

Why change hemodialysis ?



UK health costs

- ❖ 0.04% population Rx by HD
- ❖ 2-3% health care budget

UK 5 yr survival

- 54% colon cancer
- 46% haemodialysis
- 44% ovarian cancer

UK NHS

(socialist health care by UK Government ?)

- ❖ free health care at point of delivery
- ❖ health care according to patient needs

- ❖ rationing of health care
- ❖ treatment of population vs individual
- ❖ value for money

QIPP, CKD and Primary Care



- Quality- UK- NICE guidelines/QOF
 - blood pressure
 - cholesterol
 - diabetic care
- eGFR screening
 - introduced 2007
- Primary care for CKD 2/3
 - unless rapid decline in GFR

Primary and secondary care partnership

Prevention

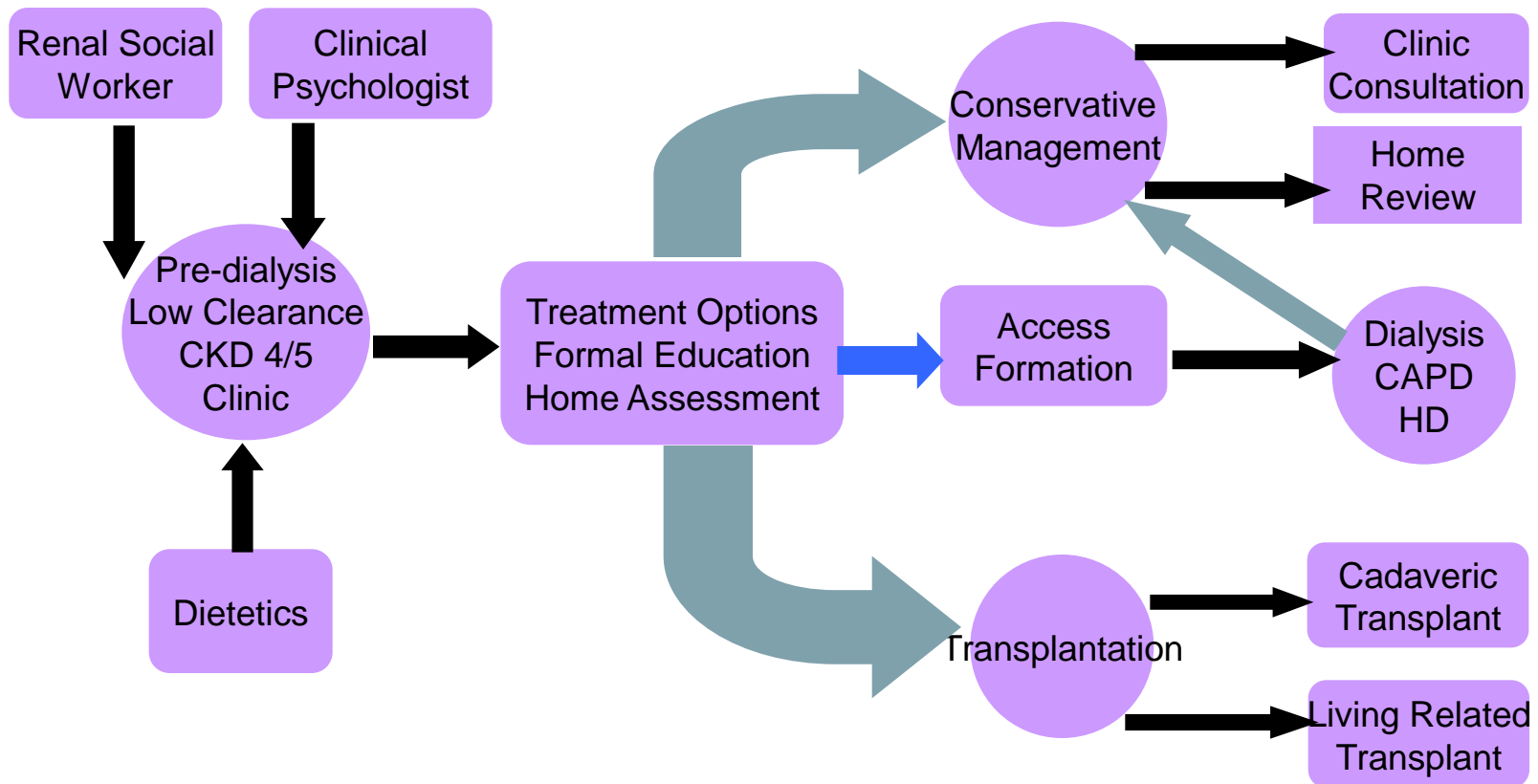


Danger !!!

