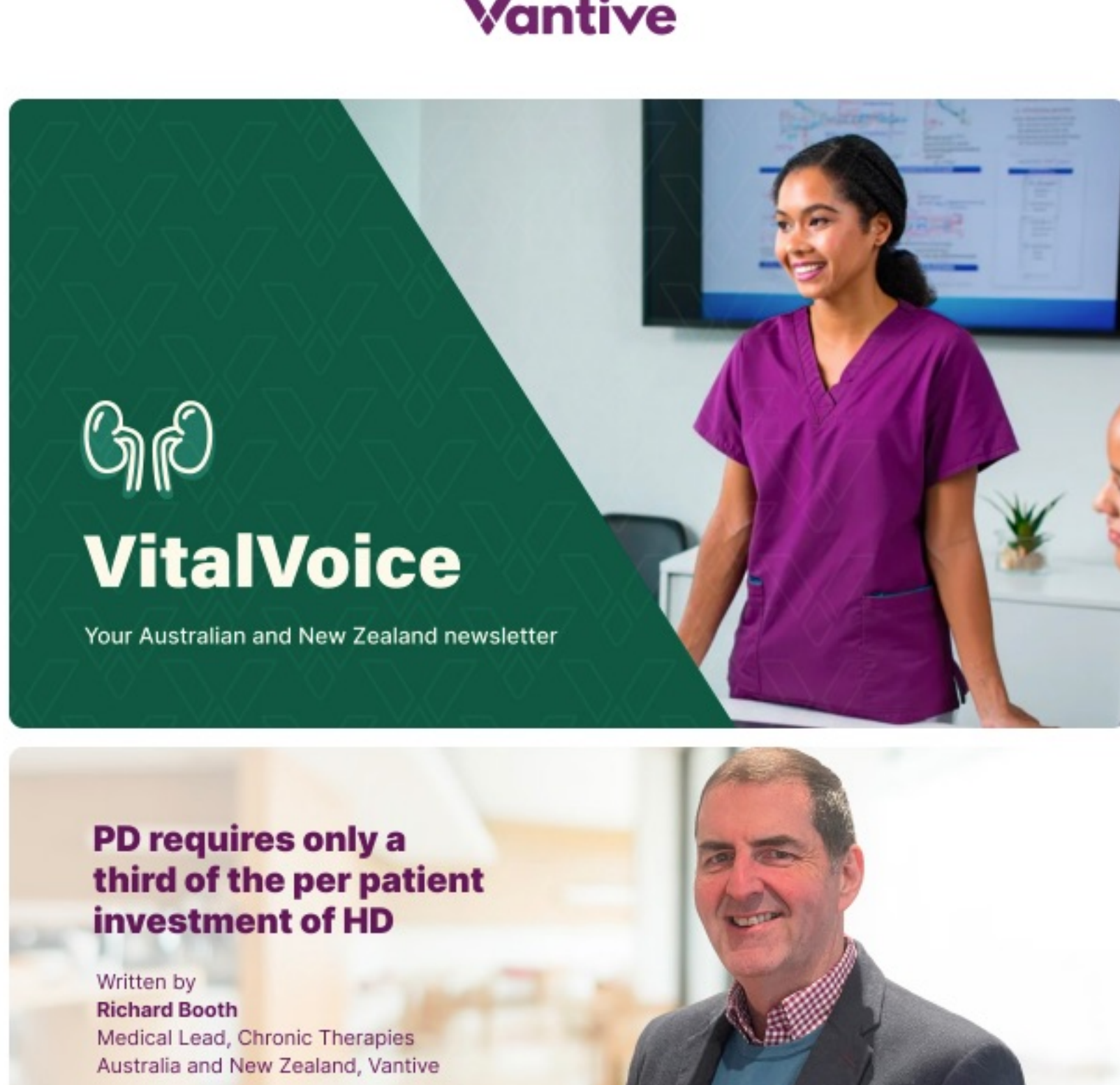
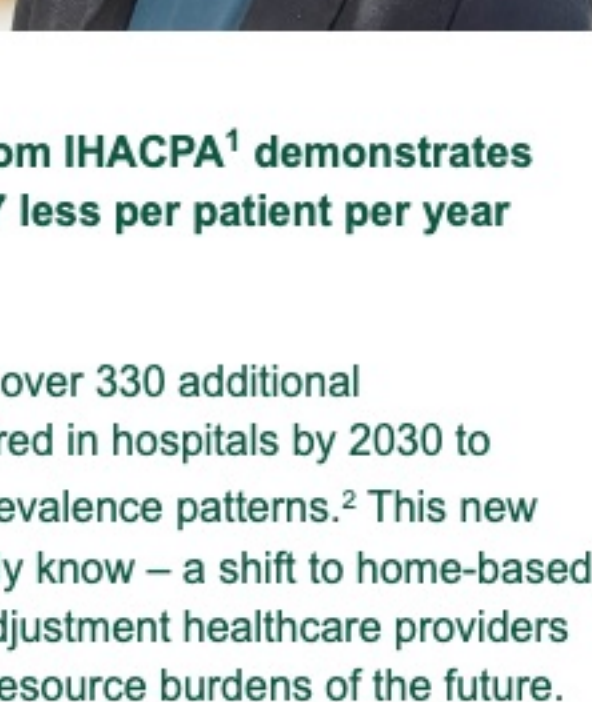




