

Newsletter Update

From the Editor

Our Renal Updates is finally back on track following a restructure within Kidney Health Australia which has reformed education into one big business unit. We hope to continue to bring information to health professionals about many areas of renal practice. We also hope to widen our target audience for this newsletter and will widen the content accordingly. Finally it will be converted into a true digital format down the track. Meanwhile I hope you enjoy some recent renal updates.

Debbie Fortnum

Congratulations to the ISPD organising committee, who did Australia proud in organising an amazing and diverse international conference, featuring everything important in the world of peritoneal dialysis.

Calendar of events

17-21 Sep 2016: ANZSN Conference, Perth: apcn2016.com.au

20-22 Jun 2016. RSA Conference Gold Coast: renalsociety.org

18-20 Sept 2016: EDTNA/ERCA, Valencia, Spain: edtnerca.org

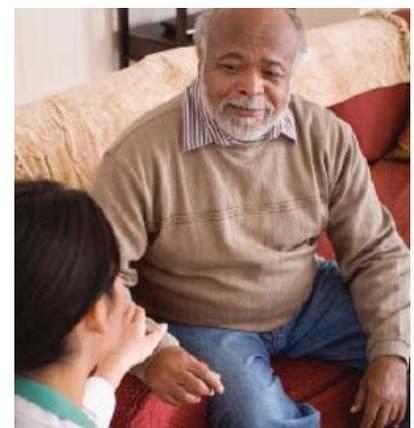


Practice Updates

CKD & Cognition

Attention is currently being turned to CKD and cognitive impairment, possibly fuelled by the widespread recognition that the prevalence of dementia is increasing. In 2012, a meta-analysis including 54,779 patients by Etgen et al., found that CKD was an independent risk factor for cognitive impairment. The odds ratio was 1.65, CI 1.15-1.68, ($p < 0.001$). Another meta-analysis suggests that the rate of incident cognitive decline has an odds ratio of 1.39, CI 1.15-1.68 ($p < 0.001$) for those with CKD compared to the normal population.

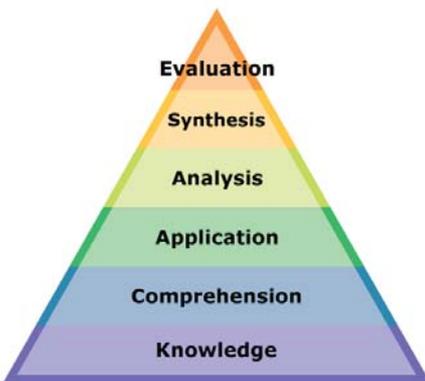
A further review by Etgen in 2015 highlighted current pathophysiology knowledge and discussed proven anatomical changes to the white matter of the brain. An association between anaemia, a lower eGFR and sleep deprivation were also associated with increased severity of cognitive decline. There were no discussions regarding the dialysis type and level of cognitive functioning, but it had been found that transplantation can ameliorate some of the cognitive decline. No clinical interventions have yet been clearly proven but Vitamin D, correction of anaemia and improvement in sleep quality show positive signs. Currently in Queensland, research is being undertaken to measure cognitive functioning long-term in patients on haemodialysis. However, it would appear there is a lot of research still to be done in this space on an issue that impacts widely on quality of life.



Conference Updates

ISPD (International Society of Peritoneal Dialysis)

The ISPD Conference was held in Melbourne, March 2016, with 1400 delegates. Three days of presentations by eminent specialists and too many posters to read kept everyone busy. PD is still dominated by the concerns regarding peritonitis, although the improvements in rates over the last decade are impressive. Changes in practice regarding use of intra-operative antibiotics, treating nasal staph carriers, new connection systems, bio-compatible fluids, structured training, good exit-site care, anti-fungal agents and a determination to ensure that guidelines are adhered to were positive contributing factors.



Wide variance in peritonitis rates does still exist, both world-wide and within Australia. In the USA, 70% of peritonitis is cured permanently with 4% leading to death and the remaining people either having a recurrence, repeat or relapse.

Teaching techniques still attract a lot of attention and the key factors emphasised for successful programs were:

1. Use of adult learning principles (author- Knowles) - where the nurse facilitates relevant learning experiences, and adaptation for learning styles.
2. Use of health literate materials (lots of images).
3. Formalized feedback (author- Bloom) that asks questions, encourages talking by patients and is mindful that patients both need to remember and understand. Length of training was not considered relevant, but competence in theory and practice and ongoing support was.

International ISPD Congress 2018

The next International Congress of the ISPD will be held in Vancouver, Canada in 2018.

Health Professional Groups

Trends for PD therapy - ISPD view

Biocompatible fluids and Icodextrin continue to be discussed and it now seems to be accepted that both are a useful adjunct to PD therapy. Nephrologist or radiographer placed catheters, APD, tailor-made regimes and the use of technology to support remote monitoring appear likely to be the next trends that will become standard for PD.