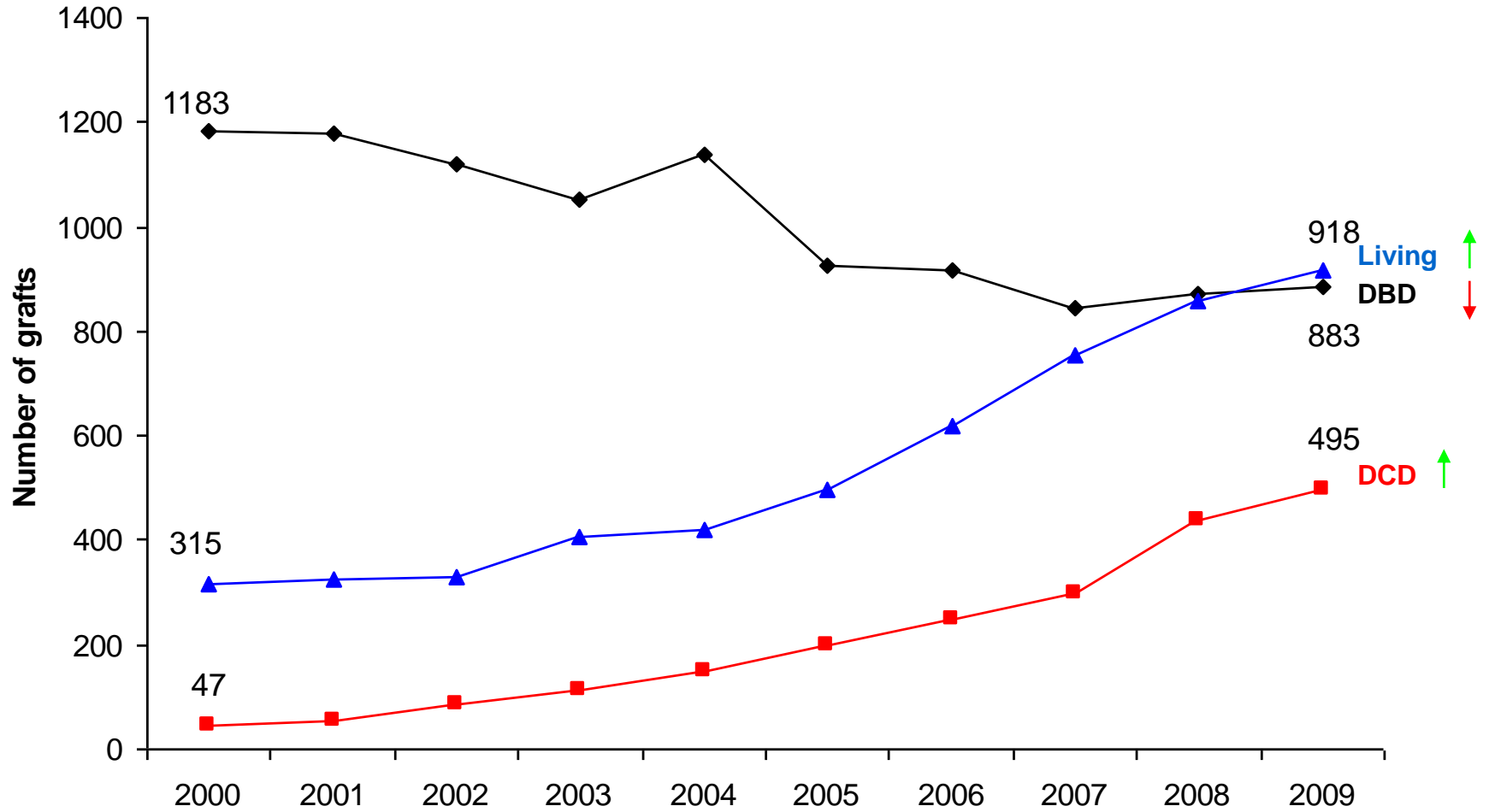
Screen: high risk groups/NHS Health Checks
Reduce: rate of progression
Outcome: fewer cardiovascular events/deaths
fewer stage 5 CKD (dialysis)
fewer unplanned dialysis starters