PD requires only a third of the per patient investment of HD

Written by
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Medical Lead, Chronic Therapies
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Analysis of recently released data from IHACPA¹ demonstrates that peritoneal dialysis costs \$73,117 less per patient per year compared with haemodialysis.

In addition, a recent report reveals that over 330 additional haemodialysis (HD) chairs will be required in hospitals by 2030 to maintain the current trajectory of HD prevalence patterns.² This new data serves to reinforce what we already know – a shift to home-based dialysis care is a simple but powerful adjustment healthcare providers can take now to alleviate the cost and resource burdens of the future.

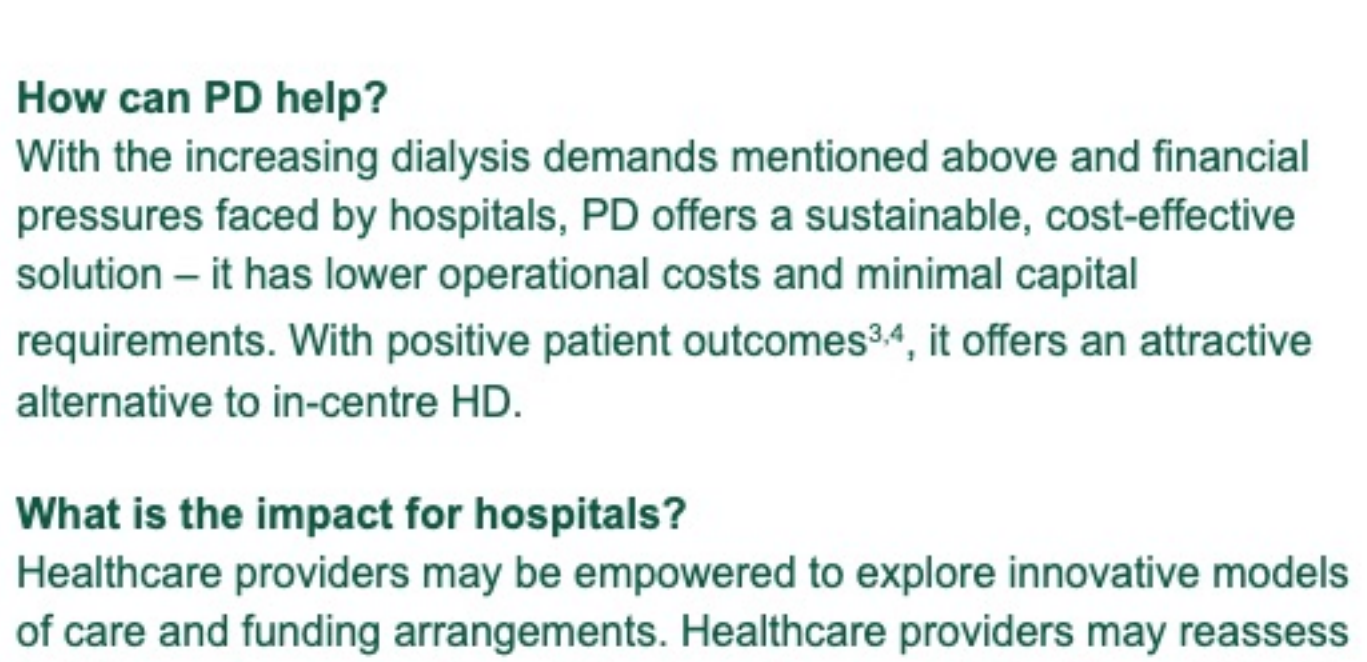
The 2025 Independent Health and Aged Care Pricing Authority (IHACPA) benchmark pricing* reveals that government funding for an in-centre HD dialysis patient requires almost 3 times the level of funding required for a peritoneal dialysis (PD) home-based patient.¹

