

CHAPTER 11

Kidney Failure among Māori in Aotearoa New Zealand

Reporting the incidence, prevalence and survival in Māori patients of Aotearoa New Zealand receiving kidney replacement therapy

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SUMMARY AND HIGHLIGHTS

This chapter describes the rates, clinical care patterns and outcomes of treatment for kidney failure for people identifying as Māori living in Aotearoa New Zealand.

The denominator population statistics are stratified by ethnicity and drawn from estimates provided by Statistics New Zealand to calculate disease and treatment rates¹. Ethnicity population data are projections produced by Statistics New Zealand according to assumptions agreed to by the New Zealand Ministry of Health; these include data from the 2018 census and incorporate additional information gained from the post-enumeration survey.

Please note that collection of ethnicity data in ANZDATA has evolved to align with the Australian Bureau of Statistics Australian Standard Classification of Cultural and Ethnic Groups² and data collection now allows a patient to nominate more than one ethnicity group. However, consultation regarding reporting of ethnicity data is ongoing, and reporting guidelines are not finalised at publication. As a result, ethnicity data throughout this report includes only the first nominated ethnicity category entered for each patient. Future reporting will aim to report more accurately on patients with more than one ethnicity.

This report highlights key disparities and trends in kidney failure treatment among Māori and non-Māori, non-Pacific populations in Aotearoa New Zealand from 2019 to 2023. The data reveals a disproportionate burden of kidney disease and treatment challenges for Māori, including higher rates of kidney failure, lower transplant rates, and significant differences in dialysis practices.

Māori makes up 26% of new kidney replacement therapy (KRT) population in 2023, with leading cause being diabetic kidney disease (66%) which is significantly higher than 29% of non-Māori, non-Pacific patients. There is persistently high incidence of kidney failure among Māori across all age groups, starting as early as ages 15-24.

Māori patients are 3 times more likely to start with haemodialysis compared to non-Māori, non-Pacific populations. A lower proportion of Māori patients are on home-based dialysis.

Access to pre-emptive renal transplant remains low with only 15 Māori received pre-emptive kidney transplants compared to 143 non-Māori non-Pacific patients over the last 5 years.

At 5 years post-transplant, Māori transplant patients have worse outcomes with lower patient (85% of Māori recipients vs. 91% of non-Māori, non-Pacific recipients) and graft survival rate (78% of Māori recipients compared with 86% of non-Māori, non-Pacific population).

This report underscores the significant and persistent health inequities faced by Māori in kidney failure treatment, emphasizing the need for focused interventions to improve access to early diagnosis, equitable treatment options, and transplant opportunities.

The renal services of Aotearoa New Zealand acknowledge Te Tiriti ō Waitangi / The Treaty of Waitangi principles. This report includes monitoring the current health provision to whānau Māori to monitor equity. These data intend to inform quality improvement within health systems and by health providers.

SUGGESTED CITATION

T Sun, C Davies, E Au, S Bateman, J Chen, P Clayton, K Hurst, F Kholmurodova, D Lee, H McCarthy, S McDonald, W Mulley, M Roberts, B Solomon, G Irish. 47th Report, Chapter 11: Kidney Failure among Māori in Aotearoa New Zealand. Australia and New Zealand Dialysis and Transplant Registry, Adelaide, Australia. 2024. Available at: http://www.anzdata.org.au

NEW PATIENTS

A total of 185 patients identifying as Māori commenced treatment for kidney failure in 2023, representing 26% of all patients starting kidney replacement therapy. The rate of haemodialysis commencement in non-Māori and non-Pacific patients was 3-fold lower than for Māori. Māori were more likely to commence haemodialysis than peritoneal dialysis compared with non-Māori and non-Pacific patients (Figure 11.1). Two Māori patients received a pre-emptive kidney transplant in 2023. In the last 5 years, 15 Māori patients have received a pre-emptive kidney transplant compared with 143 non-Māori and non-Pacific patients.

