SECTION C SURVIVAL

C1 Survival analyses

C1.1 Proportion of patients starting RRT 1994 - 2013 surviving at one, two, five and ten years by age and primary renal diagnosis group													
Age group	Diagnosis group	1 year survival			2 year survival		5 year survival			10 year survival			
(years)	5 1	Number starting RRT (1994- 2013)	n	%	Number starting RRT (1994- 2012)	n	%	Number starting RRT (1994- 2009)	n	%	Number starting RRT (1994- 2004)	n	%
≥75	Unknown	683	433	63	652	289	44	549	81	15	357	7	2
	Diabetes	271	170	63	248	113	46	199	25	13	103	1	1
	Multisystem	743	429	58	708	293	41	597	79	13	359	7	2
	Interstitial	268	189	71	258	131	51	218	44	20	136	4	3
	Glomerulo- nephritis	207	130	63	193	87	45	155	28	18	99	8	8
65-74	Unknown	596	439	74	575	345	60	503	158	31	363	29	8
	Diabetes	586	422	72	560	303	54	446	84	19	288	7	2
	Multisystem	975	609	62	927	426	46	797	159	20	560	23	4
	Interstitial	438	354	81	412	281	68	364	137	38	236	27	11
	Glomerulo- nephritis	318	265	83	304	209	69	255	99	39	174	19	11
45-64	Unknown	426	353	83	412	300	73	359	192	53	260	77	30
	Diabetes	891	744	84	836	568	68	678	211	31	413	42	10
	Multisystem	701	522	74	679	429	63	583	230	39	402	85	21
	Interstitial	888	824	93	837	730	87	692	494	71	448	214	48
	Glomerulo- nephritis	596	546	92	569	486	85	466	314	67	327	150	46
20-44	Unknown	239	226	95	229	205	90	207	170	82	154	107	69
	Diabetes	414	376	91	398	324	81	333	208	62	214	92	43
	Multisystem	213	197	92	205	184	90	177	143	81	117	80	68
	Interstitial	558	546	98	533	511	96	469	416	89	314	245	78
	Glomerulo- nephritis	410	402	98	380	365	96	317	293	92	225	198	88
<20	Unknown	30	29	97	28	27	96	25	24	96	17	16	94
	Diabetes	1	-	-	1	-	-	1	-	-	1	-	-
	Multisystem		36	97	37	36	97	32	29	91	26	23	88
	Interstitial	151	147	97	146	141	97	130	121	93	77	68	88
	Glomerulo- nephritis	31	30	97	29	29	100	27	25	93	19	16	84
All ages	All diagnoses	10671	8418	79	10156	6812	67	8579	3739	44	5689	1545	27

7 patients with missing PRD Codes

Information on the inclusions and exclusions that are applied to survival analysis are detailed in the Summary of Data section of the report.

C1.2 Life expectancy for the general population of Scotland 2012-2014							
Age	Life expectancy males	Life expectancy females					
85	5.53	6.38					
75	10.54	12.11					
65	17.29	19.61					
55	25.32	28.13					
45	34.14	37.29					

Source: National Records of Scotland (NRS) life expectancy tables

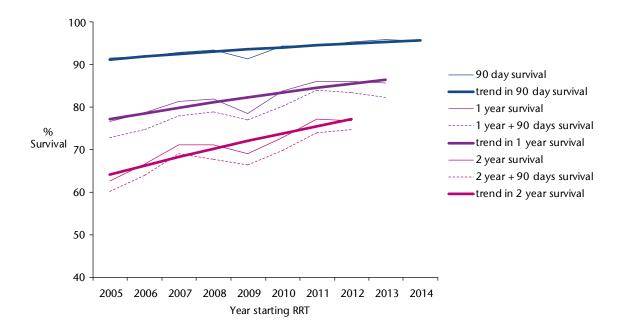
Life expectancy in years for the general population of Scotland in 2012-2014 by sex, at the exact age given, is shown in this table. This allows comparison with patients receiving RRT.

