

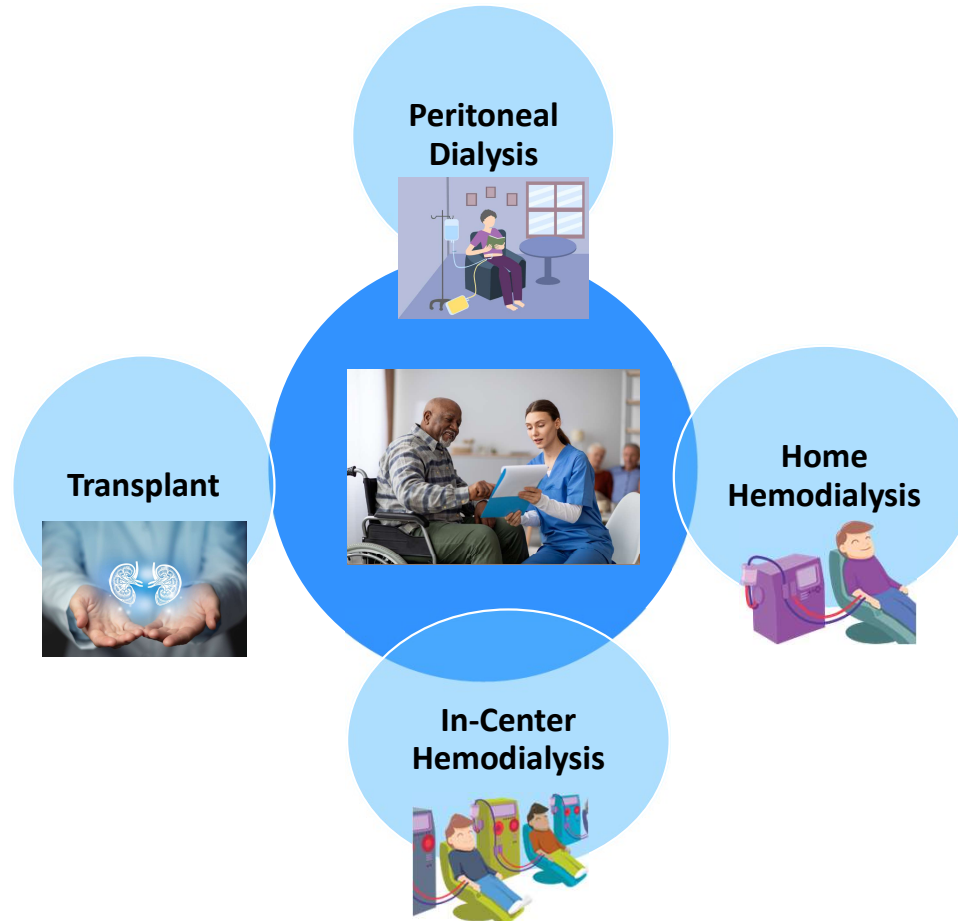
Chronic Kidney Disease Education- FAST TRACK

