Secondary Hyperparathyroidism (secondary HPT)

Fact Sheet

OVERVIEW
Secondary hyperparathyroidism (secondary HPT) is a chronic and progressive disease which develops in many dialysis patients with end-stage renal disease (ESRD). Secondary HPT occurs when the parathyroid gland secretes excessive amounts of parathyroid hormone (PTH) as part of a response to decreased renal function and impaired mineral metabolism.

The kidneys are essential to filtering waste and helping to balance fluids, minerals and other substances. When kidney function declines, regulation of vitamin D, calcium and phosphorus levels is impaired. Due to this disordered mineral metabolism, the parathyroid gland releases excess PTH, resulting in the development of secondary HPT. The elevated levels of PTH can lead to an increase in the release of calcium and phosphorus from the bones.

Affecting many of the approximately two million people throughout the world who are on dialysis, secondary HPT often appears in people in Stage 5 of chronic kidney disease (CKD) and is associated with significant clinical consequences.

DIAGNOSIS
Secondary HPT is often initially silent and asymptomatic. As a result, it is frequently underdiagnosed and undertreated. Therefore it is important to promptly diagnose secondary HPT and begin treatment as necessary.

The only way for physicians to determine if therapy for secondary HPT is appropriate is to check a patient’s lab values. PTH blood levels, as well as levels of serum calcium and phosphorus, are used as markers to assess secondary HPT severity and can also inform response to treatment down the road.

TREATMENT
The goals of treating secondary HPT are to maintain appropriate blood levels of PTH, calcium and phosphorus using diet, medication and the dialysis procedure itself. Given the complexity of secondary HPT management and because the treatment approach is based mainly on lab values, therapies may require frequent adjustments and can include:

- More intensive dialysis
- Dietary restriction of phosphate
- Medications
- Surgery to remove the parathyroid glands

Fast facts
- In the U.S. alone, approximately 468,000 people are on dialysis.
- 79 percent of hemodialysis patients develop secondary HPT.
- Stage 5 of CKD, also known as ESRD, is the point at which the kidneys no longer function well enough to survive without dialysis or a kidney transplant.
- Patients on dialysis take an average of 19 pills per day.
- Among ESRD patients, 19 to 31 percent suffer from secondary HPT.
- African American CKD patients are more than twice as likely to develop secondary HPT as Caucasian CKD patients.
Effective management of this disease relies on the efforts of a coordinated, multidisciplinary team of healthcare professionals at a dialysis center, including nephrologists and other physicians, nurse practitioners, physician assistants, dialysis nurses, dietitians and social workers. In addition, secondary HPT management depends heavily on patients taking an active role in their treatment and adhering to therapy. Managing this disease is a complex part of an already complicated medication regimen as patients on dialysis take an average of 19 pills per day, more than patients with any other chronic disease.

However, despite this established multidisciplinary approach to management, many patients currently do not have their secondary HPT lab values in goal range.

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ADDITIONAL INFORMATION
For further information, visit www.amgen.com

REFERENCES