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Strategies to enhance PD penetration

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Strategies to enhance peritoneal dialysis penetration

- **Trend in PD Uptake across the Globe**
 - Despite an increase in the number of patients with kidney failure requiring dialysis, the proportion of patients receiving peritoneal dialysis has been static or declining across the world.

This trend is surprising as peritoneal dialysis is a home-based dialysis modality which confers flexibility, simple delivery and cost effectiveness.

Potential Barriers to PD as treatment modality

- Barriers to PD uptake as a therapy may be several including availability/accessibility, cost, adverse patient outcomes or others such as physician bias.

Availability:

- According to the recently completed Global Kidney Health Atlas endorsed by the International Society of Nephrology in 2019, there are almost 20% of countries whereby PD is not available as a treatment modality for patients with kidney failure.

These countries are most commonly located in Africa and also among Low Income Countries.

Accessibility:

- Even among countries where PD is available as a treatment option, most often, only 1-10% of patients new to dialysis are treated using PD (96% of countries).

This trend highlights significant issue in missed opportunities for PD penetration.

Cost:

- Although PD is often considered to be the most cost-effective form of dialysis. This is not universally the case across countries, especially among low and low middle income countries.

Cost of PD:HD is highly variable.

In countries where PD is more costly, this has been regularly attributed to cost of import tariff/transport where PD solutions are not locally produced or prescribing pattern/incentive in place for remuneration or healthcare service delivery model (e.g. private vs. public – e.g. in Australia where private sector are not remunerated for PD)

Outcomes:

- Standardised Outcomes in Nephrology – PD has identified 3 PD-specific critical outcomes of importance prioritised by all stakeholders in PD including patients. These include PD infection, PD failure and Life Participation.

Strategies to enhance uptake

- Strategies for implementation need to be multi-pronged:
 - Targeting outcomes that are important to patients:

- Decrease in PD infection e.g. pd peritonitis

Prolonging PD longevity

- Through high quality PD prescribing

Care delivery by dedicated team

Reduce the risk of burnout through strategies including incremental PD and assisted PD

Increase in ability to participate in life-related activities – incremental PD

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Increase in accessibility through:

- Advocacy to improve availability

Capacity of workforce

Cost efficiency

Scope of PD delivery – e.g. urgent start peritoneal dialysis

Summary

Understanding the enablers and disablers in PD is critical to achieve an increase in PD uptake.

Strategies can be maximally effective when we deliver multi-pronged interventions that are implemented at individual and centre levels supported by increased infrastructure/resources.

We need to consider the mechanisms that:



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- - Improve / meet the goals of patients – e.g. life participation
- Decrease the burden of therapy – by improving patient-important outcomes and reducing burnout
- Increase scope of therapy to broaden its utilisation
- Address the issues that are ‘real’ to patients – such as cost of therapy