemodialysis)	Phenotypes		

Complications

	Effect (descriptions)	Risk Difference	CKD Severity	Frailty Assessment	Sample	Reference
					Size	
Biological						
Cardiovascular	Cerebrovascular Accident	OR 1.55 (1.05-	CKD stage 5D	Fried Phenotypes	2275	4
		2.99)	(hemodialysis)			
	QRS duration	β coefficient =	CKD stage 5D	Edmonton frailty scale	41	29
		-0.29, t = −2.03	(chronic	(EFS)		
		(p = 0.048)	hemodialysis)			
		β coefficient =		FRAIL scale		
		-0.27, t = −1.84				
		(p = 0.05)				
	Vascular Access failure	HR 2.63 (1.03-	ESRD	Self-reported FRAIL scale	51	30
		6.71)	(CKD stage 5D)			
Renal Function	Risk for death or dialysis	2.5 (1.4-4.4)-fold	CKD stages 1-4	Fried Phenotypes	336	7
Decline	therapy	greater				
Immunological	Mycophenolate mofetil (MMF)	HR 1.29 (1.01-	CKD stage 5T	Fried Phenotypes	525	13
	dose reduction (MDR)	1.66)				
Cognitive	Modified Mini-Mental State	-2.37 to -2.80 (1	ESRD	Fried Phenotypes	324	9
	(3MS)	year) (p=0.03)				
	Declined, 1-4 years post-KT	Slope = -0.04 vs.	CKD stage 5T	Fried physical frailty	665	31
	(points/week)	0.005		phenotypes (PFP)		
	At 4 year post-KT (points)	-5.5 (87.4 vs.	1			

		92.9)				
Functional	Disability	F vs. Prefrail vs.				
status		NF				
	Need for activities of daily	OR 11.32 (5.49-	CKD stage 5D	Fried Phenotypes	742	32
	livings (ADL) assistance	23.32) vs. 1.93	(hemodialysis)			
		(1.01-3.68) vs.				
		1.00				
Diabetes	Diabetes	OR 1.35 (1.10-	CKD stage 5D	Fried Phenotypes	2275	4
		1.65)				
Body	Bones					
composition						
	Bone Mineral Density	One year follow-	ESRD	FRAIL Scale	43	33
	(BMD)	up, with frailty	CKD stage 5D			
	L1	ß = −0.4, t	(chronic			
		=-2.18, p=0.04	hemodialysis)			
	L4	ß =-0.39, t =-2.1,				
		p=0.046				
	Femur Neck (FN)	ß =−0.5, t= −2.96,				
		p<0.01				
		$\beta = -4$, t = -3.17,				
		p = 0.004				
	Total	ß = −0.53, t =	ESRD	FRAIL Scale	43	33
		−3.27, p < 0.01	CKD stage 5D			
			(chronic			

			hemodialysis)			
	Areas	One year follow-up, with frailty	ESRD CKD stage 5D	FRAIL Scale	43	33
	Average L-spine areas	$\beta = -0.48$, t =-2.84, p < 0.01	(chronic hemodialysis)			
	Changes of average L- spine areas	$\beta = -0.5, t$ =-3.02, p<0.01	The modulary sis,			
	Z-score	One year follow- up, with frailty	-			
	Percentage change of L1 Z-score	ß = -0.45, t =-2.11, p=0.049				
	Vertebral Compression	OR 1.8 (p = 0.01)	ESRD	FRAIL Scale	43	34
	Fracture (VCF)		CKD stage 5D (chronic			
			hemodialysis)			
	Quantitative ultrasound (QUS) parameters of calcaneus					
	Speed of sound (SOS)	Standardized β (range, p value)	CKD stage 5D (maintenance	Fried Phenotypes	214	35
	Female (Five frailty criteria)	Negative (-0.253 to -0.439, p ≤	hemodialysis)			
		0.034)				

		1			 	
		Male	Negative (-0.277			
		(All criteria significant	to -0.402, p ≤			
		except weight loss)	0.003)			
	В	roadband ultrasound	Standardized β			
	a	ttenuation (BUA)	(range, p value)			
		Female	Negative (-0.209			
		(All criteria significant	to -0.354, p ≤			
		except weakness and	0.045)			
		weight loss)				
		Male	Negative (-0.171			
		(All criteria significant	to -0.371, p ≤			
		except weight loss)	0.045)			
	St	tiffness index	Standardized β			
			(range, p value)			
		Female	Negative (-0.271	1		
		(All criteria significant	to -0.461, p ≤			
		except weight loss)	0.018)			
		Male	Negative (-0.183	1		
		(Five frailty criteria)	to -0.461, p ≤			
			0.048)			
M	uscle	2S				
	Qua	driceps muscle area	Multivariable		Performance-based frailty	Performance-based frailty 80
	(ma	gnitude of association	coefficient -30.3		(PbF)	(PbF)