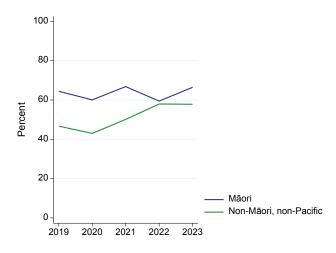
Table 11.1

New Patients (per million population) Aotearoa New Zealand 2019-2023

Year	Modality	Māori	Non-Māori, non-Pacific
	Haemodialysis	136 (163)	135 (36)
2019	Peritoneal Dialysis	74 (89)	124 (33)
	Pre-emptive Transplant	1 (1)	30 (8)
	Haemodialysis	128 (150)	139 (37)
2020	Peritoneal Dialysis	80 (94)	148 (39)
	Pre-emptive Transplant	5 (6)	36 (9)
	Haemodialysis	127 (145)	170 (45)
2021	Peritoneal Dialysis	57 (65)	136 (36)
	Pre-emptive Transplant	6 (7)	33 (9)
	Haemodialysis	113 (127)	196 (52)
2022	Peritoneal Dialysis	76 (85)	121 (32)
	Pre-emptive Transplant	1 (1)	21 (6)
	Haemodialysis	123 (136)	184 (47)
2023	Peritoneal Dialysis	60 (66)	111 (29)
	Pre-emptive Transplant	2 (2)	23 (6)

22 excluded due to unreported ethnicity.

Figure 11.1
Percentage of New Patients Commencing on
Haemodialysis - Aotearoa New Zealand 2019-2023



PRIMARY KIDNEY DISEASE

The primary kidney diseases of incident Aotearoa New Zealand patients over 2019-2023 are in Table 11.2. Māori patients experience diabetic kidney disease at a substantially higher rate than non-Māori, non-Pacific patients.

Figure 11.2
Primary Kidney Disease of New Patients Aotearoa New Zealand 2019-2023

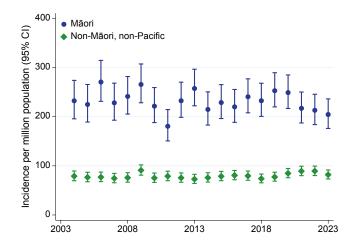
Primary Kidney Disease	Māori	Non-Māori, non-Pacific
Diabetic kidney disease	652 (66%)	464 (29%)
Glomerular disease	125 (13%)	415 (26%)
Hypertension / Renal vascular disease	60 (6%)	222 (14%)
Familial / hereditary kidney diseases	20 (2%)	164 (10%)
Tubulointerstitial disease	58 (6%)	156 (10%)
Other systemic diseases affecting the kidney	12 (1%)	46 (3%)
Miscellaneous kidney disorders	56 (6%)	133 (8%)
Not reported	6 (1%)	7 (<1%)
Total	989	1607

22 excluded due to unreported ethnicity.

INCIDENCE RATES

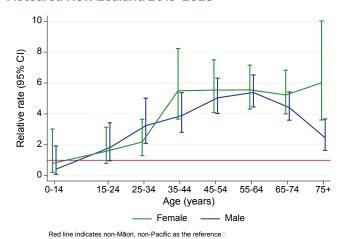
Overall, the incidence rates of kidney failure for Māori patients are markedly and persistently higher than those for non-Māori and non-Pacific patients (Figure 11.2). The inequity is confounded and underestimated by the age distributions of each population with Māori populations being considerably younger.

Figure 11.2
Unadjusted Incident KRT Rate - Aotearoa New Zealand



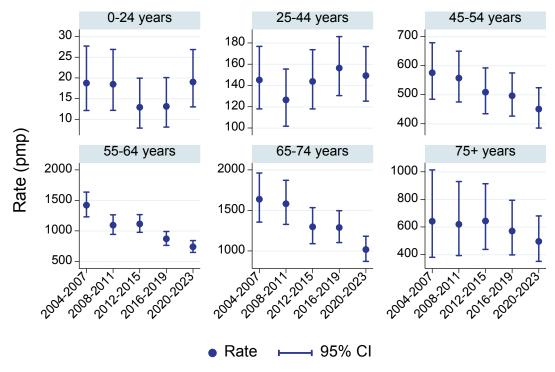
The disparities in the incidence of kidney failure in Māori persons, compared to non-Māori, non-Pacific persons, occur as early as ages 15 to 24 years and are evident across all age groups above this (Figure 11.3).

