Introduction

Autosomal Dominant Polycystic Kidney Disease (ADPKD) is the 4th leading cause of end-stage renal disease (ESRD) 1.

In recent years, there has been a paradigm shift in the management of ADPKD, including novel biomarkers of disease progression such as total kidney volume (TKV), refined blood pressure (BP) targets2, and repurposed drugs such as Tolvaptan3.

Tolvaptan was approved for use in Canada in 2015 and it has become available for use in British Columbia (BC) in 2016.

Objectives

To identify current practice patterns and familiarity with new evidence based ADPKD management tools in BC
To identify areas indicated by the clinicians that may benefit from future development of educational tools and resources to standardize care in BC

Methods

Objectives

Survey consisted of multiple-choice questions regarding:
- Clinician demographics
- Sources of information regarding ADPKD care
- Self-identified needs for optimal management of ADPKD
- Types of renal prognostication tools used
- Imaging test and frequency of follow-up imaging
- Blood pressures targets
- Understanding of Tolvaptan utility

Survey consisted of multiple-choice questions regarding:

- Survey locked for statistical analysis

August 2016

Response rate for statistical analysis

Survey distributed in April 2016

Response rate for statistical analysis

Survey for statistical analysis

Survey locked for statistical analysis

Conclusion

Large variation in practice patterns, comfort level, and familiarity with new ADPKD management tools

These results identify opportunities for targeted education and tool development for standardization of care in management of ADPKD in BC.

References

6. Canadian Expert Consensus” CJKHD (96%) Pharmacological Management of Autosomal Dominant Polycystic Kidney Disease: A Canadian Expert Consensus” CJKHD (96%).