



What I should know about Haemodialysis

Introduction

Haemodialysis is the process of removing waste products and excess fluid which build up in the body when the kidneys stop working. It also regulates the balance of fluid, salts and minerals carried in the bloodstream.



For this treatment you sit in a comfortable/adjustable chair and are connected to a machine which cleans your blood. The process is not painful and you can pass the time by reading, watching TV, sleeping or talking to other patients.

You can have haemodialysis at home but if this is not possible you can attend the renal unit **three times a week, every week**. Dialysis usually takes four hours every visit.

You still need to have dialysis if you feel unwell.

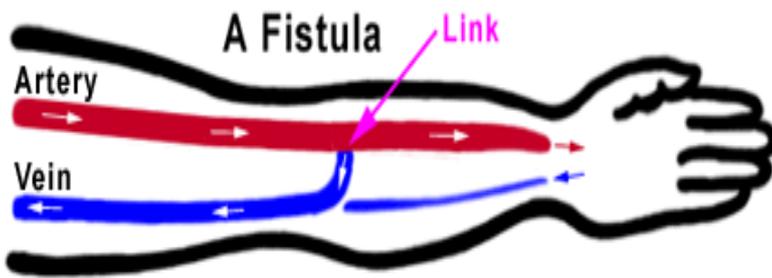
How does haemodialysis work?

Blood is taken from the body and passed through a filter called a dialyser attached to the machine. The dialyser has thousands of small hollow tubes, which the blood flows through. Clean dialysis fluid flows past the other side.

Excess fluid and substances are pulled through the tubes from the blood until the correct balance is achieved and the clean blood is returned to the body. Only a small amount of blood is passed through the filter at any given time, so dialysis usually lasts for 4 hours three times a week.

Access

Blood is taken from you to the dialyser and returned through dialysis lines (plastic tubes) which are connected in one of three ways:



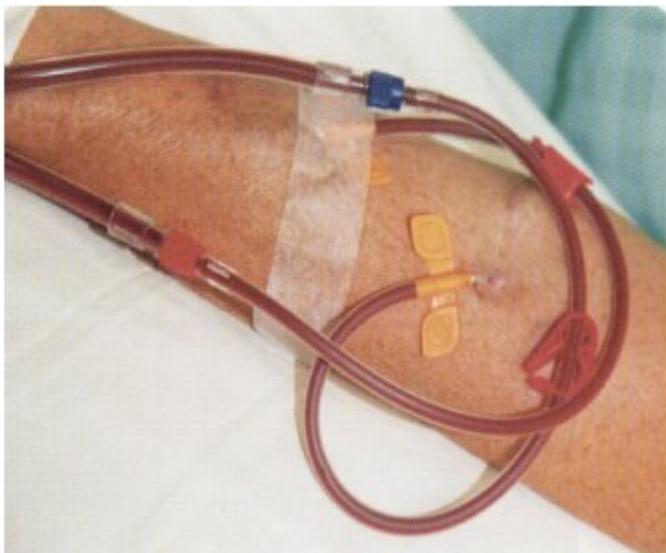
Fistula

Fistula is the joining of a vein and an artery just under the skin which takes place in an operating theatre, usually under a local anaesthetic.

The fistula takes about six weeks to enlarge to allow needles to be inserted and removed after each treatment.

Local anaesthetic is used to numb the area before the needles are inserted. Between treatments a small scar and swelling is visible.

A fistula is the preferred method of access, as the risk of infection is much lower than with the use of central venous catheters and the dialysis much more efficient.



Central Venous Catheter

A soft plastic tube inserted into the jugular vein. This protrudes and is capped off and left in place when not in use.

Graft

A plastic connecting tube joins an artery to a vein if required. This is carried out by a surgeon in the operating theatre.

Information is given to everyone about the care of their access.

Fluid / Diet Restrictions

Fluid and diet restrictions may be introduced depending on how much the kidneys are working and how much urine is passed. 'Fluid overload' may occur if patients do not keep to their restrictions, which causes excess fluid to collect in the ankles and also in the lungs which causes shortness of breath. Constantly being fluid overloaded causes the blood pressure to rise.

Dietary restrictions may be introduced to avoid foods high in potassium, phosphate and salt.

Blood tests are carried out monthly to review your dialysis treatment with an allocated nurse who is responsible for your care.

Medications

Alongside diet and dialysis, most patients will need to take a number of prescribed medications.

How will I feel on dialysis?

Some patients occasionally report feeling tired, loss of appetite, cramps and vomiting.

Other members of our team

The renal unit works closely with other multi-disciplinary team members:

- Advanced Kidney Care Team
- Medical doctors
- Dieticians
- Social Worker
- Access Nurse
- Anaemia Nurse
- Occupational Therapist

Where will I have dialysis?

Ideally you will be able to have your dialysis at home but if this is not possible we have a number of dialysis units located around the West Midlands. We aim to dialyse patients as close as possible to their home but unfortunately there is **limited space** at certain units.

If you have not started treatment at your preferred unit we will try to move you as soon as possible. At times it may be necessary to re-organise days, times and venue of dialysis to ensure that all patient needs are met.

The units are:

- | | |
|------------------------------|---------------|
| • Heartlands Hospital | 0121 424 1160 |
| • Solihull Hospital | 0121 424 5535 |
| • Castle Vale | 0121 685 5226 |
| • Runcorn Rd (Balsall Heath) | 0121 685 5517 |

When will I have dialysis?

If dialysing at home this can be flexible but will need to be at least 3 times a week at regular intervals across the week.

Unit based Haemodialysis usually takes place 3 times a week so you have slots on Monday, Wednesday and Friday or Tuesday, Thursday and Saturday.

Most of the units run 3 shifts, morning afternoon and evening. Where possible we try to accommodate patient's preference but this will depend on availability. Patients who work, often prefer the evening shift.

Can I learn to do my dialysis?

If you are dialysing at a unit we will encourage you to be involved in your treatment. This is called shared care. Initially you will be taught to wash your hands, check your blood pressure, take your temperature and weight prior to each dialysis session. If you wish, you can gradually learn further steps in the dialysis process until you can self-care.

Many patients prefer to do their dialysis at home. If you wish to do this you will undergo the shared care training programme over a few months until you are totally independent.

Will I be able to go on holiday?

It is possible to have holidays as a dialysis patient. You will still require your dialysis treatment but it may be possible to arrange this near you holiday destination in Britain or abroad.

If you wish to travel you must first get medical approval from a kidney consultant then contact the renal administrator manager to discuss your holiday dialysis needs. At least 3 months notice is required.

Further Sources of Information

If you would like more information about kidney failure you can contact our pre dialysis team on: 0121 424 2677. You can also access the National Kidney Federation via the internet. Email address: www.kidney.org.uk

Renal PatientView (RPV)

Renal PatientView (RPV) is the UK renal community's pioneering project that gives patients rapid access to their results and information about their diagnosis and treatment, via a secure Internet login.

If you have access to the Internet you can try the system www.renalpatientview.org

Demo logins are available from the foot of the home page (limited; no TP status etc). For more information about the project please ask a member of the renal team.

Accessibility

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