Figure 11.3
Relative Incidence Rate of Treated Kidney Failure for Māori Patients compared with non-Māori, non-Pacific Patients by Gender - Aotearoa New Zealand 2019-2023



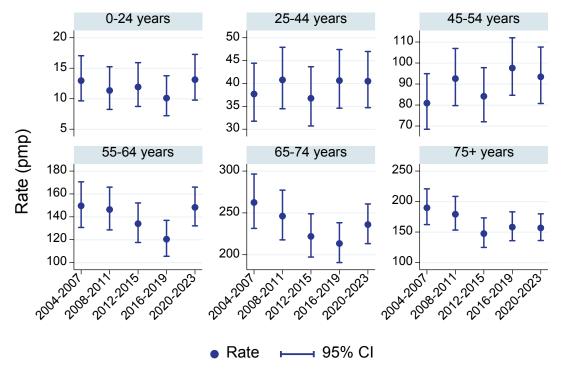
Age specific trends in kidney replacement therapy practices for Māori are shown in Figure 11.4; note that the Y axis scales vary.

Figure 11.4.1
Age-specific Incidence Rates of Treated Kidney Failure - Māori, Aotearoa New Zealand 2004-2023



Note the Y axis scales vary between panels

Figure 11.4.2
Age-specific Incidence Rates of Treated Kidney Failure Non-Māori, non-Pacific, Aotearoa New Zealand 2004-2023



Note the Y axis scales vary between panels

PREVALENT PATIENTS

The number of prevalent patients with treated kidney failure by treatment modality for Māori and non-Māori, non-Pacific persons is shown in Table 11.3 and Figures 11.5 and 11.6.

Table 11.3
Prevalent Patients by Ethnicity and Treatment Modality Aotearoa New Zealand 2019-2023

Year	Modality	Māori	Non-Māori, non-Pacific
	HD	673 (57%)	679 (25%)
2019	HD at home* (% of HD)	135 (20%)	174 (26%)
2019	PD [^]	247 (21%)	398 (15%)
	Transplant	252 (22%)	1632 (60%)
	HD	706 (57%)	678 (24%)
2020	HD at home* (% of HD)	127 (18%)	163 (24%)
2020	PD^	255 (21%)	426 (15%)
	Transplant	267 (22%)	1701 (61%)
	HD	749 (60%)	756 (26%)
2021	HD at home* (% of HD)	122 (16%)	167 (22%)
2021	PD^	225 (18%)	419 (14%)
	Transplant	283 (23%)	1746 (60%)
	HD	719 (58%)	802 (27%)
2022	HD at home* (% of HD)	116 (16%)	166 (21%)
2022	PD^	218 (18%)	395 (13%)
	Transplant	296 (24%)	1769 (60%)
	HD	715 (58%)	860 (28%)
2023	HD at home* (% of HD)	108 (15%)	172 (20%)
2023	PD^	206 (17%)	384 (13%)
	Transplant	312 (25%)	1798 (59%)

^{*}Includes Community House HD

[^]Includes Hybrid Dialysis

¹¹⁴ excluded due to unreported ethnicity.

