

Section H VASCULAR ACCESS FOR HAEMODIALYSIS

The best form of vascular access is a native vessel arteriovenous fistula (AVF). Central venous catheters (CVC) are associated with a higher risk of bacteraemia and with a higher mortality.

A census of the vascular access used for haemodialysis for all hospital and home haemodialysis patients was carried out during the first week of June 2009.

The survey form is available on the SRR website at:

http://www.srr.scot.nhs.uk/About/SRR_census_day_HD_form_2009.pdf

The number of prevalent patients on haemodialysis on 01 June 2009 was 1848.

Details of vascular access were available for 1699 patients (92%).

There was no difference in gender and age distribution between patients with and without data.

However access data for those who started dialysis within 1 year of data collection were missing for 14.5% of patients compared with 6.5% missing data for those starting RRT prior to 01 June 2008.

H1 Types of vascular access for haemodialysis patients: June 2009		
Type of Access	Number	Percentage
Arteriovenous	1280	75
Fistula	1206	
Graft	58	
Other AV access	16	
Catheter	419	25
Tunnelled	385	
Non-tunnelled	34	
Total	1699	100

In April 2007 73% of patients on haemodialysis in Scotland had AV access, in April 2006 the figure was 76%. These figures represent the percentage of those for whom data were submitted to the SRR, not the overall haemodialysis population.

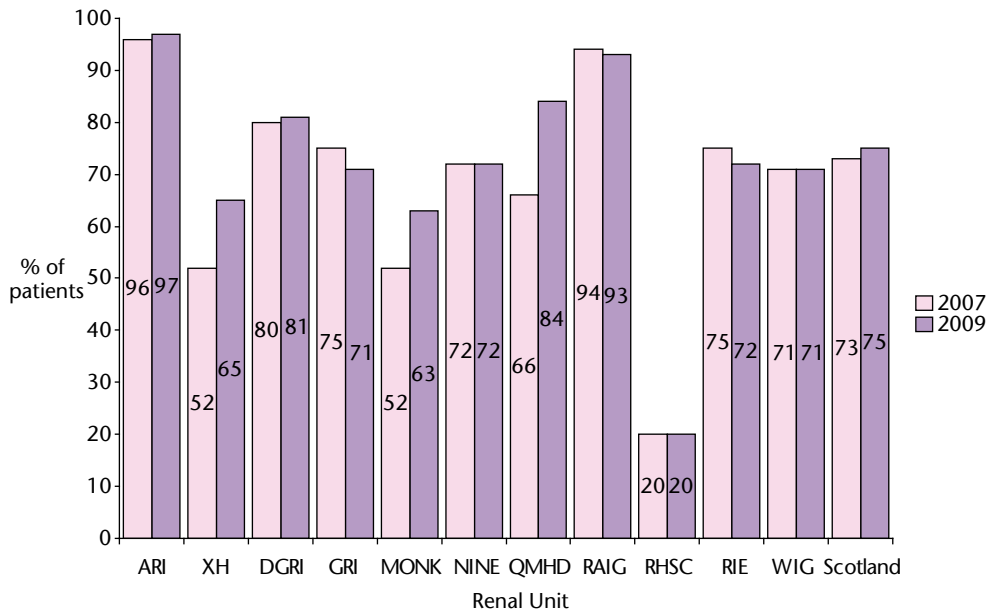
Males were significantly more likely to have AV access, 81% of men and 68% of women had AV access ($p < 0.001$ Kruskal Wallis).

The prevalence of AV access rather than CVC was not related to age.

When the association with PRD group was examined, patients with diabetic nephropathy and multisystem disease were least likely to have AV access ($p < 0.01$ Kruskal Wallis).

Patients who started renal replacement therapy (RRT) within the last year were significantly less likely to have AV access, 53% of patients starting RRT after 01 June 2008 had AV access compared with 73% of patients who started RRT prior to that date. If only patients with data submitted are considered, 62% of patients starting RRT after 01 June 2008 and 78% of those starting before then had AV access.

H2 Percentage of haemodialysis patients with AV access by renal unit April 2007 and June 2009



These figures represent the percentage of patients for whom data were submitted to the SRR, not the overall haemodialysis population.

The three adult units with the lowest prevalence of AV access in 2007 all showed an improvement in 2009 (XH, MONK and QMHD).

H3 Percentage of patients with AV access by renal unit June 2009

