

Have you thought about
DIALYSIS
at **HOME?**

There is more than one
way to treat kidney failure.



**Choosing your treatment is
about helping you live your life.**

GETTING INVOLVED REALLY MATTERS

You'll feel more in charge if you take an active role in the decision.

Your kidney team should tell you about all treatment options and the pros and cons of each. But **you** make the choice based on your needs, lifestyle, medical conditions, and current level of kidney function. In order to make this decision, you need to learn about all the treatments.



What are the first steps?

Learn about the different options for treatment of kidney failure.

- Talk to the professionals who are treating you.
- Ask questions:
 - What treatments are done at home?
 - Am I eligible for home treatments?
 - How will my choice of treatment affect my health and lifestyle?
 - At this point in my kidney disease, is one choice better than another?
 - Will one treatment better protect my remaining kidney function? Which one?



■ **Think about how this decision will affect your life.** The choice of treatment should help you accomplish your goals, not stand in the way of them. Ask yourself: What are my life goals? Will my choice affect things like continuing to work or traveling? How will my choice affect my health, like keeping my current kidney function or getting a transplant?

■ **Talk to your family, friends and other people who care about you.** When you have kidney disease, it affects everyone in your life. This can include your spouse, your children, family and friends—even those from church or work. They may want to share their opinions about the treatment decision. They might be able to offer insight.

Where can you learn about your options?

When you have kidney disease, a team of professionals (your kidney team) will help you understand how your choice will affect your life.

Ask questions to be sure what the right option is for you.

Discuss the things that are most important to you and any concerns or worries you may have.

Visit the National Kidney Foundation website www.kidney.org for helpful resources.

Take an “options education” class. Look for the National Kidney Foundation program, “Your Treatment, Your Choice™,” or other options education programs in your area.

Talk with other patients who have used different types of dialysis or received a transplant.

Go to the Internet and search key words like “kidney failure,” “home dialysis” or “kidney transplant.”

Discuss the pros and cons of each option with your kidney team. See the list in this brochure on page 12. Take it with you on your next office visit.

Ask the questions and write down the answers. Talk over the answers with the people you care about and who care about you.

What do other people in this situation decide? Why do people choose home treatments?

Your choices are transplant, peritoneal dialysis, home hemodialysis, and in-center hemodialysis. You want to fully understand these options. You should explore kidney transplant as early as possible. Many people do not realize they are candidates for kidney transplantation.

Even if your kidney team doesn't offer one of these options, you should learn about it and find out if you are medically eligible.

Often people let the professional kidney team decide for them. Many people are not aware there are different options.

Home therapy has been around since the 1980s and tens of thousands of people in the U.S. get kidney failure treatments at home. Thousands more people still get treatments in dialysis centers, but home treatment is becoming more popular each year. Patients like the flexible schedule and many say they have more energy and feel better.

You also have the right to choose not to get treatment.



*It is important
for you to be
involved in
this decision.*

Can you switch even if you started on one treatment already?

Yes. You are not locked in to any choice. You may do a few different types of dialysis in your life, and you can change from one to another as your needs change. Different options are available because any one treatment isn't right for all people.

Are you sure you know all the facts?

As with any other medical procedures, you want to know all relevant facts before you decide and begin any treatment.

You can and should ask questions to better understand your choices because being involved will really matter in your day-to-day life.



MAKING THE DECISION

▶ *Which treatment?*

▶ *Where?*

▶ *Which type of home dialysis?*

▶ *How often?*

▶ **Which treatment?**

Healthy kidneys remove harmful waste products and excess fluids from your body. If you have kidney failure, your kidneys need help to remove the waste products and fluid.

The first step is to find out whether transplant is an option for you. Ask your kidney team if you are a candidate. Check out the resource section on page 15 to learn more.

The next step is to learn about dialysis. Dialysis replaces some functions of your kidneys. There is more than one way to do dialysis. You have choices about where, what type of dialysis you use, and how often you use it.

▶ **Where?**

Dialysis can be done at home or in a dialysis center.

In a dialysis center, a nurse or technician does what needs to be done. You will have a set dialysis schedule that is at the same time, on the same days (usually three) every week. The dialysis machines are used multiple times a day, most days of the week. In addition to travel time and dialysis time, there will be recovery time after each treatment. You do not need a care partner or training. But you will need transportation to and from the dialysis center. Someone from your kidney team is with you during your dialysis session.



At home (or a clean environment of your choice), you will have a dialysis machine that is smaller than the one used in the center. It was made for use at home and is only used by you. You will receive training on how to do your home dialysis.