Figure 11.5.1 Prevalent Patients by Modality - Aotearoa New Zealand - Māori

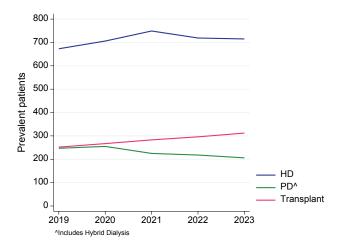


Figure 11.5.2
Prevalent Patients by Modality - Aotearoa New Zealand - Non-Māori, non-Pacific

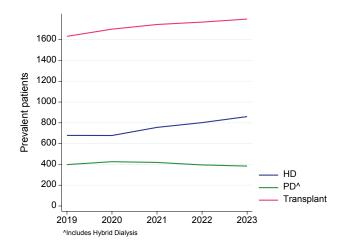
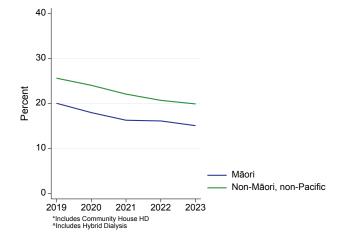


Figure 11.6
Prevalent Haemodialysis at Home* (% of all HD^)
by Ethnicity - Aotearoa New Zealand



INCIDENCE AND PREVALENCE PER POPULATION

Figure 11.7
Incidence of Kidney Replacement Therapy Patients Aotearoa New Zealand

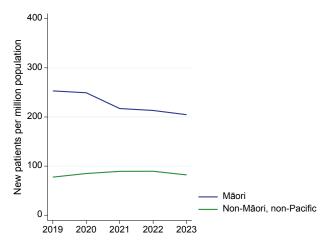


Figure 11.8
Incidence of Kidney Transplants - Aotearoa New Zealand

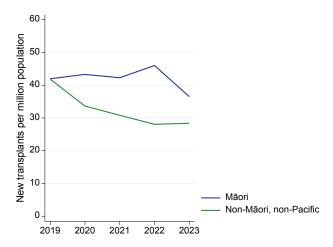


Figure 11.9
Prevalent Haemodialysis^ Patients - Aotearoa New Zealand

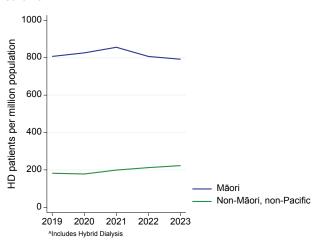


Figure 11.10
Prevalent Peritoneal Dialysis^ Patients - Aotearoa New Zealand

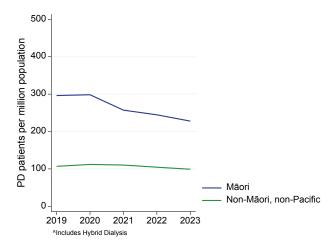


Figure 11.11
Prevalent Transplant Patients - Aotearoa New Zealand

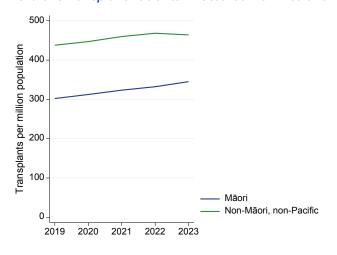
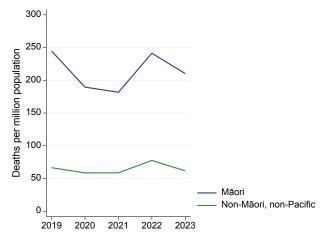


Figure 11.12
Deaths of KRT Patients - Aotearoa New Zealand



TRANSPLANTATION

The numbers of kidney transplant recipients over the last 10 years are shown in Table 11.4 by ethnicity and donor type. Figure 11.13 shows the transplant rate of dialysed patients aged 15-64 years, using dialysis time as the denominator. This illustrates that Māori patients receive a kidney transplant at a much lower rate than Non-Māori, non-Pacific patients. Information on donor sources is in Figure 11.14, and trends are in Figure 11.15.

