Dear Sir,

We read with interest the article ‘Racial, Sexual, and Age Inequalities in Chronic Dialysis’ [1], for we share the belief of the authors that renal replacement therapy should be freely available throughout all demographic and social strata. However, we are very concerned by the outdated and false impression which will be perpetuated by the statement ‘Great Britain... virtual exclusion of patients over the age of 55 from dialysis’. Whilst we accept that haemodialysis facilities are still limited in Great Britain as a whole, and in some health regions in particular [2], there has recently been a considerable increase in the number of new patients dialysed in the UK [3] many of whom receive continuous ambulatory peritoneal dialysis (CAPD).

In this unit which maintains an active CAPD programme and serves a total population of 1,200,000 people, the acceptance rate has increased from approximately 20 new patients/1,000,000 during the 1970s to a stable rate exceeding 60/1,000,000 since 1984. Throughout the 1970s only 11.6% of patients were older than 55 (in keeping with the message of the article); however, during the 1980s 39% of new patients have exceeded this age, 25% have been older than 60 years, 10% older than 65 years and 4% have been more than 70 years old [4]. Our oldest patient to date has recently enjoyed her 80th birthday. We have found that our elderly dialysis patients, who mainly receive CAPD, do remarkably well on replacement therapy [5] and as a result we never allow age alone to militate against dialysis.

Whilst complacency would be inappropriate, the dismal picture painted in this article is, in our view, inaccurate. Furthermore, we know on the basis of a recent collaborative study [6] that our experience is not unique within the UK.

References


United Kingdom EDTA statistics for 1985.

