

YOUR VALUES
YOUR PREFERENCES
YOUR CHOICE

Allina Health 

Treatment Options for Chronic Kidney Disease

Transplant, Hemodialysis, Peritoneal Dialysis, Palliative Care and Hospice Care



Understanding Chronic Kidney Disease

Your Kidney

Your kidneys are two bean-shaped organs. Each kidney is about the size of a fist.

Your kidneys have many important jobs. They act as filters and remove extra fluid and wastes out from your blood in the form of urine.

Your kidneys also make hormones that affect your blood pressure, make red blood cells, keep your bones strong and balance blood chemicals in your body called electrolytes.

Chronic Kidney Disease

In the advanced stages of chronic kidney disease your kidneys cannot filter your blood the way they should. Kidney disease often can get worse over time and may lead to kidney failure.

Blood tests are used to measure how well your kidneys are working. Glomerular filtration rate (GFR) is the best and most common way to measure how your kidney works. The GFR is used to determine what stage of kidney disease you are in.

People who have advanced chronic kidney disease are between stages 4 and 5:

- **Stage 4:** GFR levels are between 15 and 29
- **Stage 5:** GFR levels are less than 15.

As your chronic kidney disease gets worse, medicines are often used to manage the jobs your kidneys are failing to do. There may be medicines that can help slow the progression of kidney disease but they cannot cure it.

End Stage Kidney Disease

Many forms of kidney disease are irreversible. End stage kidney disease is the term used to describe stage 5 advanced kidney disease. This can be life-threatening.

Symptoms may include high blood pressure, severe fatigue, upset stomach (nausea), throwing up (vomiting) and being unable to urinate as much as normal. End stage kidney disease is the term used to describe stage 5 chronic kidney disease that produces severe symptoms.

Treatment options for end stage kidney disease include:

- transplant
- hemodialysis
- peritoneal dialysis
- palliative care
- hospice care.

Treatment Options

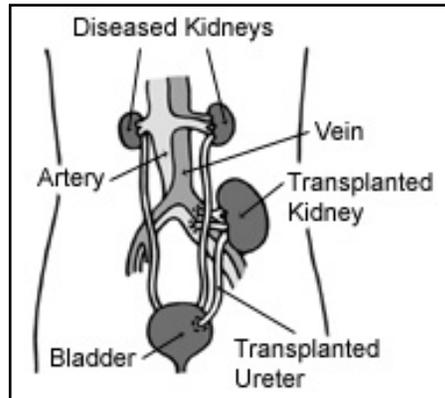
Transplant

A kidney transplant involves having a healthy kidney from another person placed into the body.

A transplant is a treatment, not a cure. You will still need to see multiple health care providers regularly, including your nephrologist (kidney doctor). You also will need to take medicines every day to make sure your body does not reject the new kidney.

A transplant is often the best treatment if you meet specific guidelines such as age or other health risks.

Without a living donor, you may need to wait 5 to 7 years for a deceased kidney donor. You may benefit from an early referral to a transplant center. Your kidney specialist will refer you to a kidney transplant center if a transplant is right for you.



Source: National Institute of Health

The transplanted kidney is attached to your artery and vein.

Dialysis

Dialysis is the process of removing waste and fluid out of your blood.

Dialysis is needed for most people who have end stage kidney disease, even for some who are waiting for a transplant.

It is important you do not start dialysis with an IV catheter. This will increase your risk of infection. This means you may need a shunt placed in your arm many months before you start dialysis. This is something you will need to talk to your kidney specialist about.

There are two options for dialysis:

- hemodialysis
- peritoneal.

Treatment Options (continued)

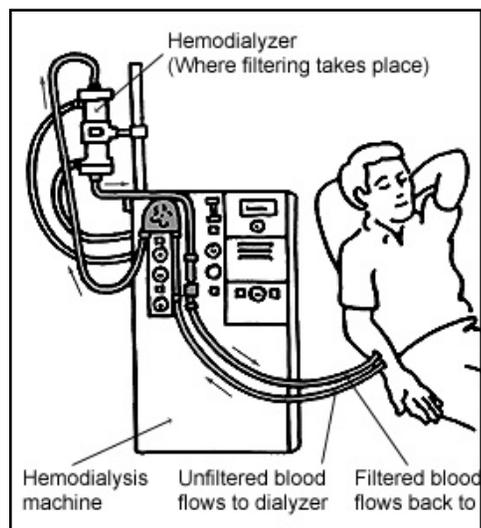
Hemodialysis

Hemodialysis involves directly removing blood from your body, passing it through a filter and returning the filtered blood back to you. This usually takes 3 to 5 hours and is performed 3 times a week.

The safest way to begin dialysis is to have a shunt placed in your arm many months before you start dialysis.

