

Home dialysis may be better than in-center hemodialysis for patients with kidney failure

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Home dialysis therapies may help prolong the lives kidney disease," said Dr. Stack. "Such an approach of patients with kidney failure compared with hemodialysis treatments administered in medical centers, according to a study that will be presented at ASN Kidney Week 2014 November 11-16 at the Pennsylvania Convention Center in Philadelphia, PA.

Home dialysis therapies are more convenient and less expensive than in-center treatment, but it's unclear whether all home therapies—which include peritoneal dialysis and home hemodialysis—can prolong patients' survival. Researchers led by Austin Stack, MD, MBBCh, FASN (Graduate Entry Medical School, University of Limerick, in Ireland) analyzed national data to compare dialysis survival among 585,911 patients who started dialysis in the United States between 2005 and 2010.

Among the major findings:

- Patients who were treated with peritoneal dialysis were about 10% less likely to die during the study period than patients treated with standard 3-times per week incenter hemodialysis.
- Patients receiving high frequency home hemodialysis delivered 6 times per week were 26% less likely to die during the study period than those receiving standard incenter hemodialysis.
- Patients receiving less frequent home hemodialysis (4 or 5 times per week) had mortality risks that were similar to those of patients receiving in-center hemodialysis.
- Patients receiving home hemodialysis at a frequency of 3 times per week were 47% more likely to die than patients receiving incenter hemodialysis.

"We suggest that a treatment approach that adopts a peritoneal dialysis first or frequent home hemodialysis first strategy should be considered for all suitable patients who develop end stage

may offer superior survival, better quality of life, and be cost effective for national health care systems."

More information: Study: "Survival Differences between Home Dialysis Therapies and In-center Haemodialysis: A National Cohort Study" (Abstract SA-PO957)

Provided by American Society of Nephrology



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