

ESTABLISHING AND MAINTAINING HIGH RATES OF HOME DIALYSIS THERAPIES IN BRITISH COLUMBIA WITH A SYSTEMATIC INTEGRATED APPROACH

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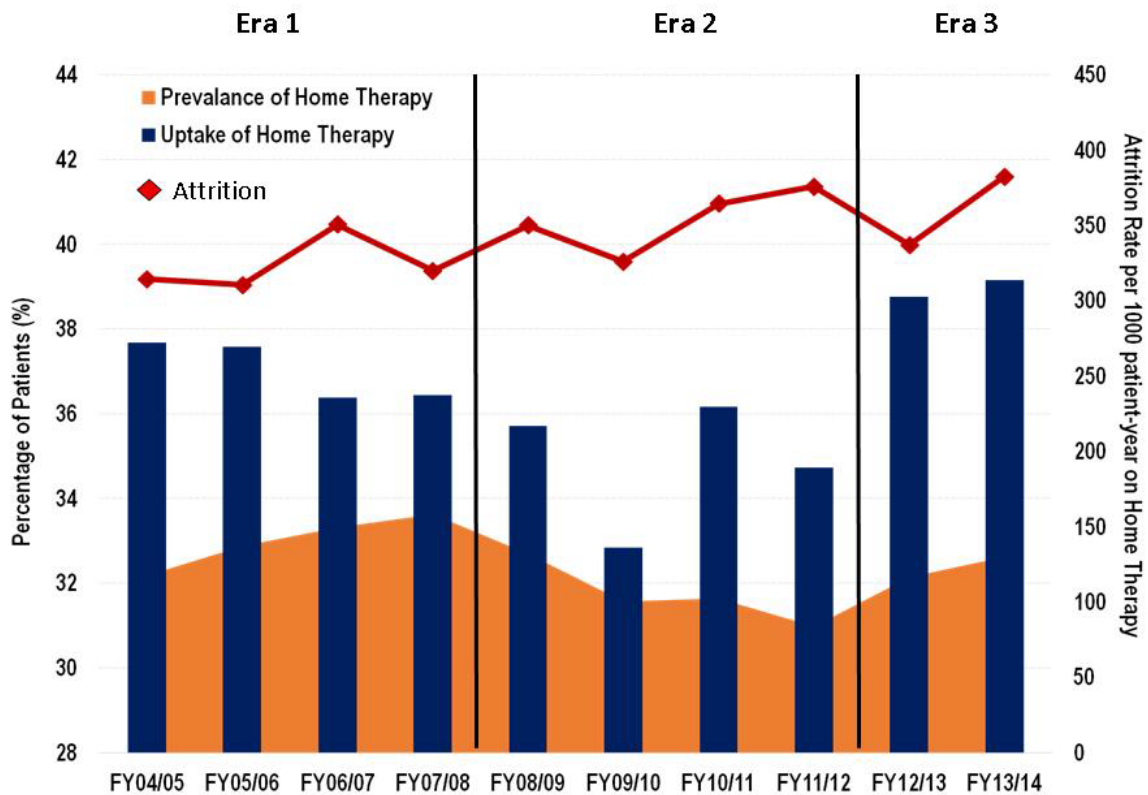
BACKGROUND: Home Therapies (HT) including Home Hemodialysis and Peritoneal Dialysis are of clear benefit both to the individual and the healthcare system. Despite the purported benefits of HT, the prevalence both in Canada and internationally is lower than expected. The increasing ESRD population as well as increased age, frailty and co-morbidity pose a particular challenge.

OBJECTIVES: To describe the results of a systematic approach that demonstrates successful maintenance of a large HT program in one Canadian Province.

METHODS: Many strategies have been implemented in BC over the past decade to address both intake to HT and attrition. Effects of these interventions on HT prevalence were compared over 3 different eras (2004-2007, 2008-2011, 2012-2014).

RESULTS: British Columbia successfully maintained the highest HT rates in Canada with 30-33% prevalence over the past decade (see Figure 1). Initial strategies focused mainly on improving uptake in Era 1 but strategies to decrease attrition were introduced in Era 2 due to increasing technique failure. The most recent Era showed further growth of intake with stabilization of attrition as a result of these interventions.

Figure 1. Prevalence of Home Therapies in BC relative to uptake and attrition



CONCLUSIONS: Multi-pronged intervention and a systematic Provincial strategy can lead to improved HT prevalence with benefits for the patients, providers and payers.