IRC INFORMED

CKD Education Program



Journey through the dialysis life – treatment options



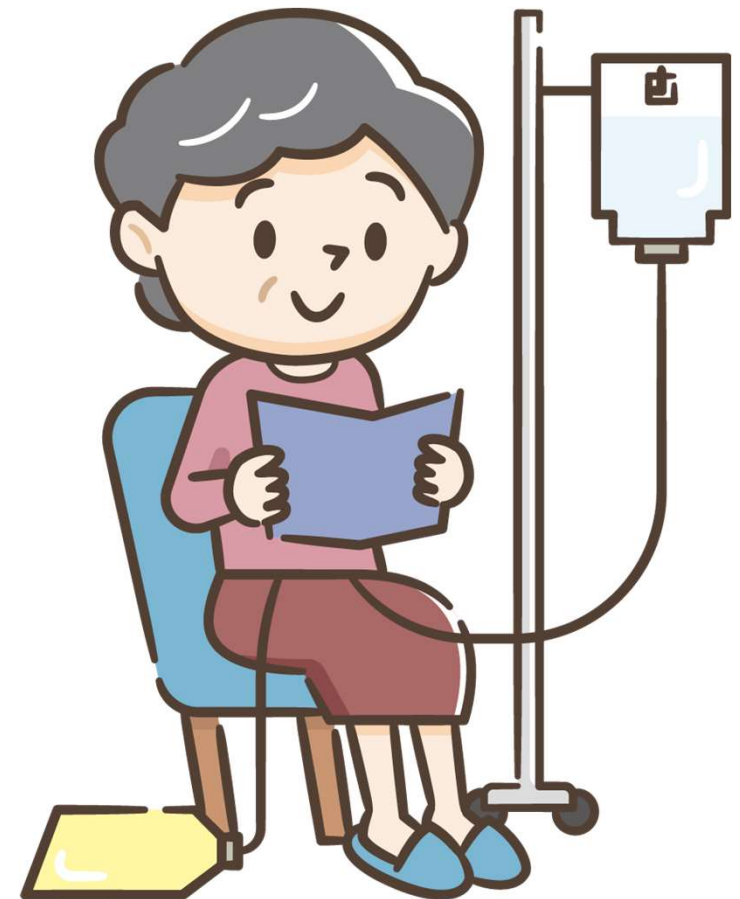
Treatment Options – You Have a Choice!

Peritoneal Dialysis (PD)

- Continuous Ambulatory PD (CAPD)
- Automated Cycling PD (APD)

Both PD options offer:

- Individualized training
- Dialyze at home
- No needles
- Portable –easy to take with you and travel



Treatment Options – You Have a Choice!

Hemodialysis (HD)

- In-Center HD
 - Typically receive dialysis treatment 3 x week
 - Scheduled days and times provided by clinic
 - Some participation in care may be offered
- Home Hemodialysis
 - Individualized training
 - Dialyze on own schedule
 - Dialyze at home
 - Equipment portable – easy to travel
 - May be done at night (nocturnal) while you sleep



Treatment Options – You Have a Choice!

Transplant

A healthy kidney is placed inside your body to do the work of your failing kidneys



Living Donor

- Occurs when patient receives a kidney from a live person –friend, family member, stranger
- Benefits include:
 - Shorter transplant process/wait time
 - Better organ function and may last longer
 - Shorter hospitalization stays with easier recovery

Paired-Donor

- If your donor does not match you, they give a kidney to another patient who does match. Then you receive a kidney that has been matched to you from a different

Deceased Donor

- A transplant that comes from a deceased donor
- Wait times for deceased donor transplants can take from 3 to several years. Each transplant center has different wait times.

Check with your local transplant center to get the most up to date information for your area

Conservative Management

- Health care team continues your care without dialysis or transplant.
- Focus of care is on quality of life and symptom control

Compare the Treatment Options

Think about what is most important to you to help determine the modality which fits you best!

Home Dialysis Treatments Compared



Home Treatments Compared: Pluses +

	CAPD	CCPD	Conventional HHD	Daily HHD	Nocturnal HHD	In-center HHD
More-normal diet and fluids	✓	✓	✓	✓	✓	
More dialysis to feel better			✓	✓	✓	
Work-friendly treatment	✓	✓	✓	✓	✓	
Puts you in charge	✓	✓	✓	✓	✓	
You're not around sick people	✓	✓	✓	✓	✓	
Fewer ups & downs in how you feel	✓	✓		✓	✓	
Portable – take it with you	✓	✓		✓		
Flexible – suits your schedule	✓	✓	✓	✓		
Available in every state	✓	✓	✓	✓	✓	✓
Needle-free treatments	✓	✓				
Have your days free		✓			✓	
Learn it in a week or two	✓	✓				
Fistula likely to last longer			✓	✓	✓	

Home Treatments Compared: Minuses -

	CAPD	CCPD	Conventional HHD	Daily HHD	Nocturnal HHD	In-center HHD
Need to visit clinic 3 times a week						✓
Supply storage space needed	✓	✓	✓	✓	✓	
Infection is a risk	✓	✓	✓	✓	✓	✓
Can affect body image	✓	✓	✓	✓	✓	✓
Weight gain from dialysate	✓	✓				
Limits swimming, tub bathing	✓	✓			✓	✓
Lack of privacy						✓
A partner is needed			✓	✓	✓	
Takes several weeks of training			✓	✓	✓	
Plumbing/wiring may be needed			✓		✓	