Identification, risk stratification, monitoring, management

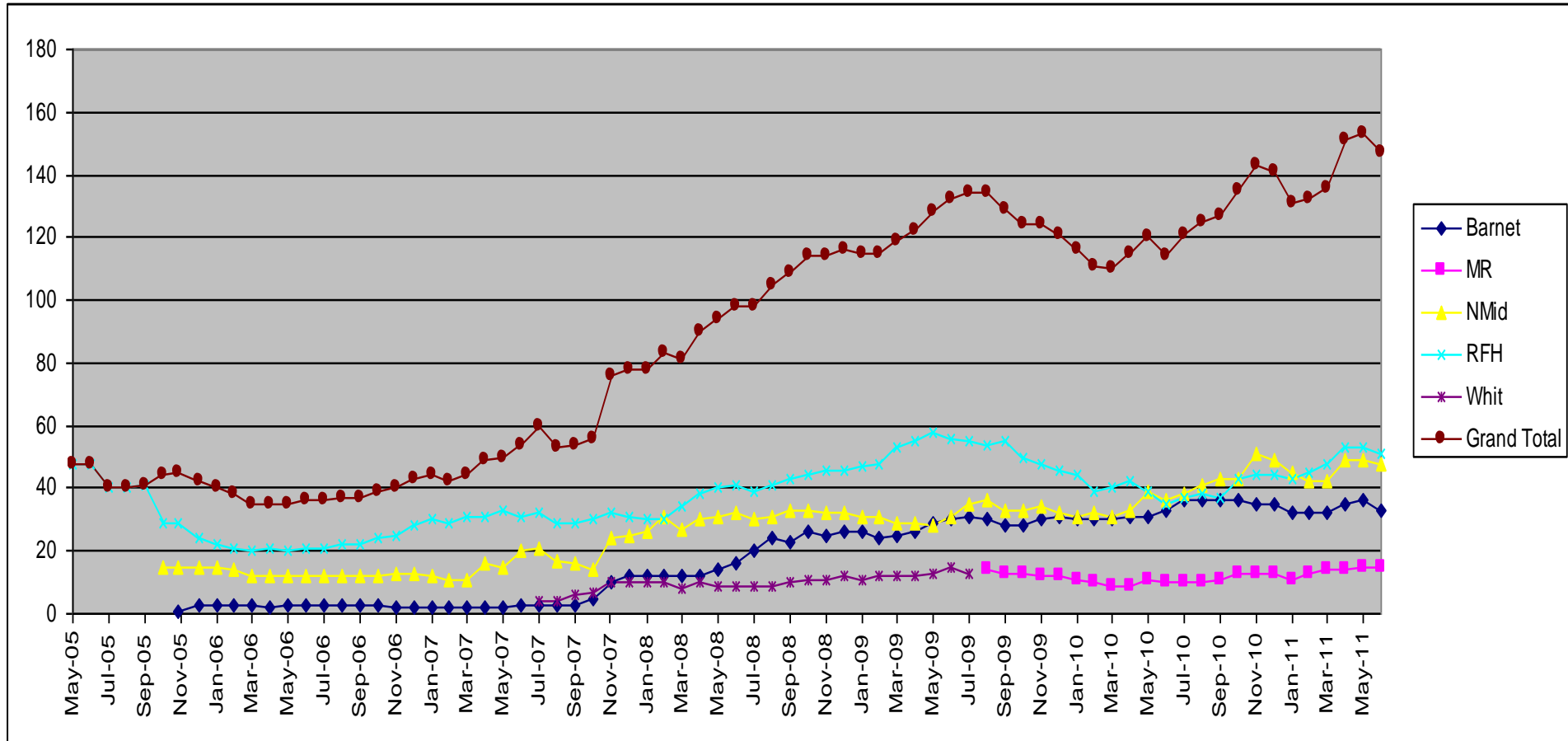
Patient Pathway : CKD stage 5



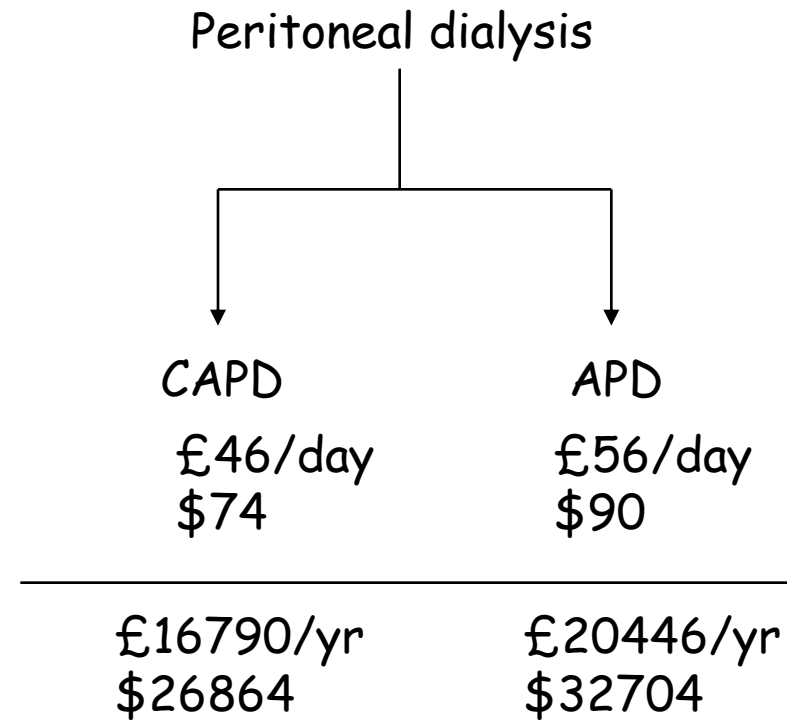
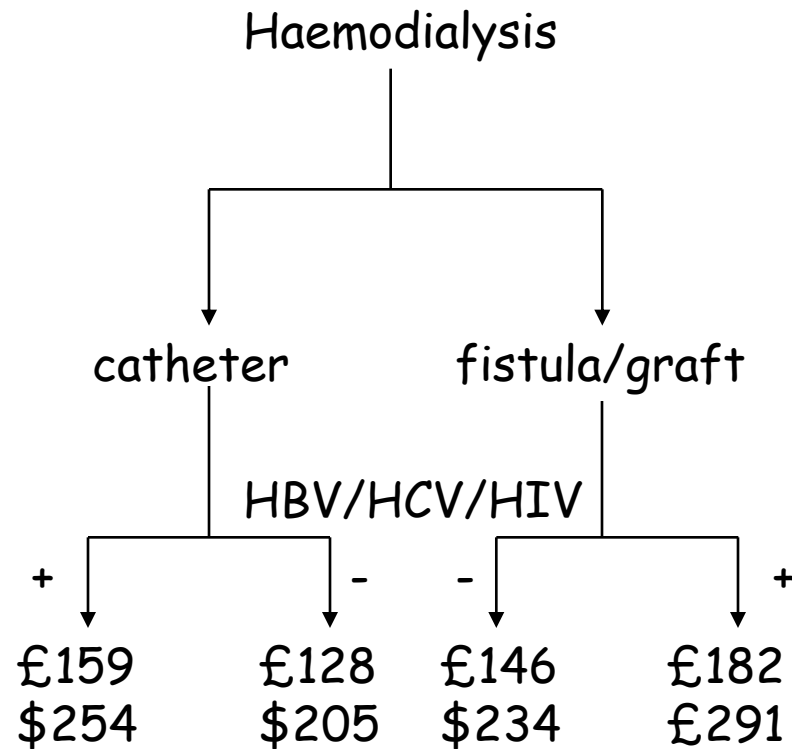
UK Adult kidney only transplants activity 2000-2009



CKD patients opting for conservative care



UK tariffs for dialysis



Price per session - same for home/satellite/hospital

£19968	£22776	- 3 x wk/year
\$31954	\$36442	

Expected growth in Renal Services



- 5 year review of expected growth in Renal Services
 - Needs Assessment: risk stratification of population groups
 - Demand based assessment - 5% declining
 - Increase in transplantation (live and cadaveric)
 - Increasing maximum conservative management
 - Increasing utilization of Home Therapies (25% :)

Summary of UK policy for CKD



Primary Care - community based

Screening & Prevention

- annual health checks over 50yrs
- target at risk populations
- manage cardiovascular risk

Hospital Care

CKD stage 5

- transplantation
 - ❖ living donor, deceased donors
- increased planned initiation of dialysis

Joint Care

CKD stage 5

- conservative care
- end of life care