

# COMPARISON OF HAEMODIALYSIS (HD) AND CONTINUOUS PERITONEAL DIALYSIS (CAPD) DEATH RATES.

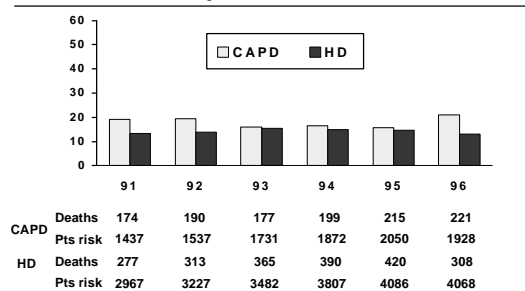
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The death rates per 100 patient years at risk were calculated for all dialysis dependent patient deaths in Australia and New Zealand during the period 1991-1995. Death was attributed to the dialysis method at the time of death; all causes of death were included. In Australia the overall death rate was 15/100 patient years; HD 14.6, CAPD 15.8 in 1995. The CAPD rate fell in 1993, both diabetics and non diabetics and remained close to the HD rate. Age group analysis (45-64 years) of non diabetics showed CAPD rate fell continuously from 1991 (17.1) to 1995 (7.3), while the HD remained constant 1991 (12.8) to 1995 (11.2). Further analysis will be required to confirm the lower death rate of patients in this age group treated by CAPD.

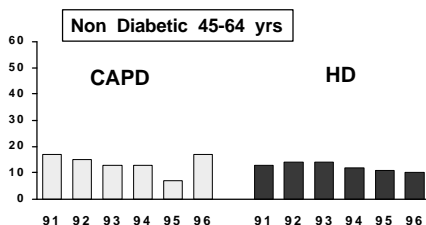
Allowance for HD deaths following transfer from CAPD and vice versa may clarify the difference in death rates. The likelihood of peritonitis fell markedly in recent years. Diabetic patient death rates were higher during HD treatment but often occurred in the first few months of treatment or following transfer from CAPD.

In New Zealand there has been a recent rise in the CAPD death rate in non diabetics (17.5) but not in diabetics (27.3). The middle aged group of non diabetics had a lower CAPD (16) than HD (18.5) death rate in the past two years. Changes in patient selection or peritonitis rate may have contributed to the adverse trend in overall CAPD death rate.

Annual Death Rate Per 100 Patient Years  
Mode of Dialysis Australia 1991-1996



Annual Death Rate Per 100 Patient Years  
Mode of Dialysis Australia 1991-1996



Annual Death Rate Per 100 Patient Years  
Mode of Dialysis Australia 1991-1996

