

Queen Elizabeth Hospital Birmingham



Part of University Hospitals Birmingham
NHS Foundation Trust



Introduction to Haemodialysis

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www.uhb.nhs.uk/patient-information-leaflets.htm

Introduction

Choosing the right treatment option for you can seem very daunting when you have chronic kidney disease (CKD) that is sufficiently advanced for your kidney team to start talking to you about replacing your kidney function with dialysis treatment. Your



decision needs to be guided by your personal lifestyle, support at home and any other illnesses. Each type of treatment has its benefits and points to think about before you make a decision. It is therefore important that you are given information, advice and guidance to enable you to decide on the treatment that's best for you.

This leaflet has been developed for people with CKD to:

- Explain haemodialysis treatment
- Go through some of the benefits and points to think about when considering haemodialysis
- Explain possible complications of haemodialysis

What is haemodialysis?

Haemodialysis is a treatment to remove waste products and fluid from your blood when your own kidneys are no longer able to do this.

How does haemodialysis work?

Haemodialysis treatment replaces the cleaning function of normal healthy kidneys. Blood is taken out of the body and travels round a dialysis machine and through a special filter called a dialyser. The dialyser cleans your blood of waste products, removes any extra fluid and the cleaner blood is then returned to your body. Only



a small amount of blood (approximately a teacup) is out of your body at any one time. For haemodialysis treatment to take place there needs to be a reliable way of getting access to your bloodstream so that blood can be easily passed through the dialysis machine. The best way of getting access to your bloodstream for haemodialysis is to have a fistula made (see the 'Having a fistula for haemodialysis' leaflet). A fistula is where an artery has been joined to a vein so that the vein becomes stronger and bigger. This allows two needles to be inserted into your bloodstream for haemodialysis; one needle takes blood out to be cleaned whilst the other returns cleaned blood back to you.

Sometimes dialysis may be needed before a fistula has been made or is ready to use. If this happens then a haemodialysis line will be placed through the skin into one of the large veins, usually in the



neck or groin (see the 'Haemodialysis line insertion' leaflet).

Most people on haemodialysis need to have three dialysis treatments per week and each treatment lasts at least four hours.

Where can I have my haemodialysis treatment?

There are three choices:

- Home haemodialysis: you are fully trained to perform your treatment at home. This is usually with the help of a family member or friend. Nurses will then visit you from time to time at home
- Shared-care haemodialysis within a dialysis unit: this allows you to take charge of some or all aspects of your care within a dialysis unit. Training will be given and you can take on as much or as little of your care as you feel comfortable with
- Unit based haemodialysis including satellite units. We have several units around the region and would hope to allow you to be able to dialyse in the one closest to your home. These are nurse-led clinics with the nurses performing your dialysis care

In all these cases you will remain under the care of a kidney doctor from the Queen Elizabeth Hospital. If you are dialysing in a satellite unit, the doctor will come to the unit to see you in clinic there.

Benefits and points to think about when considering haemodialysis

Benefits	Considerations
<p>Home haemodialysis:</p> <ul style="list-style-type: none">• Flexibility to dialyse at a time that suits you and fits in with your work, family and lifestyle• To have dialysis in the comfort of your own home• No time spent travelling to a dialysis unit or waiting for your treatment• Freedom to dialyse more frequently if you want. Having more dialysis generally makes you feel better• Greater control over your treatment• You can dialyse overnight	<p>Home haemodialysis:</p> <ul style="list-style-type: none">• You and or your partner/ carer need to be trained to perform the dialysis treatment• Space to store equipment and supplies• Some adjustments will be needed to your home• You may feel you need support of staff around you• There may be other medical conditions which make home haemodialysis unsuitable• You may prefer to be around other patients

Benefit	Considerations
<p>Shared-care within a dialysis unit:</p> <ul style="list-style-type: none"> • Have more control over your treatment • Greater independence and flexibility as not reliant on the nursing staff • Can save time as not waiting for nursing staff to prepare machine 	<p>Shared-care within a dialysis unit:</p> <ul style="list-style-type: none"> • You need to be trained to perform the dialysis treatment • Need to travel to the dialysis unit three times a week • You may not feel well enough to be able to consider shared-care • Not every dialysis unit offers shared care currently • Work may need to fit around your dialysis times
<p>Unit based haemodialysis:</p> <ul style="list-style-type: none"> • Nursing staff performs the dialysis and present during your treatment • You will not need space to store equipment and supplies at home • Other patients at the unit having their treatment at the same time 	<p>Unit based haemodialysis:</p> <ul style="list-style-type: none"> • Need to travel to the dialysis unit three times a week at a set time • Waiting time for your dialysis treatment • Work may need to fit around your dialysis times

Possible complications of haemodialysis

In general, having haemodialysis will make patients with chronic kidney disease feel better and live longer than if they had no treatment. However, it cannot clean the blood as well as a normal kidney and therefore patients may still have some

symptoms. Haemodialysis itself can be associated with some problems but the team will work hard to make sure your treatment is tailored to your body's own requirements to keep these to a minimum.

The following complications may occur:

- Problems with your fistula or dialysis line (e.g. infection, bleeding, blockage, insufficient blood flow)
- Low blood pressure towards the end of dialysis which can make you feel unwell and occasionally require us to give you some fluid into your veins to make you feel better.
- Feeling tired and 'washed out' following your dialysis treatment
- Cramps

Going on holiday

We encourage all patients to go on holiday and maintain as normal a lifestyle as possible. However not every holiday resort can accommodate haemodialysis patients and each dialysis unit will have their own conditions for accepting patients from other units.

Before booking a holiday, please talk to one of your dialysis nurses as they will be able to help you plan your haemodialysis treatment whilst away. Ideally at least 3 months notice is required as special blood tests are required. Some countries are safer to dialyse in than others and we can advise you of the risks before you go.

If you have any questions or require further information, please speak to one of the nurses or doctors.

Where can I find further sources of information?

Further information can be obtained from:

- The National Kidney Federation www.kidney.org.uk
- NHS Choices www.nhs.uk
- The Kidney Patient Guide www.kidneypatientguide.org.uk

You will also find local information leaflets within the different renal departments. A wide range of patient information leaflet and fact sheets are available through the University Hospitals Birmingham NHS Foundation Trust website and can be accessed via: www.uhb.nhs.uk/renal



The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4957.

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