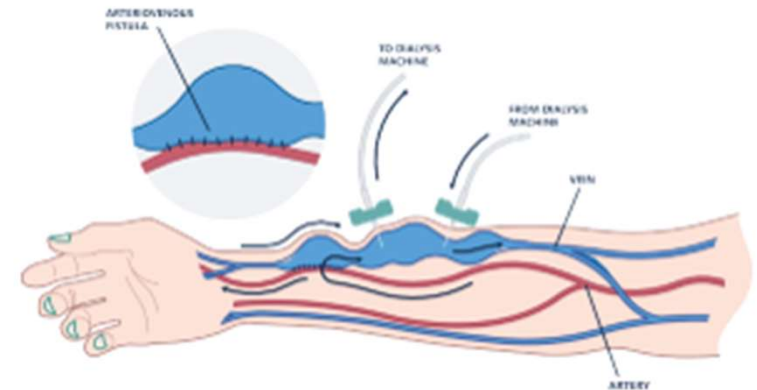
Understanding the Dialysis Access

The vascular dialysis access is a way to reach blood for hemodialysis.

Fistula

A surgical connection of a vein and an artery. This creates a larger blood vessel with strong blood flow. It may take up to 4 months before it can be used.

A fistula is the “preferred” access. It typically lasts longer and has fewer infections and complications than other access.



Day to day care for your dialysis access include:

- No blood pressures to be taken, blood drawn, or an IV line started on the access arm.
- Avoid sleeping on your access arm.
- Do not wear tight clothing or jewelry over the access site.
- Usually no more than 10 pounds can be carried using the access arm.
- Keep your access clean and protected!
- These helpful hints will aid in avoiding infections, blood clots, and other problems with your dialysis access.

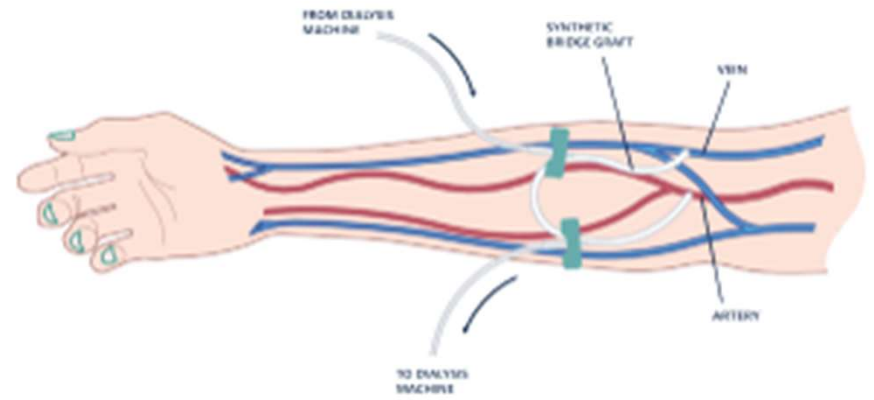
Understanding the Dialysis Access

The vascular dialysis access is a way to reach blood for hemodialysis.

Graft

An artificial segment of tubing implanted under the skin used to connect an artery to a vein. This access may be used after 2–3 weeks.

This would be considered the 2nd best choice of dialysis access.



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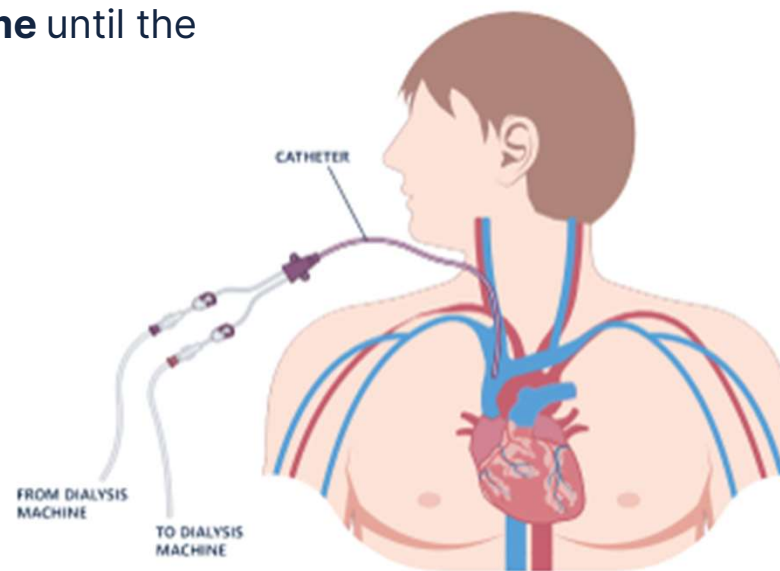
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Understanding the Dialysis Access

