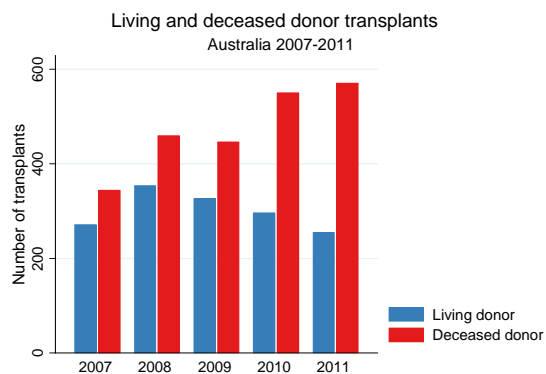
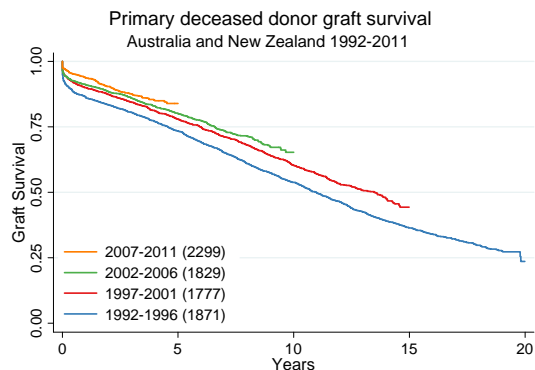




TRANSPLANTATION



The majority of transplants performed in Australia are from deceased donors. In recent years there has been a large increase in deceased donor rates. The majority of this increase is from donors after circulatory death (DCD). Conversely, living donor rates fell over the period 2008-11.



Transplant outcomes in Australia and New Zealand are excellent, and getting even better over time. In the above graph, graft failure includes both death and loss of function.



PUBLICATIONS

ANZDATA is the source of a large number of scientific and other publications. Some select recent publications are listed here. A more complete list is available on our website.

1. Grace BS et al. Transplantation rates for living- but not deceased-donor kidneys vary with socioeconomic status in Australia. *Kidney Int.* 2013 Jan;83(1):138–45.
2. Marshall MR et al. Home hemodialysis and mortality risk in Australian and New Zealand populations. *Am J Kidney Dis.* 2011 Nov;58(5):782–93.
3. Sparke C et al. Estimating the total incidence of kidney failure in Australia including individuals who are not treated by dialysis or transplantation. *Am J Kidney Dis.* 2013 Mar;61(3):413–9.
4. Thirugnanasambathan T et al. Repeated peritoneal dialysis-associated peritonitis: a multicenter registry study. *Am J Kidney Dis.* 2012 Jan;59(1):84–91.

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Australia &
New Zealand Dialysis
& Transplant Registry

The Australia and New Zealand Dialysis and Transplant Registry (ANZDATA) records the incidence, prevalence and outcomes of dialysis and transplant treatment for patients with end-stage kidney disease

COLLECTS

- Data on chronic dialysis and transplantation
 - Indicators of clinical process
 - Outcome Data

REPORTS

- Outcome of treatment
- Individual Hospital activity
- Australian and New Zealand data

PROVIDES

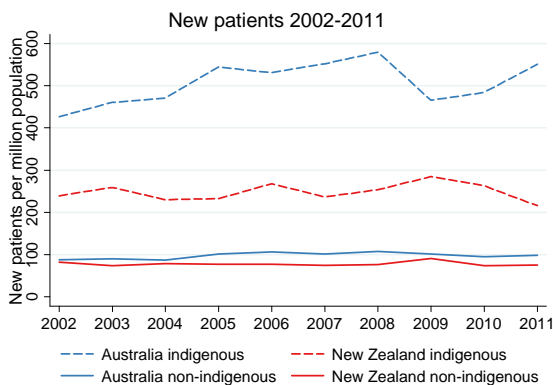
For widespread use of its data for Quality Assurance, Audits, Surveys, Service Planning and Research Projects



INTRODUCTION

This brochure provides an introduction to ANZDATA and includes data collected to the end of 2011, and reported in the 2012 Annual Report. The ANZDATA Registry collects information on renal replacement therapy (dialysis and transplantation) for end-stage kidney disease in Australia and New Zealand.

