

SECTION F VASCULAR ACCESS FOR HAEMODIALYSIS

Details of vascular access used for haemodialysis for all hospital and home haemodialysis patients were collected during the SRR census week in May 2014.

1853 patients with established renal failure were being treated by haemodialysis, details of vascular access were available for 1803 (97.3%).

F1 Types of vascular access for haemodialysis patients May 2014		
Type of Access	Number	Percentage
Arteriovenous	1336	74.1
Fistula	1256	69.7
Graft	76	4.2
AV access – details not known	4	0.2
Central venous catheter	467	25.9
Tunnelled	437	24.2
Non-tunnelled	30	1.7
Total	1803	

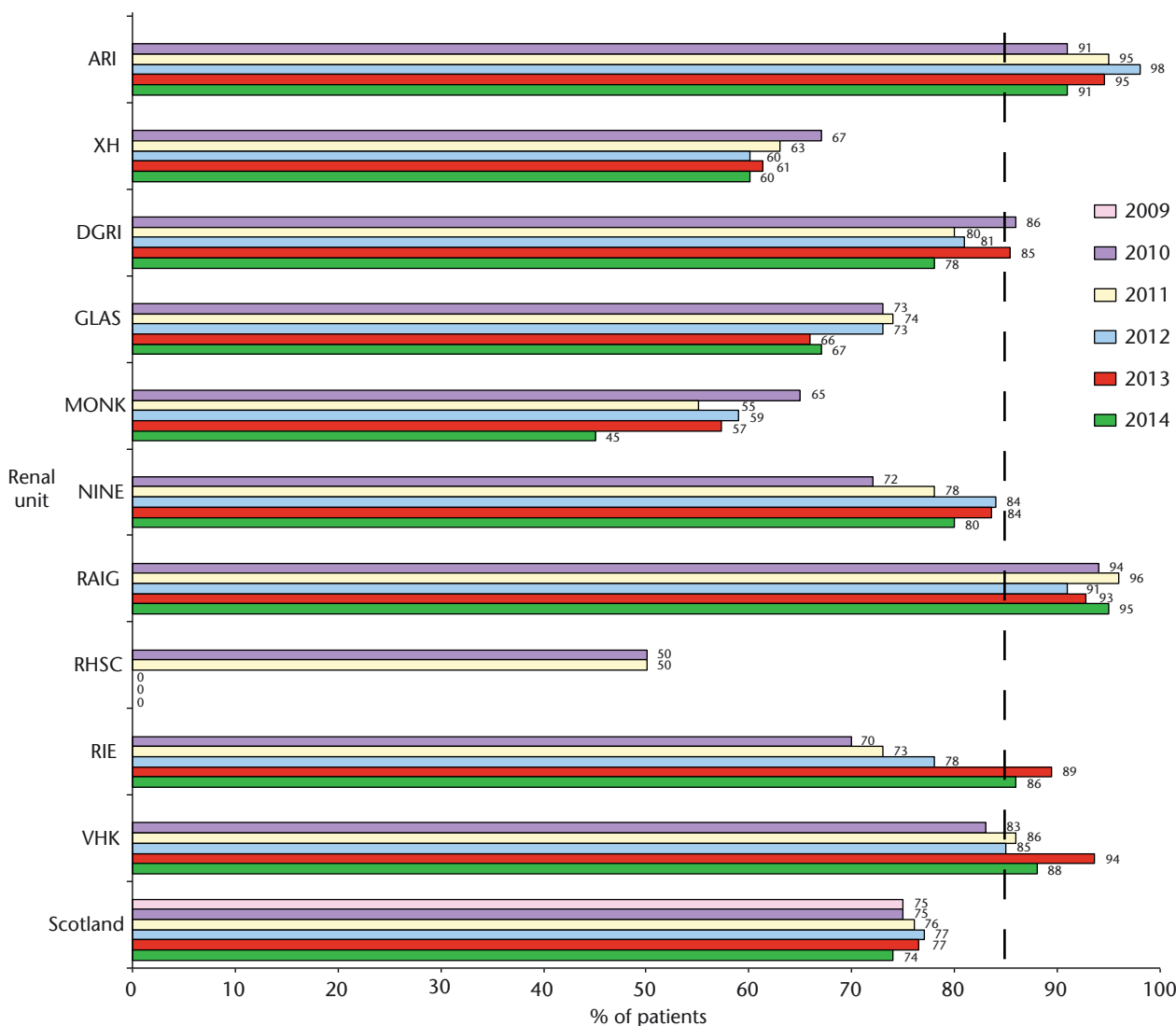
As in previous years, males were significantly more likely than females to be using AV access (78% v 69%; $p < 0.001$).

Age did not affect vascular access, there was no significant difference in prevalence of AV access between the age quartiles.

There were significant differences between diagnostic groups, patients with diabetic nephropathy being the least likely to have AV access ($p < 0.001$).

There were large, significant differences between renal units. Figure F2 shows the percentage of AV access in each unit for 2010-2014, and for Scotland from 2009.