The vascular dialysis access is a way to reach blood for hemodialysis.

Central Venous Catheter (CVC)

A CVC is tubing placed under the skin into a large central vein usually in the neck area. CVCs are meant to be used for a **short time** until the fistula or graft is ready.

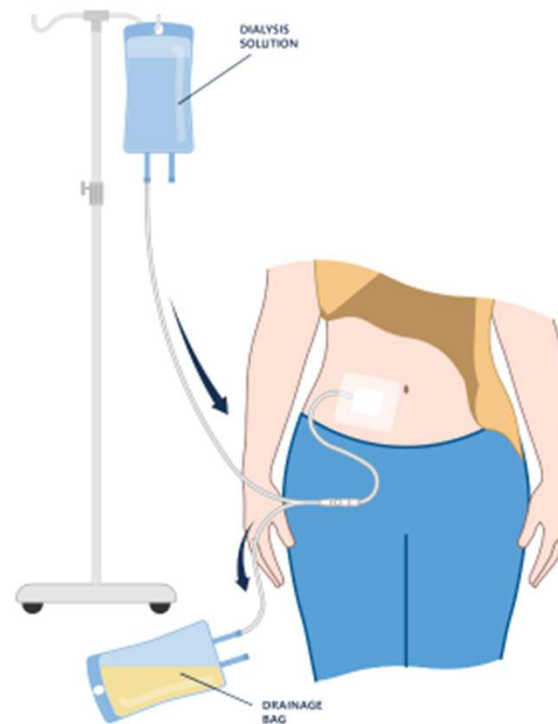


Understanding the Dialysis Access

The PD catheter is a way for fluid to reach the abdominal cavity.

Peritoneal Dialysis (PD) Catheter

A PD catheter is usually placed in the lower abdomen and a couple inches away from the belly button. This tube allows for fluid to flow in and out of the abdominal or peritoneal cavity for dialysis to work.



Peritoneal Dialysis

What is Peritoneal Dialysis (PD)?

PD is a type of dialysis treatment that can be done by you in the comfort of your own home after completing a PD training program with your home nurse.

You can do PD two different ways

CAPD (Continuous Ambulatory Peritoneal Dialysis)

- Exchanges are done 2-4 times a day (20 - 40 minutes to complete)
- Disconnect and go about your normal activities during “dwell” time

APD (Automated Peritoneal Dialysis)

- Using a PD Cycler machine overnight
- PD Cycler moves the dialysate in, leaves it to dwell, and drains it out
- Frequency of cycles is set up on the machine and prescribed by your kidney doctor

The type of PD you choose will depend on your lifestyle and your doctor's prescription



Home Hemodialysis

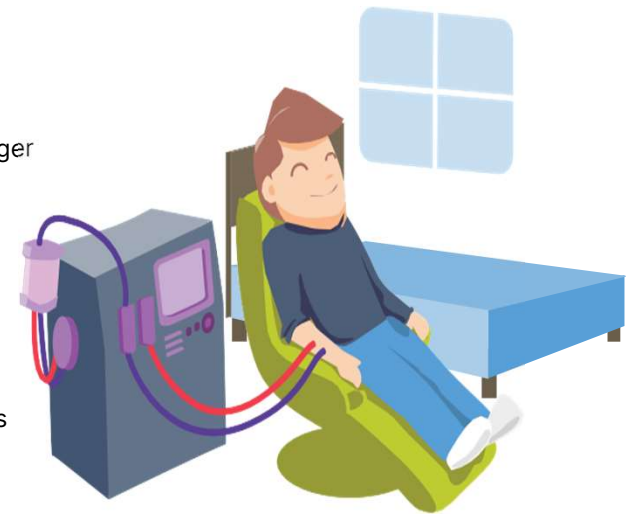
What is Home Hemodialysis (HHD)?

