Few chronic diseases require the patient commitment and lifestyle alterations that end stage renal disease does. Patients on dialysis have significant dietary restrictions and require a multitude of medications. In-center hemodialysis (HD) schedules are inflexible and require time commitments in excess of 12 hours per week. The inflexibility of in-center HD clearly affects the ability of patients to care for sick children and spouses, work, go to school, and greatly limits their ability to travel. Chronic kidney disease requiring dialysis not only impacts patient morbidity and mortality but also overall satisfaction with care and quality of life. With this in mind, we need to more closely examine opportunities that may improve our dialysis patients’ quality of life. Home dialysis is one such opportunity. Although patients without treatment partners may have physical impairments that exclude them from home dialysis, low education and patient commitment and lifestyle alterations required of end stage renal disease patients, we can provide education regarding the available treatment opportunities. If we were the patient, we would expect no less than to have the opportunity to choose the type of care that best suits our needs.

References

Jennifer Fillaus, DO, is a nephrology fellow, and Troy Plumb, MD, is assistant professor of medicine at the University of Nebraska Medical Center in Omaha.