Healing is a matter of time, but it is sometimes also a matter of opportunity.  
Hippocrates, Precepts
Since 1990 the number of patients on hemodialysis has almost doubled, and the number of patients transplanted has increased more than 90% (fig 3.1). The number of peritoneal dialysis patients has also increased, though this modality still accounts for only 13.5% of the ESRD population. Growth in the prevalent dialysis population is a reflection both of growth in incident rates and of declining death rates. Growth in the transplant population, however, is subject to different factors. The relative shortage of available organs, which directly influences the number of patients receiving a transplant, has been offset by improved graft and patient survival. Projections to 2010 suggest that the number of both dialysis and transplant patients will reach levels double those in 1997, while the number of patients on the transplant waiting list will grow almost two and a half times in the same period (figs 3.2–3).

The number of point prevalent patients in 1990, and the percent increase in patient counts between 1990 and 1998, are indicated in the legend. Growth in the prevalent dialysis population is a reflection both of growth in incident rates and of declining death rates. Growth in the transplant population, however, is subject to different factors. The relative shortage of available organs, which directly influences the number of patients receiving a transplant, has been offset by improved graft and patient survival. Projections to 2010 suggest that the number of both dialysis and transplant patients will reach levels double those in 1997, while the number of patients on the transplant waiting list will grow almost two and a half times in the same period (figs 3.2–3).

The proportion of patients on hemodialysis at initiation and at one and two years of ESRD has grown since 1990 (fig 3.4), showing that the use of this modality as a long-term therapy is becoming more frequent. Maps of modality distribution across the country, however, show significant and growing regional differences; greater percentages of patients in the northwest and upper Midwest, for example, have functioning transplants, while the highest percentages of patients on hemodialysis occur in a band along the eastern and southern coasts (fig 3.5). The greatest proportions of patients on peritoneal dialysis occur in distinct pockets throughout the country, and maps of changes over time show the decrease in the use of peritoneal dialysis as a treatment modality.

As shown also in the incidence and prevalence data (Chapter One), racial differences exist in the distribution of patients by modality (fig 3.6). Compared to white patients, a lower percentage of minority patients receive transplants, and these patients are more likely than white patients to be on hemodialysis. Gender differences are not as distinct, though in most age groups men are more likely than women to receive transplants. The greatest percentage of transplanted patients, not surprisingly, is found among pediatric patients of both genders.

The median age of ESRD patients appears lowest in the western renal networks (table 3.2). In-center hemodialysis is, as expected, the preferred modality across networks; the Midwestern and western networks, however, show the highest use of peritoneal dialysis. These geographic differences in the use of peritoneal dialysis may reflect varying degrees of provider expertise or the presence of large peritoneal dialysis programs, both of which may influence the types of treatments provided within a region.

Data in this chapter include both Medicare patients and patients not eligible for Medicare enrollment.
Figure 3.2
Number of dialysis patients projected to 2010
Graphs are made using forecasting and time-series analyses, with stepwise autoregressive models.

Figure 3.3
Number of transplant patients & patients on the transplant waiting list projected to 2010
Graphs are made using forecasting and time-series analyses, with stepwise autoregressive models.

Figure 3.4
Modality at initiation, one year, & two years incident patients
Reference: Table D.9.
Figure 3.5
December 31st point prevalent patients by modality
percent of total patients & percent change from 1990 to 1998, by HSA, unadjusted

Reference: Table D.1.
Figure 3.6
Modality by age group, race, primary diagnosis, & gender
point prevalent patients on December 31st, 1998
Reference: Table 3.1.

Figure 3.7
Modality at two years after first ESRD service, by age group
incident patients, 1994–1996 combined
Reference: Table D.9.
Table 3.1
Percent distribution of patients by modality, age group, gender, race, & primary diagnosis
Point prevalent patients on December 31st, 1998
Percentages add across to approximately 100%.
Reference: Table D.6.

Table 3.2
Percent distribution of patients by treatment modality & network
Point prevalent patients on December 31st, 1998
Dialysis percentages add across to approximately 100%.
Reference: Table D.7.

Figure 3.8
Percent of living ESRD patients by modality & ESRD duration
Point prevalent patients on December 31st, 1998
Reference: Table D.12.
Median age in years

% Hemodialysis

% Peritoneal dialysis

% Functioning transplant

Figure 3.9
Median age, & modality by network
point prevalent patients on
December 31st, 1998
Reference: Table 3.2