Therapy	Annual funding required per patient
In-centre haemodialysis	\$111,639.65
Peritoneal dialysis	\$38,522.56

Analysis of the data also shows that in 2022/23 in-centre HD costs increased by 7%, whilst PD costs only increased by 0.2%. The impact of these increases is an increase in funding required for hospitals to continue providing the same level of service: in-centre HD was significant with a 17% increase in funding for 2025/26 compared with PD at only 4%.¹

What does this mean for the Australian health system?

A recent PD and HD cost-benefit analysis report, commissioned by Vantive, shows that based on current treatment patterns, the growing number of in-centre HD patients and the associated costs will impact the Australian health system at a much higher level than PD.²



Difference in cost of PD vs HD:
\$73,117.09 less per patient, per year on PD

How can PD help?

With the increasing dialysis demands mentioned above and financial pressures faced by hospitals, PD offers a sustainable, cost-effective solution – it has lower operational costs and minimal capital requirements. With positive patient outcomes^{3,4}, it offers an attractive alternative to in-centre HD.

What is the impact for hospitals?

Healthcare providers may be empowered to explore innovative models of care and funding arrangements. Healthcare providers may reassess their home therapy policy and implement more sustainable models of care, thereby reducing the cost pressure on the entire health system.

For those dialysis units at capacity now, or approaching capacity in their HD centre, the impetus to explore alternative care options will be the strongest. In addition to managing any internal pressures to reduce costs, hospitals at maximum capacity may need to source additional capital funding to meet their HD demands.

The management of the current and increasing burden of chronic kidney disease on our hospital system calls for a reimagining of how we deliver care to reach those who need it most and to build sustainable models of dialysis care.

As a new vital organ therapies company, Vantive is committed to working with providers to help redefine kidney care, to provide the best patient outcomes while helping maintain a sustainable healthcare system for all patients.

Richard Booth

Medical Lead Chronic Therapies A/NZ

* The efficient price for an episode of care calculated by IHACPA has been used as a proxy to determine state, territory and Commonwealth funding.

1. National Efficient Price Determination 2025–26, Independent Health and Aged Care Pricing Authority 2025, March 2025
2. Independent report: Cost-benefit Analysis of Peritoneal Dialysis and Haemodialysis, on file with Vantive
3. Marshall, M (2020), The benefit of early survival on PD versus HD—Why this is (still) very important, <https://journals.sagepub.com/doi/10.1177/0896860819895177>
4. Dabrowska-Bender Marta (2018). The impact on quality of life of dialysis patients with renal insufficiency, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5916456/>

Need help to simplify this information?

