

In kidney disease patients, illicit drug use linked with disease progression and death

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In a study of patients with chronic kidney disease (CKD), persistent substance use—especially of hard illicit drugs—was linked with higher risks of CKD progression and early death. The findings appear in an upcoming issue of the *Clinical Journal of the American Society of Nephrology (CJASN)*.

CKD is common in the United States, and affected patients are at higher risk for poor health outcomes such as end-stage kidney disease, cardiovascular disease, and premature death. Identifying the lifestyle factors that contribute to worsening kidney function and death is important for helping patients improve their health. A team led by Jiang He, MD, Ph.D. and Joshua Bundy, Ph.D., MPH (Tulane University School of Public Health and Tropical Medicine) investigated whether these factors might include tobacco, alcohol, and illicit [drug](#) use.

The researchers examined information from the Chronic Renal Insufficiency Cohort Study, a prospective longitudinal cohort study among 3939 participants with CKD in the United States. Self-reported information on tobacco smoking, alcohol drinking, [marijuana](#) use, and hard illicit drug (cocaine, heroin, or methamphetamine) use was obtained at the start of the study and at annual follow-up visits.

Over a median follow-up of 5.5-years, 1287 participants experienced CKD progression and 1001 died. Baseline proportions of tobacco smoking, alcohol drinking, marijuana use, and hard illicit drug use were 13%, 20%, 33%, and 12%, respectively.

Among the major findings:

- Compared with non-smoking throughout follow-up, persistent [tobacco smoking](#) was linked with an 86% higher risk of dying.
- Compared with non-drinking throughout follow-up, persistent [alcohol drinking](#) was linked with a 27% lower risk of dying.
- Compared with non-use of marijuana throughout follow-up, persistent marijuana use was not significantly linked with risk CKD progression or dying.
- Compared with non-use of hard illicit drug use throughout follow-up, persistent drug use was linked with a 25% higher risk for CKD progression and a 41% higher risk of dying.

"The US is in the midst of an opioid epidemic, which has led to increases in the use and abuse of heroin. Additionally, efforts for the decriminalization and legalization of illicit drugs, especially marijuana, are gaining traction—for example, more than half of US states currently allow medicinal and/or recreational use of marijuana," said Dr. He. "It is important to try to quantify the long-term health consequences of substance use, especially among vulnerable populations such as patients with chronic conditions like CKD, who are at high risk for poor [health](#) outcomes."

More information: Joshua D. Bundy et al, Self-Reported Tobacco, Alcohol, and Illicit Drug Use and Progression of Chronic Kidney Disease, *Clinical Journal of the American Society of Nephrology* (2018). [DOI: 10.2215/CJN.11121017](https://doi.org/10.2215/CJN.11121017)

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