C1.3 Survival of patients by year of start of RRT 2005-2014								
Date starting RRT	% surviving 90 days	% surviving 1 year	% surviving 1 year + 90 days	% surviving 2 years	% surviving 2 years + 90 days			
2005	91.5	76.7	72.8	62.6	60.2			
2006	91.9	78.7	74.7	66.6	63.9			
2007	93.0	81.4	78.0	71.1	69.1			
2008	93.5	81.9	78.9	71.2	67.7			
2009	91.3	78.4	76.9	69.0	66.4			
2010	94.5	83.8	80.2	72.9	69.9			
2011	94.4	86.2	84.0	77.2	73.9			
2012	95.4	86.1	83.4	76.9	74.8			
2013	96.0	85.7	82.3					
2014	95.5	/		/				

Note: Censored patients are excluded from this table.

Patients with insufficient follow-up and those who recovered within 90 days or who were lost to follow-up within the relevant period have been excluded.





Trend in 90 days survival: year to year OR is 1.09 (95% CI 1.05 -1.13).

Trend in 1 year survival: year to year OR is 1.08 (95% CI is 1.05 - 1.11).

Trend in 2 years survival: year to year OR is 1.10 (95% CI is 1.06 -1.13).

There is a statistically significant trend of improving survival at 90 days, 1 year and 2 years after starting RRT.

C1.5 Proportion of patients starting RRT 2004-2013 surviving at 90 days and 1 year, by NHS Board area of residence

NHS Board	Number of	90 day	survival	1 year survival				
	patients	n	%	n	%			
A&A	435	406	93	355	82			
BORD	120	115	96	109	91			
D&G	174	156	90	138	79			
FIFE	455	422	93	368	81			
FV	308	293	95	257	83			
GG&C	1242	1144	92	1000	81			
GRAM	570	543	95	487	85			
HIGH	323	304	94	269	83			
LAN	635	605	95	536	84			
LOTH	721	666	92	565	78			
ORKN	23	22	96	20	87			
SHET	16	14	88	12	75			
TAY	512	468	91	396	77			
WI	27	26	96	22	81			
SCOTLAND	5561	5184	93	4534	82			

C2 Survival of patients aged 45-64 when starting RRT over time

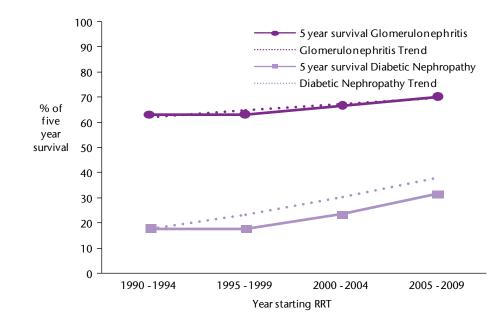
The trend of survival was calculated to investigate whether survival has improved over time for patients in two diagnosis groups, glomerulonephritis and diabetic nephropathy, and in a single age group, 45-64 years.

Data relating to patients starting RRT 2012 onwards are excluded to ensure a minimum available follow up period of 2 years.

C2.1 Proportion of patients surviving at 1, 2, 5 and 10 years from starting RRT 1990-2012 when aged 45-64 in the glomerulonephritis and diabetic nephropathy PRD groups 5 year 10 year Year **PRD Group** Number 1 year 2 year starting of survival survival survival survival RRT **Patients** % % % % Glomerulonephritis 1990-Diabetic Nephropathy Glomerulonephritis 1995-Diabetic Nephropathy Glomerulonephritis 2000-Diabetic Nephropathy Glomerulonephritis 2005-Diabetic Nephropathy Glomerulonephritis 2010-Diabetic Nephropathy

For those aged 45-64 who started RRT between 1990-2009, 34% (190/554) in the glomerulonephritis group died within 5 years of beginning RRT compared with 76% (580/762) in the diabetic nephropathy group.





Glomerulonephritis - there is an increasing trend in survival which is statistically significant (OR 1.12, 95% CI 1.04 to 1.21, p = 0.03).

Diabetic Nephropathy - there is an increasing trend in survival which is statistically significant (OR 1.42, 95% CI 1.22 to 1.65, p<0.001).

C3 Comparison of survival by NHS Board area of residence providing first RRT using Cox regression

The standardised mortality ratio (SMR) is the number of deaths in every health board or unit divided by the number of expected deaths in that health board or unit.

This makes the SMR a measure of case-mix adjusted mortality (hence the label 'standardised').