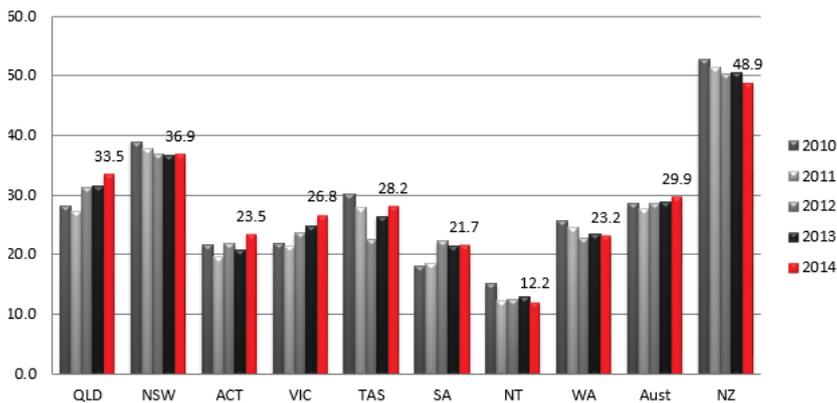
These more technical aspects are being matched with quality of life factors such as reducing the burden of dialysis to ensure the best outcomes on many fronts for patients and this means not just targeting the 'right numbers'. At the other end the scientists are desperately trying to understand the physiology of the peritoneal membrane in the hope of finding the magical factor that will extend physical time that someone can do PD.

Quick facts

ANZDATA: December 2014

- Number of people on dialysis: Australia -12,091 (up 3%), NZ - 2,678
- Number of people with transplant: Australia - 10,143, NZ - 1,648
- Rate per million being treated for ESKD: Australia - 947, NZ - 958, NT, 2,669 (Increases are about 5% per million population in the NT, where rates are up by 62% per million)
- Transplant now accounts for 45.6% of those undergoing treatment for ESKD

Diabetes is the primary renal disease for 70% of Indigenous people who started dialysis in 2014.



Rate of home dialysis: 30% (up 1%)

- APD now 13.2% (up 0.9%)
- CAPD now 7.2% (down 0.1%)
- HHD 9.4% (up 0.1%)

Queensland has now surpassed NSW for the highest rate of HHD (12.4%) in Australia. NSW however has the highest rate of PD (25.4%). NZ continues to have the highest home rate overall but still shows a slight downward trend. Satellite dialysis now accounts for 38% of treatment for ESKD, down from a high of 41% in 2011.

ANZDATA Reports

Visit www.anzdata.org.au for a wide range of reports covering all areas of renal replacement therapy including graphs and tables that you can download.

Upcoming Events

Kidney Health Week (22-28 May)

This year's theme 'I Kidney Check' focuses on encouraging Australians to care about their own kidney health. We welcome everyone to get involved with the prevention, detection and support of kidney health. Visit our website <http://kidney.org.au/connect/events/kidney-health-week> and find links to our:

- I Kidney Check Gallery (you can become part of our gallery)
- Ideas for events to raise awareness that you can host
- Information about our primary care awards
- Free resources
- Media campaign. #KHW16

Advocacy

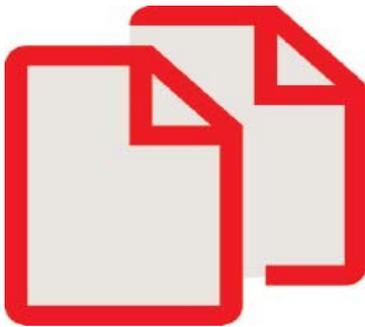
Election Time!

Kidney Health Australia has developed an election platform, which we have called a National Action Plan. This plan includes a 'Checklist for Change', which we will highlight on social media under #kidneycause.

Case studies and key points of the National Action Plan will be highlighted, including:

- early detection
- living organ donation
- kidney disease in Aboriginal and Torres Strait Islander communities
- need for a national strategy for kidney disease and support for dialysis.

State of the Nation report and National Action Plan available from our website www.kidney.org.au



National Chronic Disease Inquiry Lands

In October last year, KHA was asked to appear in front of the House of Representatives' Standing Committee on Health's Inquiry into Chronic Disease Prevention and Management in Primary Health Care. That Committee has presented its final report to Parliament, with recommendations and a chapter specifically on CKD. This contributed to two key recommendations for better early detection of kidney disease. See below.

Would you like to contribute to our advocacy...

If you, your staff or your patients have any issues that you think require advocacy contact: advocacy@kidney.org.au

Recommendation 6

... Australian Government examine the inclusion of an integrated health assessment check for cardiovascular, kidney disease risk and diabetes as per that developed by the National Vascular Disease Prevention Alliance, where a patient does not already qualify for an existing assessment and the treating practitioner suspects they are at risk of these chronic diseases.

