



Many Kidney Failure Patients Not Taking Advantage of Home Dialysis



According to a study appearing in an upcoming issue of the Clinical Journal of the American Society of Nephrology (CJASN), many kidney failure patients in Australia who could benefit from undergoing dialysis at home are being treated in hospitals and dialysis units. This is not only increasing costs for healthcare providers but also inconveniencing patients.

Home dialysis is more convenient for patients and can provide similar or better care than haemodialysis, which must be done in a clinic. Blair Grace, PhD (Australia and New Zealand Dialysis and Transplant Registry) led a team that investigated the links between socio-economic status and use of home dialysis (which includes peritoneal dialysis and home haemodialysis) in Australia, a country with universal access to healthcare.

The researchers analysed 23,281 adult patients who started dialysis in Australia between 2000 and 2011. Among the major findings:

- Patients from the most advantaged areas were 37% less likely to commence peritoneal dialysis and 19% more likely to use in-centre haemodialysis than patients from the most disadvantaged areas.
- Socioeconomic status was not associated with use of home haemodialysis.
- Rural areas were more disadvantaged and had higher rates of peritoneal dialysis, while privately funded hospitals rarely used home dialysis.
- Patients from the most advantaged areas were nearly 6-times more likely to use private hospitals than those from the most disadvantaged areas.

“We expected to find that patients with more education and financial resources were more likely to use peritoneal dialysis and home hemodialysis, as has been demonstrated in other countries,” said Dr. Grace. “Instead, we found that patients from socio-economically advantaged areas were less likely to use peritoneal dialysis and more likely to use in-center haemodialysis.”

It is unclear why private hospitals in Australia rarely use home dialysis, and why patients from advantaged areas are more likely to use private hospitals. “More research is required to determine if patients from advantaged areas choose private hospitals knowing they want to dialyse in center, or whether they attend public hospitals then get directed towards in-center dialysis,” Dr. Grace explained.

[The article, entitled “Socio-Economic Differences in the Uptake of Home Dialysis,” can be read in full at the society's website.](#)

Source: [American Society of Nephrology](#)

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