	with PbF vs. 10 years of age)	$cm^2 (p = 0.02) vs.$				
		-6.6 cm ² (p =				
		0.0001)				
Laboratory	Serum Albumin					
data	Concentrations (g/dL)					
	<3.2 vs. ≥3.9	OR 1.89 (1.30-	CKD stage 5D	Fried Phenotypes	2275	4
		2.59)				
	Hypoalbuminemia	Negative	CKD stage 5D	Frail Scale	46	37
		association (p =	(maintenance			
		0.01)	hemodialysis)			
			(ESRD)			
Psychological						
Delirium	Post-KT delirium	OR 2.05 (1.02-	CKD stage 5T	Fried Phenotypes	893	23
		4.13)				
Distress	Distress Thermometer	β = 0.35, t = 3.0	CKD stage 5D	Canadian frailty score	382	38
		(95% CL = 0.12-	(hemodialysis)			
		0.58) (p = 0.003)				
Quality of Life	HRQoL					
	Fair/Poor HRQOL at follow-	aOR 2.79 (1.32-	ESRD	Fried Phenotypes	233	39
	up (median 9.4 mo)	5.90)	CKD stage 5T			
	Worsening HRQOL at	aRR 2.91 (1.08-				
	follow-up (median 9.4 mo)	7.80)				
	SF-36					
	Hierarchical regression	29% (p<0.001)	CKD stage 2-4	Fried Phenotypes	168	40

	R^2 change (effects of					
	frailty on HRQoL) in					
	Physical Component					
	Summary (PCS)					
	Hierarchical regression	21.3% (p<0.001)				
	R^2 change (effects of					
	frailty on HRQoL) in					
	Mental Component					
	Summary (MCS)					
	Physical components	Simple linear	CKD stages 3-5	Fried Phenotypes	61	41
		regression	(predialysis			
		coefficient = -	treatment)			
		1.12 (-1.47 to -				
		0.76) (p < 0.001)				
	Mental components	Simple linear				
		regression				
		coefficient = -				
		0.75 (-1.40 to				
		016)				
Si	F-12					
	MCS	Effect estimate	CKD stage 5D	The Canadian Study of	251	42
		0.94 (0.91-0.97)	(peritoneal dialysis,	Health and Aging Clinical		
		(p<0.01)	n=129;	Frailty Scale (CFS)		
	PCS	Effect estimate	hemodialysis,			

		0.00 (0.04.0.04)	. 422)			
		0.88 (0.84-0.91)	n=122)			
		(p<0.01)				
KD0	QOL-SF scores within 3	F vs. NF				
mo	nths post-KT					
	At KT	↓	CKD stage 5T	Fried Phenotypes	443	43
	Physical HRQoL	-6.31 points				
		(95% CI -8.16 to -				
		4.46)				
	Kidney disease-	-6.53 points				
	specific HRQoL	(95% CI -9.17 to -				
		3.89)				
	Post-KT	Greater				
		improvement				
	Physical HRQoL	1.35				
		points/month				
		(0.65 to 2.05) vs.				
		0.34				
		points/month (-				
		0.17 to 0.85)				
	Kidney disease-	3.75				
	specific HRQoL	points/month				
		(2.89 to 4.60) vs.				
		2.41				
		points/month				

			(1 70 to 2 04)
	-		(1.78 to 3.04)
	Co	onstituent domains	Greater
		T	improvement
		General health	4.93
			points/month
			(3.51 to 6.35) vs.
			2.87
			points/month
			(1.82 to 3.92)
		Effects of ESRD on	7.10
		daily living	points/month
			(5.68 to 8.51) vs.
			4.01
			points/month
			(2.99 to 5.03)
		Cognitive function	2.88
			points/month
			(1.80 to 3.96) vs.
			1.28
			points/month
			(0.50 to 2.07)
		Social interaction	1.18
			points/month (-
			0.06 to 2.43) vs