Would you like a better understanding of government funding and the impact on your hospital? Our team can help simplify the information.

If your hospital would like an educational consultation with our team to discuss your circumstances, please make an appointment with us.

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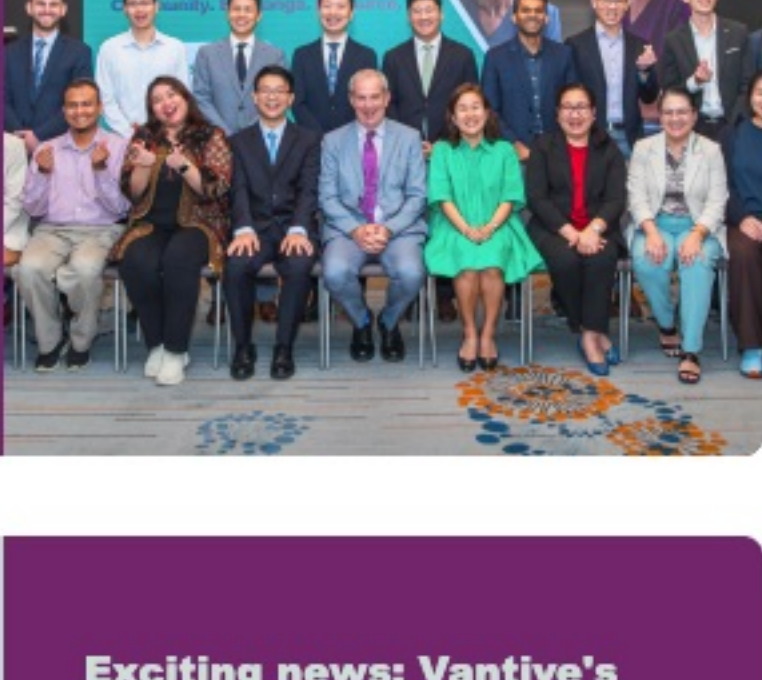
TRANSFORMING HEALTH THROUGH CONNECT



A reflective post: Vantive PD Champion program 2025, Taiwan

Newly minted A/NZ PD Champion, Dr George Tsihlis, shares insights from the 2nd Asia Pacific PD Champion program held in Taipei

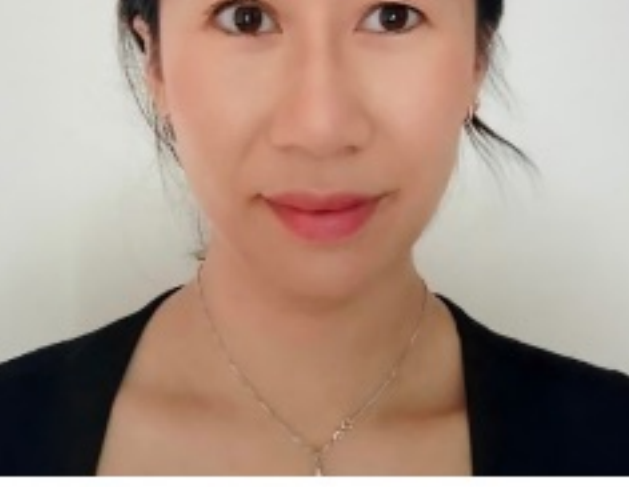
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Exciting news: Vantive's new PD fluids launch in A/NZ

Our first Vantive-branded PD fluids have launched in A/NZ, offering enhanced features. More codes coming soon!

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Our new Welcome Pack is full of Vantive information, and key content is now available to download

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Get to know the people who make kidney care personal

In my role as A/NZ PD Sales Manager, my hope is to assist our PD Sales and Marketing teams with bringing new technology to the marketplace which will improve the lives of patients with end-stage kidney disease. This is personal to me as my brother has commenced his journey on dialysis, and I know how this has impacted him and his loved ones.

Janice Tylden

PD Sales Manager, Australia and New Zealand



Australia

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