Table 11.4
Number of Transplant Recipients (pmp) by Donor Type and Ethnicity Aotearoa New Zealand 2014-2023

Year	Donor Type	Māori	Non-Māori, non-Pacific
	Deceased Donor	13 (17)	44 (13)
2014	Living Donor	12 (16)	52 (15)
	Total	25 (33)	96 (28)
	Deceased Donor	13 (17)	44 (13)
2015	Living Donor	15 (20)	54 (16)
	Total	28 (36)	98 (28)
	Deceased Donor	13 (17)	58 (16)
2016	Living Donor	13 (17)	57 (16)
	Total	26 (33)	115 (32)
	Deceased Donor	17 (21)	71 (20)
2017	Living Donor	6 (7)	52 (14)
	Total	23 (29)	123 (34)
	Deceased Donor	15 (18)	65 (18)
2018	Living Donor	14 (17)	59 (16)
	Total	29 (36)	124 (34)
	Deceased Donor	24 (29)	83 (22)
2019	Living Donor	11 (13)	73 (20)
	Total	35 (42)	156 (42)
	Deceased Donor	23 (27)	60 (16)
2020	Living Donor	14 (16)	68 (18)
	Total	37 (43)	128 (34)
	Deceased Donor	23 (26)	55 (14)
2021	Living Donor	14 (16)	62 (16)
	Total	37 (42)	117 (31)
2022	Deceased Donor	28 (31)	53 (14)
	Living Donor	13 (15)	53 (14)
	Total	41 (46)	106 (28)
	Deceased Donor	19 (21)	58 (15)
2023	Living Donor	14 (15)	52 (13)
	Total	33 (37)	110 (28)

7 excluded due to unreported ethnicity.

Figure 11.13
Transplant Rate of Dialysed Patients by Ethnicity 2014-2023 - Aotearoa New Zealand, Patients Aged 15-64

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Figure 11.14
Donor Type by Ethnicity - Aotearoa New Zealand 2014-2023

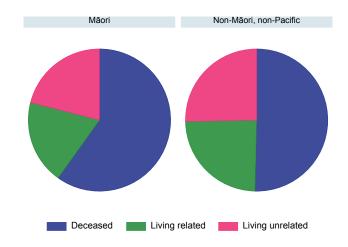


Figure 11.15

Donor Type by Ethnicity and Year Aotearoa New Zealand

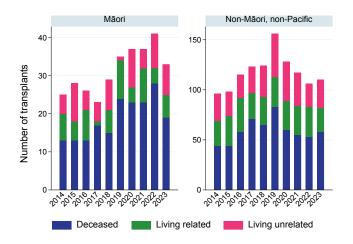


Figure 11.16
Percentage of Patients Starting Kidney Replacement
Therapy with Pre-emptive Kidney Transplant Aotearoa New Zealand

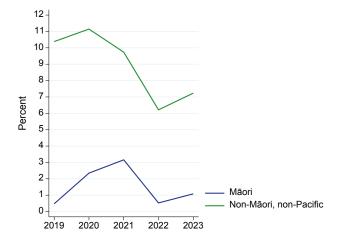


Figure 11.17 shows the cumulative incidence curve of primary transplant after starting KRT (utilising competing risk techniques to account for the effect of the competing risk of death). Figure 11.18 shows the cumulative incidence curves of primary transplant after starting KRT by era.

Figure 11.17
Time to Primary Transplant from KRT Start - Aotearoa
New Zealand Incident KRT Patients 2014-2023

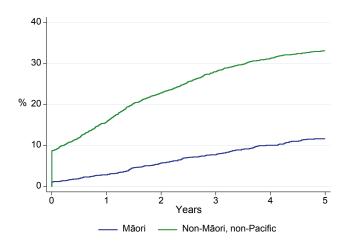
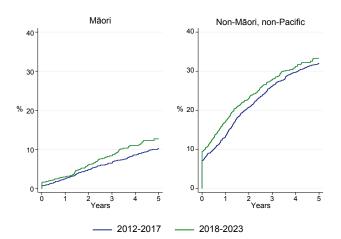


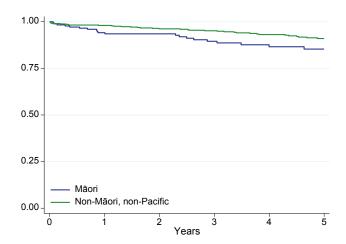
Figure 11.18
Time to Primary Transplant from KRT Start by Era Aotearoa New Zealand Incident KRT Patients