		0.57				
		points/month (-				
		1.47 to 0.33)				
	Illness Intrusiveness Rating	Effect estimate	CKD stage 5D	The Canadian Study of	251	42
	Scale	1.14 (1.09-1.20)	(peritoneal dialysis,	Health and Aging Clinical		
	Barthel Index	Effect estimate	n=129;	Frailty Scale (CFS)		
		0.89 (0.86093)	hemodialysis,			
	Symptom score	Effect estimate	n=122)			
		1.23 (1.13-1.34)				
	Hospital Anxiety and	Effect estimate				
	Depression Scale	1.21 (1.11-1.31)				
	Falls	HR 2.1 (1.21-	CKD stage 5D	Fried Phenotypes	205	1
		3.92)	(hemodialysis)			
		OR 2.39 (1.22-	CKD stage 5D	Fried frailty index	762	44
		4.71)	(maintenance			
			hemodialysis)			
	Higher numbers of falls	HR 3.09 (1.38-	CKD stage 5D		95	45
		6.90)	(hemodialysis)			
	Time to first fall or fracture	HR 1.60 (1.16-	CKD stage 5D	Modified Fried	1646	47
	requiring medical attention	2.20)	(maintenance	Phenotypes by Bao Y 46.		
			hemodialysis)			
Graft Loss	Death-censored graft loss					

	F vs. NF (in patients with	aHR 6.20 (1.67,	CKD stage 5T	Fried Phenotypes	773	48
	depressive symptoms)	22.95) vs. 3.16				
		(0.90, 11.04)				
Health-care	Hospitalization/Death	HR 1.56 (1.36-	CKD stage 5D	Fried Phenotypes	2275	4
utilization		1.79)				
	Hospitalization	HR 2.06 (1.18-	CKD stage 5D	Fried Phenotypes	205	1
		3.58)	(hemodialysis)			
		aHR 1.80 (1.4-	CKD stage 5D	Adopted	1658	49
		2.3)	(maintenance			
			hemodialysis &			
			peritoneal dialysis)			
		Relative risk =	CKD stage 5D	Fried Phenotypes	146	50
		1.43 (1.00-2.03)	(hemodialysis)			
	Number of hospitalizations	beta = 0.29 (p <	CKD stage 5D	Chinese questionnaire	193	26
	for all causes	0.0001)	(peritoneal dialysis)			
	Number of hospitalizations	beta = 0.37 (p <				
	related to cardiovascular	0.0001)				
	events					
	Non-vascular access-related	aHR 1.98 (1.41-	CKD stage 5D	Fried Phenotypes	2275	4
	hospitalizations	1.87) (內文應該				
		寫錯,無勘誤)				
	Time to first hospitalization	HR 1.26 (1.09-	CKD stage 5D	Earlier modification of	1576	46
		1.45)	(maintenance	Fried Phenotypes by		
			dialysis)	Johansen et al ⁴ , but		

				without weight loss.		
Ear	ly Hospital Readmission	aRR 1.61 (1.81-	CKD stage 5T	Fried Phenotypes	383	51
(EH	IR)	2.19) (p=0.002)				
Du	ration of hospitalization					
	Hospital stay (days per year	26.62 (IQR 10.65-	CKD stage 5D	In-house Chinese	178	17
(of follow up) (frail with	61.18) vs. 14.05	(peritoneal dialysis)	questionnaire		
(depression vs. frail without	(IQR 3.57-37.27)				
(depression vs. nonfrail)	vs. 8.04 (IQR				
		0.91-19.42)				
		(p<0.0001)				
-	Total length of hospital stay	beta = 0.34 (p <	CKD stage 5D	Chinese questionnaire	193	26
		0.0001)	(peritoneal dialysis)			
Lor	nger Length of Stay (LOS)					
,	with delayed graft function	Relative Risk 1.15	CKD stage 5T	Fried Phenotypes	589	52
	(DGF), LOS	(1.03-1.29)				
,	With DGF, LOS ≥2 weeks	OR 1.57 (1.06-				
		2.33)				
	≥2 weeks		CKD stage 5 to 5T	Fried Phenotypes	569	53
	Change in 3 categories	OR 2.02 (1.20-				
	(more frail)	3.40)				
	Change in frailty scores	OR 1.92 (1.13-				
	(more frail)	3.25)				
,	With depressive symptoms	aRR 1.88 (1.70-	CKD stage 5T	Fried Phenotypes	773	48
Ш	(aRR difference between F	2.08) vs. 1.38				