Much more information can be found at our website, including our Annual Report, data forms and dictionaries, list of publications and guidelines for requesting data.



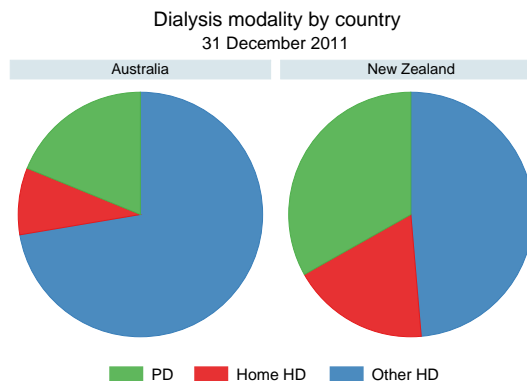
NEW PATIENTS

There were 2453 patients who commenced treatment for end-stage renal failure in Australia in 2011, a rate of 110 per million population. In New Zealand, the number of new patients commencing renal replacement treatment was 477, a rate of 108 per million of population. Rates of treated end-stage kidney disease are substantially higher in Indigenous than non-Indigenous populations in both Australia and New Zealand.

PREVALENT PATIENTS

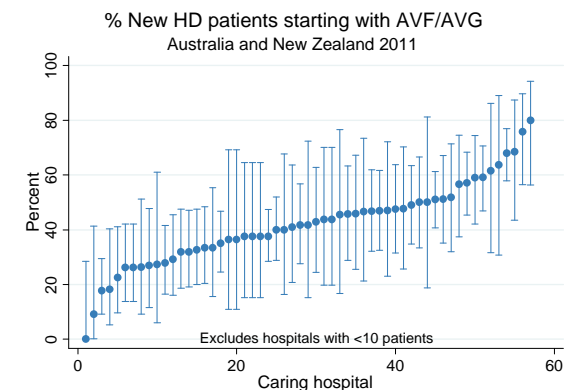
Australia Total		19933 (893)
No. Functioning Transplants		8935 (400)
No. Dialysis Patients		10998 (493)
Proportion Home		28%
Proportion Satellite HD		50%
Proportion CAPD/APD		19%
New Zealand Total		3869 (878)
No. Functioning Transplants		1488 (338)
No. Dialysis Patients		2381 (541)
Proportion Home		51%
Proportion Satellite HD		15%
Proportion CAPD/APD		33%

At the end of 2011 there were just under 20,000 patients receiving renal replacement therapy in Australia and nearly 4,000 in NZ.

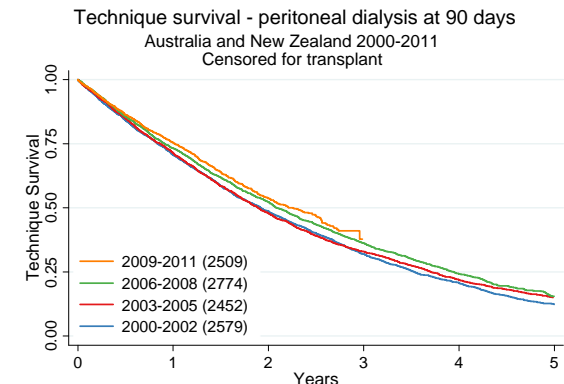


Australia and New Zealand have a strong focus on home dialysis, with 28% of Australian and 51% of New Zealand dialysis patients receiving dialysis at home.

DIALYSIS



Since 2011 ANZDATA has been reporting real-time and annual "key process indicators" (KPIs) for haemodialysis (HD) and peritoneal dialysis (PD). At present for HD we report the proportion of new patients starting HD with a fistula or graft. There is a large variation between treating hospitals.



A relatively large proportion of dialysis patients in Australia and New Zealand use PD. The main reasons for technique failure are patient preference, infective complications and death.