F2 Percentage of haemodialysis patients with AV access by renal unit: Census results 2010 - 2014 and for Scotland 2009 - 2014

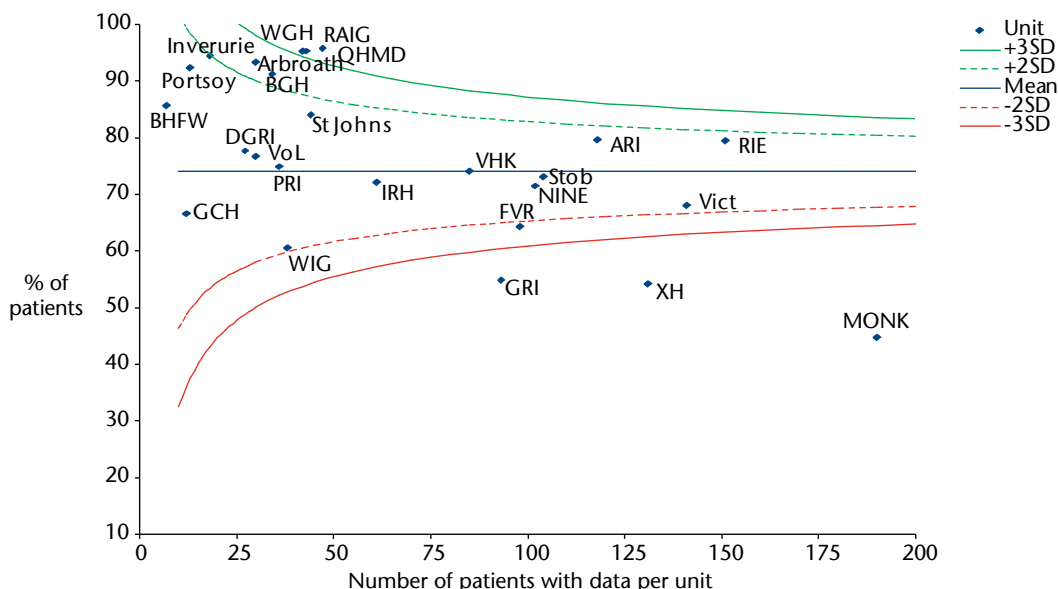


Rates of AV access (for patients with data submitted) in the adult units in May 2014 ranged from 45% to 95% (Chi square $p < 0.001$).

The Renal Association guideline suggests that 85% of all prevalent adult patients on haemodialysis should receive dialysis via a functioning arteriovenous fistula.

The renal unit previously based at QMHD moved to VHK at the end of 2011, those results are all now shown under VHK.

F3 Percentage of patients on hospital haemodialysis with AV access by dialysis unit May 2014



Balfour, G Bain, GH Elgin, P’head, St And, WI Hosp and Wick all had 100% prevalence of AV access and are not shown on the funnel plot to enhance clarity.

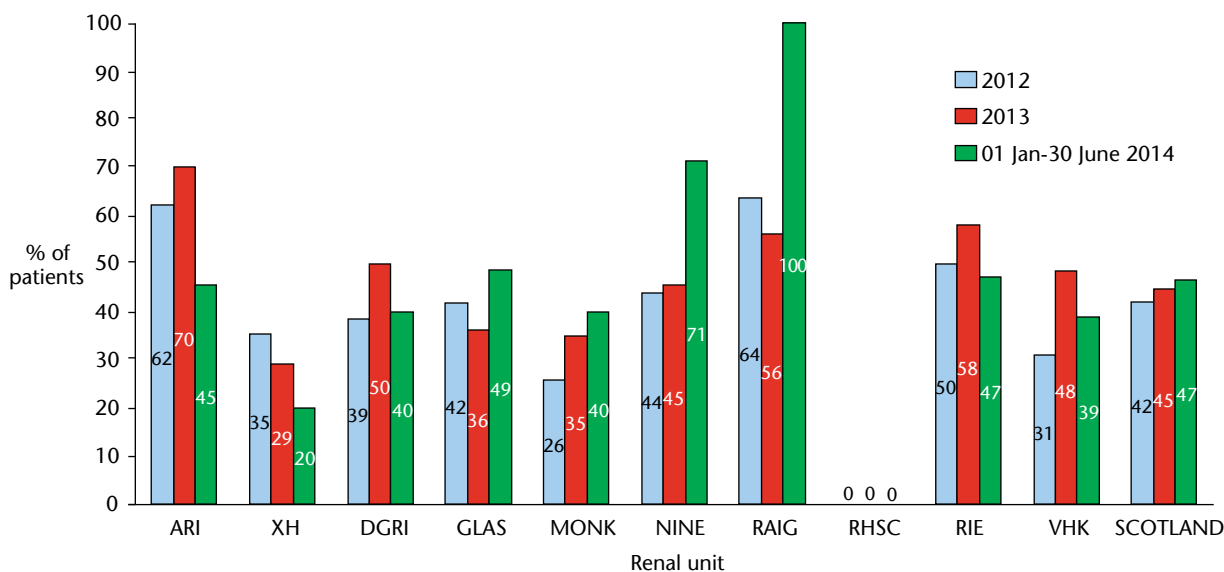
RHSC had no patients with AV access and similarly are not shown on the funnel plot.

Of the 57 patients receiving home haemodialysis during the census, information on vascular access was available for 54 (94.7%).

Of those with data, 51 patients were receiving dialysis via AV fistula (94.4%) and 3 via tunnelled line (5.6%).

Patients who had been on dialysis for less than a year were significantly less likely to be using AV access than those who had been on dialysis for longer (60% v 79%; $p < 0.001$).

F4 Percentage of patients with AV access for first haemodialysis by renal unit 01 January 2012 - 30 June 2014



The Renal Association guideline suggests that 65% of all incident adult haemodialysis patients should commence dialysis with an arteriovenous fistula.

The SRR has collected data about the access used for first haemodialysis for incident patients since the start of 2012.

There are no missing data.

In 2013 there were 398 incident adult haemodialysis in Scotland. 180 (45.2%) of these commenced dialysis with an AVF and 218 (54.8%) with a central venous cannula.

Between the 01 January 2014 and 30 June 2014 there were 211 incident adult haemodialysis patients. 99 (46.9%) patients commenced with an AVF and 112 (53.1%) with a line.

Data for RHSC is based on only 6 children over this period and all commenced HD with a line.