	and NF)	(1.27-1.52)				
	CES-D score (10-point	aRR 1.23 (1.16-				
	increase) (aRR increase	1.31) vs. 1.17				
	between F and NF)	(1.08-1.27)				
Mortality	Mortality	2.17 fold	CKD stage 5T	Fried Phenotypes	537	54
		HR 1.57 (1.25-	CKD stage 5D	Earlier modification of	1576	46
		1.97)	(maintenance	Fried Phenotypes by		
			dialysis)	Johansen et al ⁴ , but		
				without weight loss.		
		HR 2.24 (1.60-	CKD stage 5D	Fried Phenotypes	2275	4
		3.15)				
		HR 1.22 (1.04-	CKD stage 5D	CFS	390	55
		1.43)	(incident chronic			
			dialysis)			
		HR 4.28 (1.22-	Predialysis (eGFR ≤	PRISMA questionnaire &	104	56
		14.98)	25 mL)	Timed up and Go test		
		aHR 9.83 (1.80-	CKD stage 5D	CFS	119	12
		53.7)	(peritoneal dialysis)			
		HR 2.60 (1.04-	CKD stage 5D	Fried Phenotypes	146	50
		6.49)	(hemodialysis)			
		HR 2.37 (1.11-	CKD stage 5D	Adopted	1658	49
		5.02)	(maintenance			
			hemodialysis &			
			peritoneal dialysis)			

	20.45% vs.	CKD stage 5D	Fried Phenotypes	320	10
	12.36% (p<0.005)	(hemodialysis)			
Performance-based frailty	HR 2.16 (1.41-	CKD stage 5D	Fried Phenotypes & a	771	57
	3.29)	(hemodialysis)	definition that substitutes		
Self-reported function-	HR 1.93 (1.24-		self-reported measures		
based frailty	3.00)		available on the Medical		
Patients who met both	HR 2.46 (1.51-		Outcomes Study 36-Item		
performance- and self-	4.01)		Short Form (SF-36) for the		
reported function-based			physical performance and		
frailty			exhaustion criteria.		
F vs. NF (in patients with	aHR 2.62 (1.03,	CKD stage 5T	Fried Phenotypes	773	48
depressive symptoms)	6.70) vs. 1.92				
	(0.68, 5.38)				
At 24-month follow up, frail	62.5% vs. 71.4%	CKD stage 5D	In-house Chinese	178	17
with depression vs. frail	vs 86.6%	(peritoneal dialysis)	questionnaire		
without depression vs.	(p=0.001)				
nonfrail					
Prediction ability of	HR 0.75 (0.44-	CKD stage 5T (KT	Fried Phenotypes	2086	58
comorbidities in F vs. NF	1.29) vs. 1.66	candidates, on			
	(1.17-2.35)	waitlist)			
Out of 10 deceased within 1	30% vs. 9%	≥ 65 yo, predialysis,	Groningen frailty indicator	65	19
year of initiation		eGFR < 20 mL/min	(GFI)		
(percentage of F vs. NF)					
Risk for <mark>death</mark> or dialysis	2.5 (1.4-4.4)-fold	CKD stages 1-4	Fried Phenotypes	336	7

therapy	greater				
All-cause mortality					
Adjusted	HR 1.66 (1.03- 2.67)	CKD stage 5D (incident chronic	Fried Phenotypes	370	59
Among BMI ≥30 kg/m ²	HR 3.77 (1.10- 12.92)	dialysis)			
Above median Waist-Hip Ratio (WHR)	HR 2.38 (1.17- 4.82)				
Anti-neutrophil cytoplasmic	HR 2.43 (1.48-	CKD stage 5D to 5T	Inability to walk without	425	60
antibody (ANCA)-associated vasculitides (AAV) patients'	3.99)	(RRT [hemodialysis, peritoneal dialysis,	help		
mortality		transplantation])			
Mortality of patients with	HR, 1.93 (1.58-	CKD stage 5D to 5T	Inability to walk without	1462	61
monoclonal gammopathy and	2.36)	(RRT [hemodialysis,	help		
ESRD caused by myeloma cast		peritoneal dialysis,			
nephropathy (MCN),		transplantation])			
immunoglobulin light chain					
amyloidosis (ALA), or light-					
chain deposition disease					
(LCDD)					
Post-KT mortality					
Change in 3 categories (more frail)	HR 2.27 (1.11- 4.65)	CKD stage 5 to 5T	Fried Phenotypes	569	53
Change in frailty scores	HR 2.36 (1.12-	1			

	(more frail)	4.99)				
Composite	Composite outcomes of all-	HR 23.58 (1.61-	CKD stage 5D	Multidimensional frailty	46	62
	cause death or cardiovascular	346.03)	(hemodialysis)	score based on		
	hospitalization			comprehensive geriatric		
				assessment (CGA) protocol		
	30-day postoperative (KT)	β=13.31, 95% CI	CKD stage 5T	Groningen Frailty Indicator	150	63
	complications according to	5.72-20.89 (p =				
	Comprehensive Complication	0.0007)				
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