For peritoneal dialysis, a partner or support person is not required, but you may want someone at training with you. For home hemodialysis, you will need a partner to help you (spouse, friend) and they will also receive training. You and your partner will perform the treatment. You will see members of your kidney team in their offices or at the center on a regular basis (usually monthly).



Home dialysis is a small change. It's not a drastic change—but you have the freedom to come and go as you please. I have a cyclor at home, but the cyclor works for me. I don't work for it..”

– Renae P.

► Which type of home dialysis?

Each of the dialysis methods can be done in different ways and on different schedules. Each has pros and cons.

There are two types of dialysis at home:

Peritoneal dialysis uses a special solution that goes into your abdomen through a tube called a catheter. Waste products and extra fluid go into the solution. The fluid is drained out and you throw it away. Peritoneal dialysis is often abbreviated as PD.

One type of PD doesn't need a machine, so you can walk around while the dialysis is being done. This is called continuous ambulatory peritoneal dialysis or CAPD.

The other type of PD uses a machine. It is usually done while you sleep. It has several names: cyclor-assisted peritoneal dialysis; continuous cycling peritoneal dialysis (CCPD); or automated peritoneal dialysis (APD).

Home hemodialysis removes blood from the body and cleans it in a machine with a special filter. For hemodialysis, you need a vascular (blood vessel) access. This is a place on your body where the blood is removed and returned. Hemodialysis is often abbreviated as HD.

Whether you are at home or in the center, there will be help available 24 hours a day, seven days a week.

Blood work will be done to be sure you are getting the right amount of dialysis, whether you are at home or in the center.





“

I wanted to go straight to daily nocturnal hemodialysis, but I thought I had to do the three-day-a-week thing first. It wasn't an issue. Nocturnal should not be looked at as a choice you have only after you have gone through all the others. I did it so I could have more energy, a more normal diet and be far less restricted. To me, it's a logical first step.”

– Michael P.

► How often?

There are a few different dialysis schedules patients tend to follow:

- Daily—either three to four times a day/seven days a week or for eight to ten hours at night/seven days a week (PD)
- Short daily—five to seven times a week for about two hours each time (HHD)
- Nocturnal (night-time)—four to six nights a week for six to eight hours each time (HHD and some dialysis centers)
- Conventional—three times a week for three to four hours or longer each time (HHD or dialysis center).

More frequent dialysis may be better for you. When dialysis is done more often, it is more like your natural kidneys. This may have some health benefits. Some people who chose home dialysis have said they had a dramatic improvement in quality of life. They had less fatigue and exhaustion after frequent home dialysis than they did with less frequent in-center dialysis. Other proven benefits of more frequent dialysis are:

- Improved appetite, weight gain and muscle strength
- Fewer restrictions in diet
- Less cramping, fewer headaches, less shortness of breath
- Less build-up of fluids (edema).

MAKING THE DECISION

- ▶ *What about safety?*
- ▶ *How will my choice affect my health?*
- ▶ *What about keeping my remaining kidney function?*
- ▶ *What if I have other medical problems?*

▶ **What about safety?**

Home dialysis treatments have been shown to be as safe as in-center treatments. To ensure your safety, you will be trained on how to do home treatments.

You will be taught what to do if something unusual happens.

You will be checked regularly by your kidney team.

You will always have back-up from the experts by phone 24/7.

Your kidney team will make the decision about the right amount of dialysis for you.

Many years of experience with home treatments have shown its benefits. Over 25,000 people are doing dialysis at home every day. Many studies have demonstrated that people living with kidney disease who know about treatment options often choose a home therapy.

▶ **How will my choice of dialysis affect my health?**

Healthy kidneys work every day, not just three days a week. Home treatments can be used more often. Doing more dialysis means less fluids and waste products build up between treatments. People choose to do dialysis at home because more frequent dialysis may be better for long-term health. Your body, especially your heart and blood vessels, may be better off with more frequent or longer treatments.

Daily dialysis works more like healthy kidneys do. So, there may be advantages to having dialysis more than three times a week, with:

- Better blood pressure control with fewer medicines
- Fewer hospitalizations
- Fewer serious infections.

A number of studies show that more frequent dialysis can increase the survival chances of patients with kidney failure. But, longer term studies are needed to prove this.



With daily home dialysis, I've noticed that I have increased energy, better sleep, and improved concentration at work.

– Bill P

► What about keeping my remaining kidney function?

In most cases, kidneys don't lose all their function when they fail—at least not early on. Having some remaining (called “residual”) kidney function can help you feel better and even live longer. Some treatments preserve the remaining kidney function better than others. Ask your kidney team. Studies show that remaining kidney function is better preserved with PD than hemodialysis. This is an important consideration when evaluating the options to decide the one that is best for your overall health.

► What if I have other medical problems?