HHD is a treatment that you can do independently or with a care partner in the comfort of your own home.

- HHD is dialysis treatment that you and a dialysis care-partner can learn to do independently under the supervision of your dialysis team in the comfort of your own home.
- During home hemodialysis (like in-center dialysis), your blood is filtered outside of your body through an artificial kidney or “dialyzer”.
- The “dialyzer” cleans your blood by getting rid of the waste products and toxins that your own kidney can no longer remove. After your blood is cleaned, it is returned to your body.

HHD training and other considerations

- All training is individualized to meet each patient’s specific needs. Training time varies and may take from approximately 4 – 6 weeks
- You will train with your nurse until you can safely perform your treatments at home
- You will need to find a space with good lighting and a comfortable chair where you can complete your treatments
- You will need space for your supplies
- You will need to connect to a water source and have a drain nearby
- Being successful requires dedication from you (and your partner), but HHD can offer many advantages when compared to standard in-center hemodialysis



In-Center Dialysis

Considerations for ICHD

- Your treatment schedule is fixed
- You will need transportation back and forth for your treatment 3 times per week
- You can read, watch TV, listen to music, socialize, or just rest while having your treatment

During your treatment

- You will weigh when you arrive and have your blood pressure, pulse and temperature taken before treatment and throughout
- You will be taught how to care for your dialysis access
- Labs are drawn and reviewed while on treatment
- Ongoing education and information is shared with all patients on how to stay healthy and safe



Transplant

Types of Kidney Donations

- **Living**

- Occurs when a patient receives a kidney from a live person – friend, family or other
- Benefits include
 - Shorter transplant wait time
 - Better organ function
 - Shorter hospitalization stays with easier recovery

- **Paired**

- If your donor does not match you, they give the donor kidney to someone who does match. You receive a kidney that matches you from a different donor.

- **Deceased**

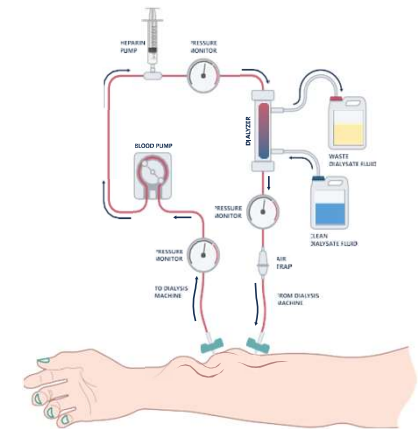
- The transplant comes from a deceased donor
- Wait times vary but may be 3 to several years



What Happens During Dialysis?

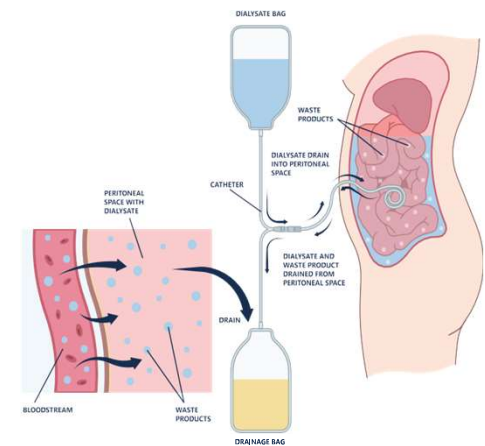
Hemodialysis (HD)

- Two needles are placed in the fistula or graft (the access) for each treatment.
- One pulls the blood out and it travels through the tubing, passes through the filter or dialyzer and returns through the other needle.
- As the blood passes through the dialyzer, it removes waste and extra fluid.



Peritoneal dialysis (PD):

- During PD, fluid or dialysate is drained through a tube into your abdominal or peritoneal cavity. The tube is called a PD catheter.
- The dialysate draws waste products and extra fluid across the abdominal lining or peritoneum.
- After some time, it is then drained from the body and the process repeated.



Either type of dialysis must have an access to perform the therapy

Questions?

Speak with your Nephrologist