PATIENT AND TRANSPLANT SURVIVAL

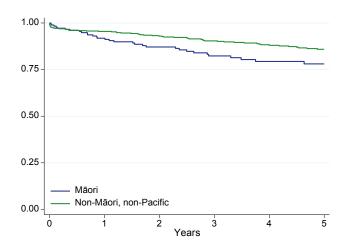
Patient survival after kidney transplantation from a deceased donor for Māori and non-Māori, non-Pacific recipients is shown in Figure 11.19. At 5 years after kidney transplantation from a deceased donor, 85% of Māori recipients and 91% of non-Māori, non-Pacific recipients were alive.

Figure 11.19
Patient Survival, Recipients of Primary Deceased Donor Kidney
Transplants - Aotearoa New Zealand 2014-2023



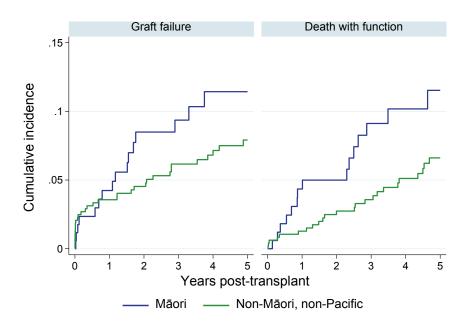
Over the first 5 years after a kidney transplant from a deceased donor, some kidney transplants are lost either through the transplant failing or the patient dying with a functioning kidney. The transplanted kidney is functioning at 5 years post-transplant in 78% of Māori recipients compared with 86% of non-Māori, non-Pacific persons (Figure 11.20).

Figure 11.20
Graft Survival, Recipients of Primary Deceased Donor
Kidney Transplants - Aotearoa New Zealand 2014-2023



Cumulative incidence curves (utilising competing risk techniques to account for the effects of both components of graft loss, i.e. graft failure and death with a functioning graft) for Māori transplant outcomes are in Figure 11.21.

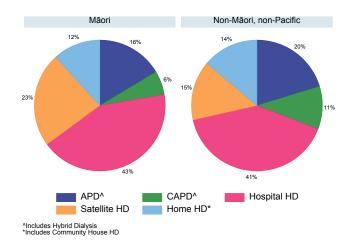
Figure 11.21 Transplant Outcomes, Aotearoa New Zealand - Primary Deceased Donor Kidney-only Transplants 2014-2023



DIALYSIS

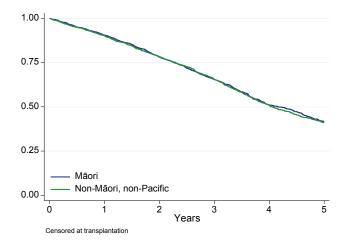
The distribution of dialysis modality is shown graphically in Figure 11.22. Māori patients had higher use of facility dialysis as the principal care modality, and lower use of the home-based modalities.

Figure 11.22
Dialysis Modality End 2023 - Aotearoa New Zealand, by Ethnicity



Patient survival after incident dialysis for Māori and Non-Māori, non-Pacific patients are in Figure 11.23. Non-Māori, non-Pacific and Māori cohorts experienced similar survival over 5 years after starting dialysis. However, the differences between populations including age distribution and access to competing treatments (transplantation), may impact mortality estimates.

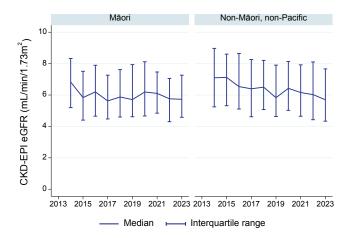
Figure 11.23
Patient Survival, Incident Dialysis Patients - Aotearoa
New Zealand 2014-2023



TIMING OF DIALYSIS INITIATION

The level of kidney function at which dialysis is commenced (based on estimated Glomerular Filtration Rate (eGFR)) is shown in Figure 11.24 by patient ethnicity.

