

MEDIA RELEASE

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For Immediate Release

Kidney Health Australia welcomes the announcement that the Federal Government will be funding a Medicare Benefit Schedule (MBS) item which will enable 'on country' dialysis for Australians living with end-stage kidney disease in very remote areas.

Dr Lisa Murphy, Kidney Health Australia Interim Chief Executive Officer, congratulated the Government on its decision to fund this critical item which is a much awaited catalyst for change and improved health care of Australians living in very remote regions.

The MBS item for very remote dialysis was one of several recommendations made by the MBS Review Taskforce Renal Clinical Committee Report in 2017.

Kidney Health Australia has been strongly advocating for the MBS item which will mean that dialysis services will be funded for delivery in very remote areas. By funding a dedicated MBS item number, nurses, Aboriginal and Torres Strait Islander health practitioners and Aboriginal health workers, will now be able to deliver dialysis to end-stage kidney disease patients 'on country'.

"Access to dialysis services is currently limited in very remote areas, which means that people with end-stage kidney disease have to move, often hundreds of kilometres away, from their homes and communities to unfamiliar urban areas to access life-saving dialysis. There are significant financial, psycho-social and health consequences of this relocation, not only on the patient but their family and community as well."

"This new MBS item will significantly address the need to relocate and will address the massive social impact on Indigenous kidney patients, their families and communities. We look forward to hearing about the fine detail and criteria, and in particular hope that the pricing is appropriate to support meaningful changes for those living in remote areas." Dr Murphy said.

Dr Murphy said Kidney Health Australia is committed to assisting those living with kidney disease and their families to access best practice health care and psycho-social supports. This is of particular importance in the Aboriginal and Torres Strait Islander communities where the rates of kidney disease are higher than any other community in Australia and are increasing:

- In remote and very remote areas of Australia, the incidence of end stage kidney disease for Aboriginal and Torres Strait Islander Australians is especially high, rates are up to 20 times higher than amongst non-Indigenous Australians.
- Approximately 80% of the mortality gap for Aboriginal and Torres Strait Islander people aged 35 to 74 years is due to chronic disease and the heaviest disease burden impacts on people living in very remote (36.7%) and remote (27.6%) regions.
- 78% of patients in remote areas with end-stage kidney disease have to relocate, compared with 39% of those who live in rural areas and 15% of urban Indigenous ESKD patients.
- Aboriginal and Torres Strait Islander Australians represent approximately 3% of the national population, yet account for approximately 9% of people commencing kidney replacement treatment each year.
- Amongst Aboriginal and Torres Strait Islander Australians, the heaviest disease burden impacts on people living in very remote (36.7%) and remote (27.6%) regions.

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Dr Murphy said Kidney Health Australia will continue to represent the voice of all people in Australia affected by kidney disease and we will continue to advocate for changes that will improve and save the lives of all Australians affected by kidney disease.

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For more information or to arrange an interview, contact:

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