



Upcoming Events:

RSA 15-17 June 2015 in Perth
www.rsaannualconference.org.au
Abstracts close in Feb

EDTNA Sep 27-29 2015 Dresden
www.edtna.org.au

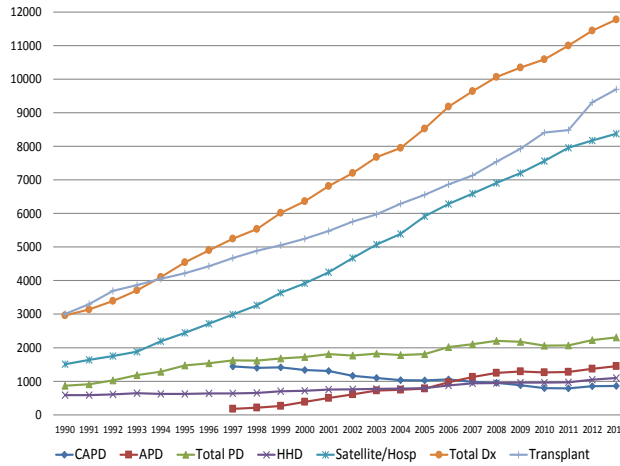
NEN symposium 15-17 Feb 2015
www.nen.org.au/symposium

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Australia Modality of RRT Treatment
Numbers of patients 1990-2013 (source ANZDATA)



ANZDATA 2013

The latest ANZDATA preliminary report from Dec 2013 is out now:
www.anzdata.org.au/v1/annual_reports_download.html

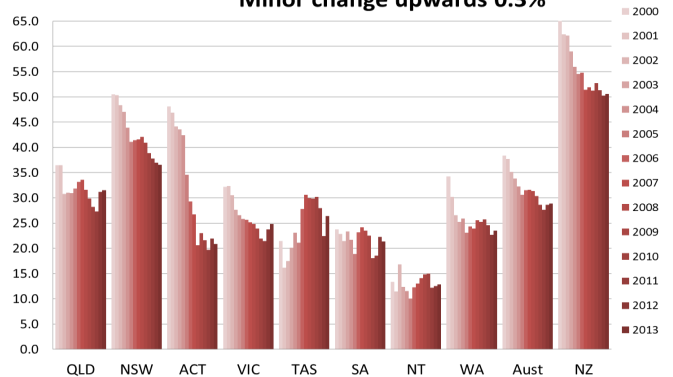
Overall 3.4% more people than in 2012 are on treatment for ESKD.

11774 people are on dialysis and 9696 have a transplant.

There is a minor change to the home dialysis rate although the trend for most states in the last two years continues upwards.

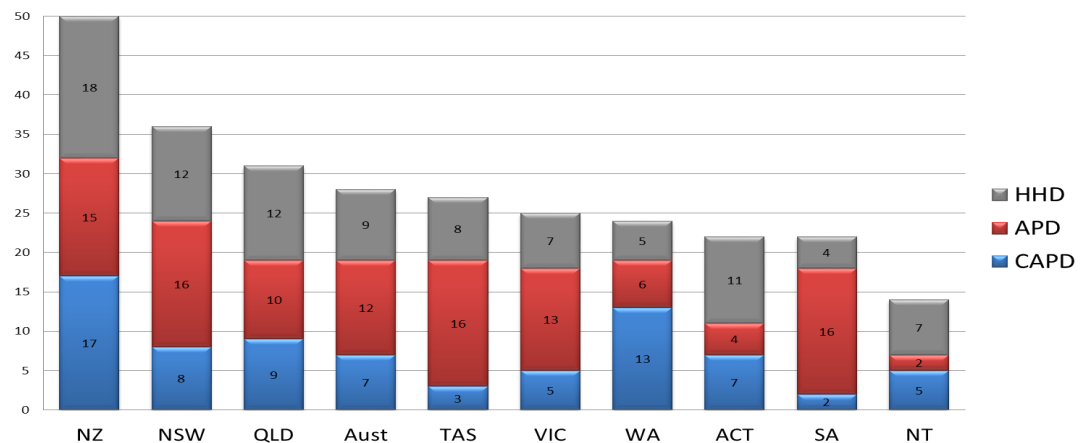
APD continues to increase as a percentage of PD. Transplant rates this year have risen faster than dialysis rates. HHD has increased at a higher rate than satellite HD.

Home Dialysis as a % of all Dialysis 2000-2013
Minor change upwards 0.3%



Home Dialysis rates, by modality, as a % of Dialysis, by States, Dec 2013

NZ/WA highest rate of CAPD
NSW/TAS/SA highest rate APD
NZ/NSW/QLD highest rate of HHD





The
HOME
Network™
Educate, Enable, Empower
Established 2009

The HOME Network

Educate, Enable, Empower

Through education and advocacy the HOME network aims to enable patients and healthcare professionals to use their knowledge and the practical resources developed by the group to empower more patients to embrace the freedom of home therapies.

Health Professional Survey Home Dialysis Unit Resources Melinda Tomlins

Happy New Year to everyone. Last year the HOME Network Health care Professional group conducted a survey looking into developing resources for a train the train package for nurses to teach nurses.

We would like to extend on the survey to investigate further resources within Home Dialysis Units. If you could complete the following survey by **Friday 30th January 2015**

<https://www.surveymonkey.com/s/FX7QWWX>

We would like to ensure that we receive responses from most/all of the home dialysis units across Australia and ask for one response from each unit please.

Thanks in anticipation for your assistance.

Development of diabetes in dialysis patients

Diabetes is not only a major cause of kidney disease but it is postulated that being on dialysis can increase the rate of having diabetes. This is often cited to particularly apply to peritoneal dialysis.

A Taiwan study analysed 2548 PD patients v 10192 HD patients who did not have diabetes for future development of the disease. Patients were matched for age, gender, BP, haematocrit and albumin to reduce selection bias. The incidence of diabetes development in the matched groups was 3.7 per 100 patient years on HD, and 2.4 per 100 patient years on PD. This means that those on HD had an increased risk by 41% of developing type 1 diabetes and a 100% increased risk of developing type 2 diabetes. Having diabetes increased mortality to a ratio of 1.42.



The reasons suggested for this unexpected finding were the chronic inflammation caused by blood exposure to the dialyser because inflammation is caused by dialysis and is also a known risk factor for diabetes. Dialysis information was not provided. Also it was postulated but not proven that the PD cohort may be more active as HD is a sedentary

treatment and post treatment many patients take time to recover.

It was recommended that low glucose solutions are used for those on PD who have diabetes, particularly in order to manage blood sugar control.

Chou, C, Liang C. et al . Comparing risk of new onset DM in CKD receiving PD and HD. Available at: www.plosone.org: 1 feb 2014 vol9 issue 2

Editors Word!

Welcome to edition 36 of Home Updates. Happy New Year.

KHA are currently assessing how HHD patients cope financially during training. Please email if you have any comments.

To subscribe, comment or contribute email Debbie Fortnum: homedialysis@kidney.org.au