Figure 11.24 eGFR at Dialysis Initiation - Aotearoa New Zealand



LATE REFERRAL

The proportion of patients who experienced late referral (defined as the first assessment by a specialist nephrologist within 3 months of commencing dialysis) to specialist nephrology services in Aotearoa New Zealand, over 2019-2023 by ethnicity is in Table 11.5.

Table 11.5
Percentage of Late Referral by Ethnicity Aotearoa New Zealand 2019-2023

Year	Māori	Non-Māori, non-Pacific
2019	15%	13%
2020	15%	7%
2021	12%	10%
2022	15%	13%
2023	13%	10%

VASCULAR ACCESS

INCIDENT VASCULAR ACCESS

Incident vascular access data are presented in Table 11.6, and prevalent data in Table 11.7.

Table 11.6
Incident Vascular Access Aotearoa New Zealand 2019-2023

Year	Vascular access	Māori	Non-Māori, non-Pacific
	AVF	28 (21%)	33 (24%)
0040	AVG	0 (0%)	2 (1%)
2019	CVC	107 (79%)	100 (74%)
	Not reported	1 (1%)	0 (0%)
	AVF	22 (17%)	31 (22%)
0000	AVG	0 (0%)	0 (0%)
2020	CVC	106 (83%)	106 (76%)
	Not reported	0 (0%)	2 (1%)
	AVF	22 (17%)	41 (24%)
2021	AVG	0 (0%)	1 (1%)
2021	CVC	105 (83%)	127 (75%)
	Not reported	0 (0%)	1 (1%)
	AVF	17 (15%)	44 (22%)
2022	AVG	0 (0%)	1 (1%)
2022	CVC	95 (84%)	150 (77%)
	Not reported	1 (1%)	1 (1%)
	AVF	14 (11%)	24 (13%)
2023	AVG	1 (1%)	2 (1%)
2023	CVC	108 (88%)	158 (86%)
	Not reported	0 (0%)	0 (0%)

AVF: Arteriovenous Fistula, AVG: Arteriovenous Graft, CVC: Central Venous Catheter 17 excluded due to unreported ethnicity.

PREVALENT VASCULAR ACCESS

Table 11.7
Prevalent Vascular Access^ Aotearoa New Zealand 2019-2023

Year	Vascular access	Māori	Non-Māori, non-Pacific
	AVF	422 (63%)	390 (57%)
	AVG	18 (3%)	16 (2%)
2019	CVC	213 (32%)	247 (36%)
	Not reported	20 (3%)	26 (4%)
	AVF	411 (58%)	376 (55%)
0000	AVG	17 (2%)	11 (2%)
2020	CVC	251 (36%)	263 (39%)
	Not reported	27 (4%)	28 (4%)
	AVF	449 (60%)	388 (51%)
0004	AVG	11 (1%)	11 (1%)
2021	CVC	267 (36%)	319 (42%)
	Not reported	22 (3%)	38 (5%)
	AVF	397 (55%)	380 (47%)
	AVG	8 (1%)	17 (2%)
2022	CVC	287 (40%)	362 (45%)
	Not reported	27 (4%)	43 (5%)
	AVF	373 (52%)	378 (44%)
0000	AVG	8 (1%)	18 (2%)
2023	CVC	319 (45%)	430 (50%)
	Not reported	16 (2%)	38 (4%)

[^]Includes Hybrid Dialysis

⁴⁴ excluded due to unreported ethnicity.

PATIENT FLOW

Table 11.8 shows the overall patient flow in Aotearoa New Zealand by ethnicity. Notably, mortality for Māori patients is 3 to 4-fold higher per million of the population compared with non-Māori, non-Pacific patients.

