

CKD Education

TREATMENT OPTIONS (HEMODIALYSIS)



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HEMODIALYSIS

Blood is filtered outside of your body

- Blood flows through sterile tubing to a filter
- Continuously filtered during the dialysis treatment, and returned to your bloodstream

Only a small amount of blood is outside of your body at one time

Hemodialysis can be done in a dialysis center or at home

- Requires care partner at home

HEMODIALYSIS SCHEDULE

Typical in-center hemodialysis schedule:

- Three days per week (Mon, Wed, Fri or Tue, Thur, Sat)
- You are assigned an appointment time (morning, midday, or afternoon)
- Four hours per dialysis treatment



VASCULAR ACCESS

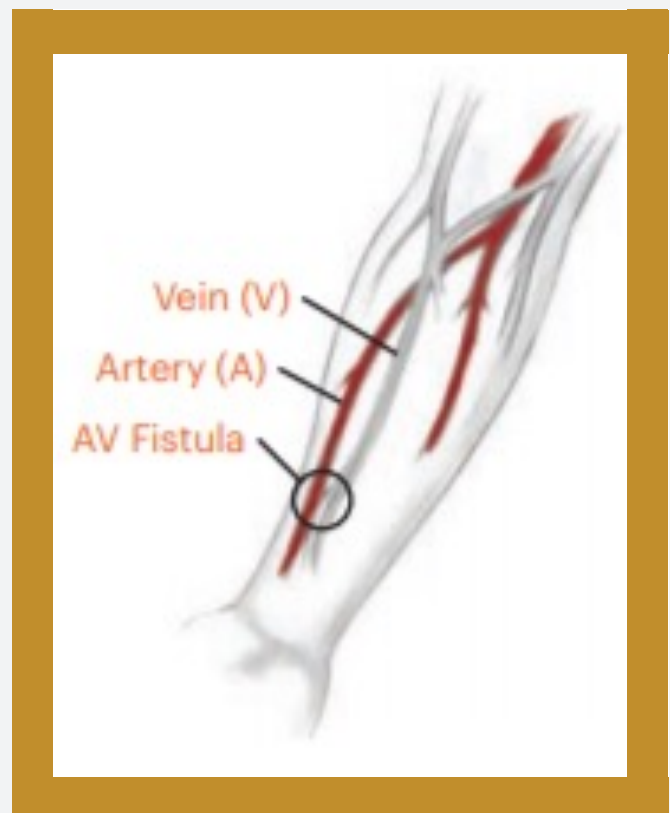
Provides reliable access for blood to get from your body to the dialysis machine

- Arteriovenous fistula
- Arteriovenous graft
- Central venous catheter

ARTERIOVENOUS FISTULA

Fistula is the **best choice** of access for most people.

- Surgical connection between your own vessels (vein and artery)
 - No foreign materials
 - Lower infection risk
- Created by a vascular surgeon
 - Consultation, vein mapping, surgery
- Needs to be created **months** in advance of when dialysis may begin
 - Takes time to mature

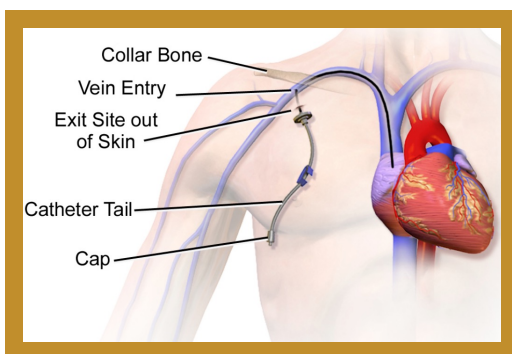


ARTERIOVENOUS GRAFT

Composite material used to connect an artery and vein.

- Useful if the surgeon determines that a natural connection cannot be made
 - Vessels unsuitable for connection/too small
 - Determined on vein mapping
- Compared to fistula
 - Higher risk of clotting off
 - Higher risk of infection
 - Can be used sooner after surgery

CENTRAL VENOUS CATHETER



LAST OPTION

- Useful in emergency situations, i.e. when dialysis needs to be started unexpectedly
- Used when all other vascular options (fistula, graft) have been exhausted
- Plastic tube placed into a vein in your neck, and threaded to your heart
 - Foreign material within bloodstream
 - Higher risk of infection
 - Higher risk of clotting

One goal is to establish a fistula early, in order to avoid needing a catheter.

HEMODIALYSIS PROS & CONS

PROS

- Does not require daily sessions
 - You have “off” days
- In-person access to your care team
- No limitations on swimming/bathing (unless CVC)
- No abdominal girth increase

CONS

- Diet and fluid restrictions
- Needle placement
- Set schedule/appointment time
- Side effects may be more likely
 - Related to less frequent schedule/shorter treatment duration compared to PD
 - Cramps, nausea, fatigue



TRAVEL LOGISTICS



You can travel, regardless of type of dialysis

Requires planning:

- For hemodialysis, requires making a reservation at a nearby dialysis facility
 - Staff at your “home” dialysis facility can help to arrange
- For peritoneal dialysis, requires transportation of dialysis materials +/- machine if using a cycler

YOUR DIALYSIS CARE TEAM

Like PD, you have access to a robust care team with hemodialysis:

- Physician (nephrologist)
- Advanced Practice Provider
 - Physician Assistant
 - Nurse Practitioner
- Hemodialysis nurse
- Patient care technician (PCT)
- Dietitian
- Social worker

QUESTIONS?

InterMed Consultants has been providing renowned kidney care in the Minneapolis area, as well as greater Minnesota, since 1979.

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