Recommendation 12

... Australian Government examine the current Practice Incentives Program with the aim that it be expanded to include programs for breast, bowel and skin cancer screening, as well as the Integrated Health Check developed by the National Vascular Disease Prevention Alliance; and That these programs, as well as the existing Practice Incentive Programs, be evaluated and measured to identify improvements to management of chronic disease.

We need your help!

National Chronic Disease Framework

Kidney Health Australia has been advocating the need for an effective national strategy for chronic disease and kidney disease specifically. Department of Health in Canberra has released a draft for public consultation:

https://consultations.health.gov.au/population-health-and-sport-division/national-strategic-framework-for-chronic-condition/consult_view

While the report is comprehensive in its current form, it doesn't mention kidney disease specifically. The public consultation is a chance for your say to support KHA's advocacy, and highlight the importance of tackling kidney disease!



Advocacy

Federal Budget – some wins for kidney disease

The Federal Budget has been delivered and there were some wins for those in the kidney sector, and for our ongoing efforts to avoid increases in kidney disease.

If anyone has any queries relating to the budget or any of the above, we are always happy to take questions or comments – so feel free to drop us a line on advocacy@kidney.org.au.

Would you like to contribute to the National Chronic Disease Framework...

If you would like to comment on the Framework, please respond via the online survey [this link](#) by Wednesday 22 June.

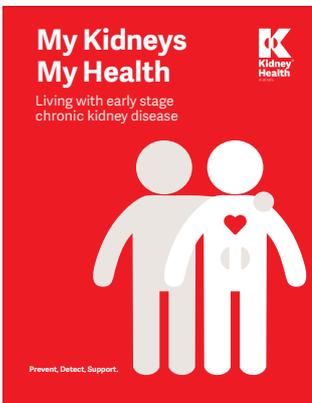
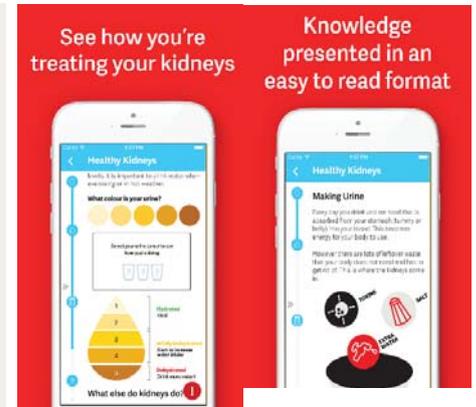
Key points in the budget that affect those with kidney disease:

- Elements of live organ donation are now under the Organ and Tissue Authority
- Recognition of the importance of tackling kidney disease
- Communication about the paid leave scheme for living organ donors to be managed by government rather than Kidney Health Australia
- Activity Based Funding (ABF) to be made the basis for Commonwealth health funding (including dialysis)
- Tobacco tax four more 12.5% annual increases, (cigarettes \$40 a pack by 2020)
- \$5.3m extra to promote, monitor and evaluate the Health Star Rating food labeling system
- A Practice Incentive Payment scheme for quality service delivery to be introduced

Educational Resources

Educational interventions and CKD outcomes

Lopez-Vargaz et al. (2016) have conducted a systematic review on educational interventions for CKD. 26 studies (12 trials, 14 observational studies) involving 5,403 participants were included. Overall they found success where there was a program to support patients to change behaviours. This should be something to strive for if resources allow.



“Characteristics of effective interventions included:

- teaching sessions that were interactive and workshops/practical skills (13/15 studies)
- integrated negotiated goal setting (10/13 studies)
- involved groups of patients (12/14 studies)
- their families (4/4 studies)
- a multidisciplinary team (6/6 studies)
- had frequent (weekly [4/5 studies] or monthly [7/7 studies]) participant/educator encounters.”

Other recent reviews of literature have found that most patient information materials designed for people with CKD are pitched above the average patient's health literacy level there are few health literate written materials for CKD that support patients to take-control and change behavior. The recent release by Kidney Health Australia of the 'My Kidneys, My Health' handbook aims to address this gap.

Would you like to contribute....

If you have any suggestions or contributions for our newsletter please contact: homedialysis@kidney.org.au

New resource (images above)

My Kidneys, My Health

This new handbook released by KHA for those diagnosed with early CKD focuses on providing a basic understanding of kidney disease, the actions that can change outcomes and how to find support. Support includes Kidney Health Information Service (KHIS) freecall 1800 454 363, the TelEConnect service, Kidney Clubs and access to information.

The book includes patient stories to provide motivation and diagrams to assist understanding. It has also been recently released as a phone app, now available from the App Store for iTunes and Google Play Store; “My Kidneys My Health”. Details about how patients can obtain copies of the book can be obtained by visiting www.kidney.org.au/support/newlydiagnosed or by calling the KHIS freecall line 1800 454 363.