Table 11.8
Patient Flow (pmp) Aotearoa New Zealand 2019-2023

Year	Event	Māori	Non-Māori, non-Pacific
	New patients	211 (253)	289 (78)
	New transplants	35 (42)	156 (42)
	Pre-emptive transplants	1 (1)	30 (8)
2019	Prevalent dialysis	920 (1104)	1077 (289)
	Prevalent transplants	252 (302)	1632 (438)
	Total prevalence	1172 (1406)	2709 (727)
	Deaths	200 (240)	243 (65)
	New patients	213 (249)	323 (85)
	New transplants	37 (43)	127 (33)
	Pre-emptive transplants	5 (6)	36 (9)
2020	Prevalent dialysis	961 (1125)	1104 (290)
	Prevalent transplants	267 (312)	1701 (447)
	Total prevalence	1228 (1437)	2805 (737)
	Deaths	161 (188)	219 (58)
	New patients	190 (217)	339 (89)
	New transplants	37 (42)	117 (31)
	Pre-emptive transplants	6 (7)	33 (9)
2021	Prevalent dialysis	974 (1113)	1175 (310)
	Prevalent transplants	283 (323)	1746 (460)
	Total prevalence	1257 (1437)	2921 (769)
	Deaths	157 (179)	217 (57)
	New patients	190 (213)	338 (89)
	New transplants	41 (46)	106 (28)
	Pre-emptive transplants	1 (1)	21 (6)
2022	Prevalent dialysis	937 (1052)	1197 (317)
	Prevalent transplants	296 (332)	1769 (468)
	Total prevalence	1233 (1384)	2966 (785)
	Deaths	213 (239)	289 (77)
	New patients	185 (205)	318 (82)
	New transplants	33 (37)	110 (28)
	Pre-emptive transplants	2 (2)	23 (6)
2023	Prevalent dialysis	921 (1019)	1244 (321)
	Prevalent transplants	312 (345)	1798 (464)
	Total prevalence	1233 (1364)	3042 (785)
	Deaths	190 (210)	236 (61)

Patients with unreported ethnicity are excluded.

CAUSE OF DEATH

The causes of death in 2023 are in Figure 11.25 and Table 11.9, stratified by ethnicity and modality at the time of death.

Figure 11.25
Cause of Death by Modality and Ethnicity - Deaths
Occurring During 2023, Aotearoa New Zealand

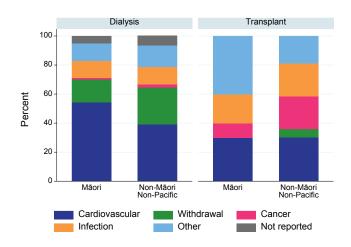


Table 11.9
Cause of Death by Modality and Ethnicity, Aotearoa New Zealand 2023

Modality	Cause of death	Māori	Non-Māori, non-Pacific
	Cardiovascular	98 (54%)	72 (39%)
	Withdrawal	28 (16%)	46 (25%)
	Cancer	2 (1%)	4 (2%)
Dialysis	Infection	21 (12%)	22 (12%)
	Other	22 (12%)	27 (15%)
	Not reported	9 (5%)	12 (7%)
	Total	180	183
	Cardiovascular	3 (30%)	16 (30%)
	Withdrawal	0 (0%)	3 (6%)
	Cancer	1 (10%)	12 (23%)
Transplant	ant Infection	2 (20%)	12 (23%)
	Other	4 (40%)	10 (19%)
	Not reported	0 (0%)	0 (0%)
	Total	10	53

2 excluded due to unreported ethnicity.

REFERENCES

- 1. This work is based on/includes Stats NZ's data which are licensed by Stats NZ for re-use under the Creative Commons Attribution 4.0 International licence. Stats NZ, 2023, Estimated Resident Population by Age and Sex (1991+) (Annual-Jun), NZ Infoshare, viewed 14 Dec 2023, http://infoshare.stats.govt.nz/
- 2. Australian Bureau of Statistics, 2019, Australian Standard Classification of Cultural and Ethnic Groups (ASCCEG), December 2019, viewed 23 Oct 2020, https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1249.0Main+Features12019?OpenDocument



CHAPTER 11

Kidney Failure among Māori in Aotearoa New Zealand