



Title Dialysis in Chronic Renal Failure – A Health Technology Assessment

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Aim

To investigate whether the number of patients with chronic renal failure in outgoing dialysis can be increased with a positive result.

Conclusions and results

The survival rate for Danish peritoneal dialysis (PD) patients appears to be superior for the first 1.5 years except in diabetes patients aged >55 years. There is a potential to increase the number of patients on outgoing dialysis from the present 30% to 45%. This places greater demands on patients having the necessary information and being allowed to help choose the treatment method. However, it is important to emphasize that patients are not to be forced into outgoing dialysis. Clinical contraindications and strong social factors can be reasons for patients preferring chronic hemodialysis (CHD). Furthermore, the report indicates several organizational challenges if the outlined growth in the proportion of patients is to be managed. Additional patients in outgoing treatment may result in a cost-saving potential of approximately 68 million Danish kroner.

Recommendations

- Increased effort to have general practitioners and relevant hospital units refer patients with progressing chronic renal disease in the early stages of the disease
- Improved preparation of the patient for dialysis treatment with clarifying information about dialysis methods
- Guidelines for start of dialysis and subsequent dialysis method
- Better possibilities of assistance at home for automated peritoneal dialysis (APD)
- Clarification of the economic responsibility concerning assisted APD
- Exchange of knowledge and development of holistic nephrologic competence for nurses

- Joint awareness and strategies in the entire nephrologic area
- Prioritize lower time consumption in dialysis and increase freedom and flexibility for patients.

Methods

The analysis comprised literature reviews and interview studies with patients and staff and includes numbers from Danish registries for patients with chronic renal failure. A health economic assessment was performed for the various forms of dialysis and different scenarios in outgoing dialysis.