Many people can do home dialysis even if they have other health problems. Every patient is different, so it is important to talk to your kidney team and do research about whether home therapies may be right for you. You may also want to talk to other people who have chosen to do dialysis at home.

The two types of dialysis at home are different. Each has different reasons that may prevent your doctor from prescribing the therapy for you.

For peritoneal dialysis, several conditions might limit your choice, including previous abdominal surgeries or the presence of intestinal diseases, such as inflammatory bowel disease or diverticulitis.



Some people with a history of seizures or heart problems or other illness might not be able to do home hemodialysis, even with a partner.

There are other conditions, like poor vision or alcoholism, for example, which may make home treatments less appropriate.

But other medical conditions might not affect having home dialysis at all. Ask your doctor if your medical conditions will affect your choice.

How can I have the lifestyle I want?

► What's the best way to fit dialysis into my schedule?

You do not have to take off time from work to get home dialysis. Home treatment is easier to fit into your schedule if you work. You will not have to travel to the center or wait after your treatment. You can take conference calls or work on a laptop without distractions while you are getting dialysis.

► Can I have more control and more responsibility for my kidney treatments?

With home dialysis you will have the flexibility and control to choose your treatment times, but you will have to be responsible for doing the dialysis. You will also need to make the commitment to receive training. For home HD, you will need a trained partner to help you. Some people prefer to have someone else take control when they have kidney disease. In-center hemodialysis may be a better option for those people.

► Do I want to travel to and from the center three times a week?

With home dialysis, you do not have to make the trip to a dialysis center three times a week. You will need to visit your dialysis center about once a month for a checkup and lab tests and to see your kidney team. You may also need to receive some of your medications, such as iron infusions, at your center.



► Can I go on vacation or a business trip?

Some home machines are portable, so you can have dialysis in a hotel room, at the airport or even an RV. Sometimes, you may choose to arrange for in-center dialysis at your travel destination. Your social worker can help you make those arrangements.

► Will changes be needed at home?

You will need space in your home for your dialysis supplies. You may also need to make some changes to your home for your hemodialysis machine, at your expense. If you choose to do home hemodialysis, you need a partner to help. PD doesn't require a partner.

IMPORTANT QUESTIONS *for Your Kidney Team*

Take this list of questions with you on your next visit. It is important that you know the answers to each of them.

- Am I a candidate for a kidney transplant?
- Do you think I should do dialysis at home or in a center? Why?
- How many treatments each week would be best for me?
- Do you think peritoneal dialysis or hemodialysis is the best treatment choice for me? Why?
- Which treatment type or schedule would best preserve my remaining kidney function?
- What have other people like me chosen?
- Do you usually recommend home or in-center dialysis? Why?
- How will you follow my treatments and my health if I choose home therapy? What if I choose treatment in a center?
- How will these treatments affect my other health problems?

OTHER THINGS *to Think About*

- Would you like to have more frequent treatments for better outcomes?
- How do you feel about not having a trained professional with you at all times, even if you are well-trained to do your home dialysis?
- Where is the closest dialysis center to me?
- Where is the closest center for training for home dialysis?
- What tasks does my care partner do? Which ones do I do?
- What costs will I need to pay for?
- How much will my insurance pay for training?

MAKING THE DECISION

My Choices to Replace Kidney Function

Option	An Option for Me?	What I Like	What I Don't Like
Transplant	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Peritoneal Dialysis (PD) at Home	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Home Hemodialysis (HHD)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
In-Center Hemodialysis (HD)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Fact or Fiction?

I have to do in-center dialysis before I can do home dialysis or get a transplant. FICTION.

Both options are available to people who have never had dialysis in a center.

It can't be as safe to have dialysis in your own home. Am I at more risk of infection? FICTION.

All dialysis treatments have some risks. During your home dialysis training, the nurse will teach you to how to prevent an infection. Home hemodialysis has the same risks for complications as in-center HD, including low blood pressure and infection. But at home you will not be around other people who have infections, so you may be exposed to fewer germs. Risks for peritoneal dialysis include peritonitis or catheter-site infections. You will learn about the signs of infection. And you will stay in touch with your kidney team and your transplant center—no matter what option you chose.

Only young people can do home dialysis. FICTION.

Anyone of any age who is motivated can learn to do home dialysis. There are patients of all ages doing home dialysis, including people in their 90s. But some of the conditions that can come with older age may be a challenge. This includes patients with Alzheimer's disease or Parkinson's disease who might have trouble doing or learning the techniques. Other conditions include very poor vision or partial paralysis after a stroke. Talk to your kidney team.

I was put on in-center dialysis but I'd like to try home treatment. Can I switch? FACT.

