

Peritoneal Dialysis

Kidney failure causes waste products and fluid to eventually build to dangerous levels in the body – different treatments help to remove these and to reduce symptoms of kidney failure.

What is peritoneal dialysis?

Peritoneal dialysis (PD) uses the lining of the abdomen (*'the peritoneum'*) to filter and clear the waste from the blood into dialysis fluid. Clean dialysis fluid goes into the abdominal cavity through a tube in the tummy wall. After a short period, the dialysis fluid is drained out, carrying the waste away from the body, and a new bag of clean fluid goes in (*This process is called an 'exchange'*). You can walk around with the fluid in your tummy whilst the dialysis happens. You will be taught to do the fluid exchanges yourself. Most people get used to the feeling of fluid in their tummy after a few days.

There are two types of PD treatment:

- Continuous ambulatory peritoneal dialysis (CAPD) – this means you have fluid in your tummy all day, and you will do usually three or four fluid exchanges during the day. Each exchange usually takes between 20 and 45 minutes to do. In between doing the exchanges, you can carry on with your usual activities. This type of PD often suits people who are starting on PD treatment.
- Automated peritoneal dialysis (APD) – this means the exchanges happen overnight. You connect the tummy tube to a simple machine, which will move the fluid in and out of the tummy gently through the night. In the morning your treatment is finished, and you disconnect the tube and carry on with a normal day. This type of PD often suits people who want to work, have a busy life during the day. There is an Assisted APD service to support you if you are unable to perform the dialysis yourself.

Health benefits and survival

- PD preserves your remaining kidney function (*you continue to pass urine*) – which is strongly linked to better health. This makes PD a good option if you are making a choice about starting dialysis for the first time.
- PD preserves your veins in case you need a fistula for haemodialysis in the future.
- Common problems with PD include infection (*peritonitis*) and the tube not working. PD treatment is effective for several years for most people. When PD stops working, most people switch to another sort of treatment (*haemodialysis or transplant*).

Quality of life

- No needles!
- You are in control; you can adjust dialysis times to suit your lifestyle and plans for the day.
- You can go on holiday, in the UK or around the world.
- You can work full time. PD will fit around your work routine.
- You can have a shower, swim, exercise, and have sex.

Am I suitable for PD?

- PD is ideal for patients who are starting dialysis for the first time, or waiting for a kidney transplant.
- PD can work for people who have previously been on haemodialysis or already had a kidney transplant.

