If we win here we will win everywhere. The world is a fine place and worth the fighting for and I hate very much to leave it.

Ernest Hemingway,
*For Whom the Bell Tolls*
When comparing ESRD incidence by country, the United States ranks highest with a rate of 317 per million population (fig 13.3). Japan, where transplant rates are low, reports a dialysis incident rate of 249.

Prevalent rates per million population (fig 13.4) show Japan leading all countries at almost 1,600 patients per million population in 1999, the result of outstanding survival rates and open access to care with universal coverage of all medical costs. The U.S. is second in prevalence at over 1,200 per million, also reflecting universal coverage of ESRD treatment. Pay- payment systems in the U.S. vary, however, particularly for prescription drug coverage by supplemental insurance beyond Medicare or the employer’s health plans. In some countries private payment systems are the only ones available to patients.

Almost all countries that offer ESRD care have steadily increased access to that care, as reflected in the increased acceptance and prevalence rates.

The use of home therapies varies considerably across the world. Fifty-five percent of New Zealand patients

The dramatic variations in incident and prevalent rates around the world reflect differences in acceptance criteria, payment systems, and the availability of ESRD treatment, along with the age and growth of the population and the number of people with diabetes. The overall financial resources of a country also influence the availability of care for ESRD treatment. The United States, for example, spends almost 5% of the Medicare budget each year on the 0.6% of Medicare enrollees who have ESRD. The societal burden posed by the care of this vulnerable population poses a particular challenge when resources are limited.
are on peritoneal dialysis, compared to 9% in the U.S. and 4% in Japan (fig 13.5). Home hemodialysis accounts for another 15% of the patients in New Zealand, while most countries report fewer than 2% of patients on the modality (fig 13.6).

In Catalan (Spain) almost 60 patients per million population receive renal transplants (fig 13.7). Other countries with high first transplant rates include Austria, United States, Norway and Belgium at rates between 40 and 52 ESRD patients per million people in the general population. The number of functioning renal transplants is highest in Belgium, Norway, and Catalan areas at 400–450 per million general population (fig 13.8).

The percent of patients with diabetic nephropathy gives some indication of the varying disease burden in patients around the world. Almost 80% of Chilean patients, for example, have diabetes, compared to fewer than 10% in Yugoslavia and Russia (fig 13.9). Some of this variation may be explained by diet and access to carbohydrate food supplies.

In terms of age distribution, more than half of German patients are 65 or older, while the majority of patients in Russia are aged 20–44 (fig 13.11). Age alone, however, may not give a complete picture of elderly populations, since the degree of comorbidity and disease severity influence survival on ESRD treatment. The prevalence of older ESRD populations can also be the result of excellent long-term survival. Incidence and prevalence, then, need to be considered together in order to assess the full spectrum of access to care for the older ESRD population.

The USRDS works with the International Federation of Renal Registries (IFRR) in supplying information from collaborative studies across countries. The expansion of these registries is an important tool for assessing public health in the area of ESRD and for planning the delivery of care in the future. The USRDS will continue to report information from the registries and encourage the sharing of data between countries. As more universal reporting emerges the accuracy of the information will improve even more. The USRDS is fully aware of the commitment this effort requires and extremely appreciative of the efforts of all registries and providers.
Figure 13.3
Incidence of ESRD
1999
Reference for U.S. data: Table A.2.
*Japan: dialysis only
Incident rates in rank order show the United States with the highest rate at 320 per million population.

Figure 13.4
Prevalence of ESRD
1999
Reference for U.S. data: Table B.3.
*Japan: dialysis only
Prevalent rates of ESRD are highest in Japan at 1,570 per million population, and the United States ranks second at 1,217.

Figure 13.5
Percent of dialysis patients on CAPD/CCPD
1999
Reference table for U.S. data: D.1.
*Japan: Dialysis only
New Zealand ranks the highest with 55% of patients on CAPD/CCPD, and the United States ranks 12th at 9.3%.
New Zealand and Australia have the highest percentage of patients on home hemodialysis, 14.4% and 11.4% respectively, while the United States ranks sixth at 1.3%.

Belgium has the highest rate of functioning transplants per million population at 422, followed closely by Norway at 420, and Catalan (Spain) at 418. The United States ranks fifth at 370.

Belgium has the highest rate of functioning transplants per million population at 422, followed closely by Norway at 420, and Catalan (Spain) at 418. The United States ranks fifth at 370.
Chile has the highest percentage of ESRD patients with diabetic nephropathy at 79%, followed by Catalan (Spain) at 67%, and Singapore and the United States, both at 43%.

Germany has the highest percentage of patients aged 65 and older (58%), followed by Greece with 41.2%, and Japan with 40.7%. The United States has the sixth oldest population, with 34.4% of its patients aged 65 and older.