No one is locked into any decision. The first step is to write down the reasons you want to make the switch to home dialysis. The next step is to talk to your nurse and doctor about why you want to switch. Your kidney team will help you with the steps to take to make the switch to home treatment.

I can't afford home treatments.

Are You Sure? The clinic will provide a machine for home use or help you get a machine from a supplier. Supplies, such as dialysis solution, will be delivered to your home.

Medicare pays for 80% of the cost of your dialysis treatments, whether you choose to do dialysis at home or in the dialysis center, if you qualify. You should apply for Medicare as soon as possible. Look into private insurance, Veterans Administration support, or whether you qualify for Medicaid.

Your social worker will answer questions about costs and help work out the arrangements.



continued →

Fact or Fiction?

Home dialysis doesn't work as well as hemodialysis in a center. **FICTION.**

The goal of dialysis is to remove waste products and excess fluid. Home dialysis therapies do this as well as hemodialysis in a center. Home treatment also offers some additional health and lifestyle benefits that you do not get with hemodialysis in a center. One important additional benefit is being able to do daily (or almost daily) dialysis. This is more like the natural kidney.

Some potential **health benefits** of home dialysis include:

- Fewer medications
- Fewer hospitalizations
- More energy, and
- Feeling better between and following dialysis treatments.

Some potential **lifestyle benefits** of home dialysis include:

- Setting your own dialysis schedule
- Having more time to work, be with family, travel or hang out with friends, depending on the schedule you choose
- Taking advantage of extra time that you will have, since you won't be traveling to the center. You might choose to spend it going to baseball games, ballet recitals, parties, concerts, shopping or the movies. Or, anything you want to do with more free time every week.

There are different benefits of the two home dialysis methods (peritoneal and home hemodialysis). **FACT.**

Each of those has certain benefits that you don't get with in-center hemodialysis. These are important to think about when making your decision.

For **peritoneal dialysis**, the potential benefits are:

- Keeping whatever function your kidney still has.
- Having better survival during the first months or years of dialysis. (At five years the chance of survival on either hemodialysis or peritoneal dialysis therapy is about the same, but early on, PD is better.)
- Being able to take it where you are going (hotel, RV, airplane) because it is portable.

For **home hemodialysis**, the potential benefits are:

- More enjoyable meals. Fewer foods are off-limits.
- Better outcomes. Nocturnal (nighttime) hemodialysis at home can offer outcomes that are closer to transplant. These outcomes may be better than either in-center hemodialysis or peritoneal dialysis.



Where Can You Find Out More?

The National Kidney Foundation (NKF) has more information about all your options:

- **Transplant**
- **Peritoneal Dialysis (PD)**
- **Home Hemodialysis (HHD)**
- **In-Center Hemodialysis (HD)**

BROCHURES

Call 800.622.9010 or visit the NKF website, www.kidney.org. (A copy of up to five of NKF's brochures is free to patients.)

OPTIONS EDUCATION

Your Treatment, Your Choice[™] educational classes about chronic kidney disease. You may qualify for a new Medicare benefit. Go to www.kidney.org/ytyc. Click on the tab "Patients Do You Qualify?"

OTHER RESOURCES

The National Kidney Foundation also offers:

Patient and Family Council. This is the largest patient organization dedicated to issues affecting patients with chronic kidney disease and their families. Membership is free.

"People Like Us," a patient advocacy initiative.

To find out more about these groups, call NKF at 800.622.9010, or go to www.kidney.org.

Other sources of information

- Learn about Medicare dialysis coverage—1.800.MEDICARE (1.800.633.4227) or www.medicare.gov.
- Home Dialysis Central—Learn about home dialysis options, talk to other patients, find a dialysis center near you that offers home dialysis. www.homedialysis.org.
- www.livenow.info—A good place to get ideas to help you start living on your terms, with hope, optimism and strength. A place to learn more about home dialysis.
- U.S. National Kidney and Urologic Diseases Information Clearinghouse—Download or order booklets on kidney disease at: www.kidney.niddk.nih.gov/kudiseases/pubs/kidneyfailure/index.htm.
- See every type of dialysis in action and meet different dialysis patients who are living their life—www.youtube.com/renalinfo.

The National Kidney Foundation (NKF) is dedicated to preventing kidney and urinary tract diseases, improving the health and well-being of individuals and families affected by these diseases and increasing the availability of all organs for transplantation.

With local offices nationwide, the NKF

- provides early detection screenings and other vital patient and community services,
- conducts extensive public and professional education,
- advocates for patients through legislative action,
- promotes organ donation, and
- supports kidney research to identify new treatments.

The NKF relies on individual and corporate donations, foundation and government grants, membership and special events to support its range of programs, services and initiatives.