The expected number of deaths is based on a logistic regression comprising patient's age, sex, SIMD and primary renal diagnosis group.

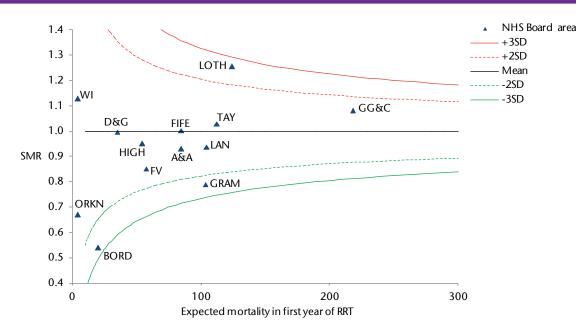
A SMR close to one means that the observed number of deaths is close to the expected number.

A SMR higher than one means that the observed number of deaths is higher than the expected number.

The units within the outer control limits (-3SD, +3SD) are considered equivalent and different only by chance.

The control limits are calculated via the Poisson probability distribution.

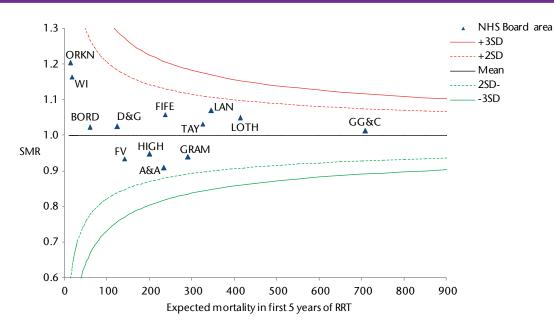
C3.1 One year standardised mortality ratio at 1 year for patients starting RRT 2004-2013 by NHS Board area of residence



All NHS Board areas fall within 3 standard deviations of the mean.

The mortality in first year of RRT for patients starting RRT in the ten years 2004-2013 was 18.5%.



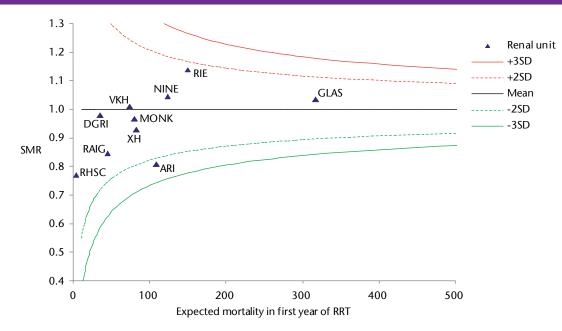


All NHS Board areas fall within 3 standard deviations of the mean.

The mortality in first five years of RRT for patients starting RRT in the ten years 2000 - 2009 was 57%.

Survival by renal unit providing first RRT **C4**

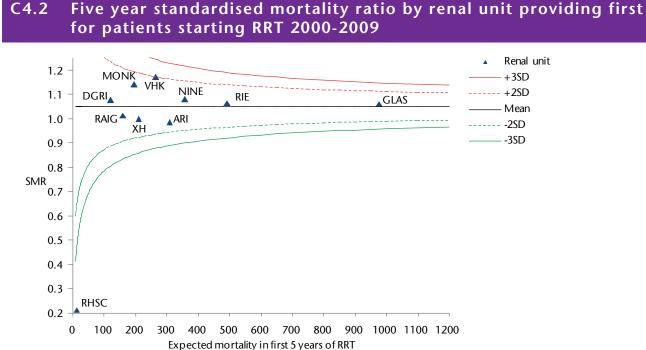
C4.1 One year standardised mortality ratio by renal unit providing first RRT for patients starting RRT 2004-2013



All units fall within three standard deviations of the mean.

Expected mortality is based on sex, age group, SIMD and primary renal diagnosis group.

The mortality in first year of RRT for patients starting RRT in the ten years 2004-2013 was 18.5%.



Five year standardised mortality ratio by renal unit providing first RRT

All units fall within 3 standard deviations of the mean. Expected mortality is based on sex, age group, SIMD and primary renal diagnosis group.

The mortality in the first five years of RRT for patients starting RRT in the ten years 2000 - 2009 was 57%.