If you do not have a shunt placed before you start hemodialysis, you may need to have an emergency IV catheter placed.

Hemodialysis can be done at home or in a dialysis center or clinic.



Source: National Institute of Health

A machine filters waste products out of your blood and returns the cleaned blood to your body. The hemodialyzer uses a special solution that cleans your blood and balances the chemicals.

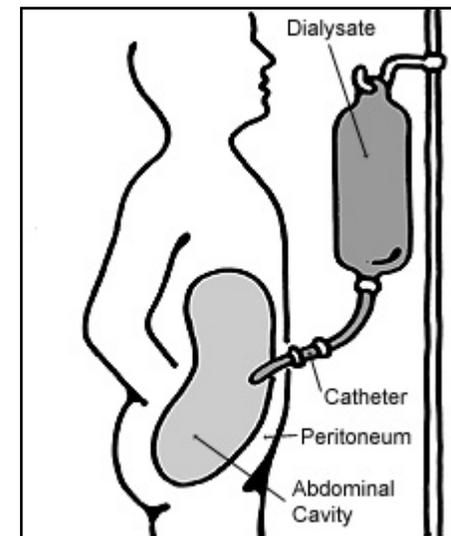
Peritoneal Dialysis

Peritoneal dialysis is a way to remove waste and fluid without a machine

Peritoneal dialysis uses the lining of your abdomen (belly) to filter your blood inside your body. A doctor will place a soft tube (catheter) in your belly a few weeks before you start treatment.

Peritoneal dialysis must be done every day. You will be able to do it at home. Most patients on peritoneal dialysis do it at night, while sleeping. This gives you the freedom to do everyday activities.

Many kidney specialists will recommend you have a shunt placed in your arm even if you choose peritoneal dialysis.



Source: National Institute of Health

The process of draining and filling takes about 30 to 40 minutes.

Treatment Options (continued)

Palliative Care

Palliative care is for anyone who has a serious illness. You can receive palliative care while you are on dialysis. It addresses your symptoms and emotional and spiritual concerns. Members of your health care team will help you with:

- financial options
- finding community resource options
- preparing a health care directive.

Palliative care may decrease the number of times you have hospital stays and it may help you avoid unnecessary Emergency Department visits.

Palliative care is covered by most insurers, including Medicare, Medicaid and private insurers.

Hospice Care

Some people choose not to do transplant or dialysis. Dialysis may not make patients feel better. Your kidney doctor may talk to you about hospice care if this is the case for you.

Hospice focuses on your comfort and quality of life while treating your physical, emotional and spiritual needs. The focus is on comfort and providing the highest quality of life possible.

You and members of your care circle may find peace of mind knowing the end-stage of your treatment can be managed outside of the hospital.

Comparing Your Options

| | Transplant | Hemodialysis |
|---|---|---|
| Schedule <ul style="list-style-type: none"> — <i>What is my treatment schedule?</i> — <i>Where will my treatment be done?</i> | <ul style="list-style-type: none"> ■ You will still need to see your health care provider regularly (multiple times a year) after your transplant. ■ You will have your transplant done at a hospital or transplant center. | <ul style="list-style-type: none"> ■ You will need to have 3 treatments each week for 3 to 5 hours. ■ You may be able to perform dialysis at home or in a dialysis center. |
| Responsibility <ul style="list-style-type: none"> — <i>What is my role in treatment?</i> — <i>What is the role of my care team in treatment?</i> | <ul style="list-style-type: none"> ■ You will need to take medicines every day after the transplant. ■ After the transplant you will need: <ul style="list-style-type: none"> — help getting to and from appointments — someone at home to help you with recovery. | <ul style="list-style-type: none"> ■ You will need to have a shunt placed before you start treatment. ■ You may receive help from a nurse or be trained to perform hemodialysis on your own. |
| Access to Treatment <ul style="list-style-type: none"> — <i>When will I be able to begin treatment?</i> — <i>Will my insurance cover this treatment?</i> | <ul style="list-style-type: none"> ■ You will be able to have a transplant if you qualify. ■ You may have to wait up to 5 to 7 years for a donor. ■ Call your insurance provider to find out what is covered and what you may have to pay out of pocket. | <ul style="list-style-type: none"> ■ You will be able to start treatment right away. ■ Call your insurance provider to find out what is covered and what you may have to pay out of pocket. |
| Risks <ul style="list-style-type: none"> — <i>Are there any side effects?</i> | <ul style="list-style-type: none"> ■ Side effects may include: <ul style="list-style-type: none"> — rejection of the new kidney — infection — high blood pressure — high blood glucose. | <ul style="list-style-type: none"> ■ Side effects may include: <ul style="list-style-type: none"> — bleeding — headaches — infection — low blood pressure — muscle cramps. |

Comparing Your Options (continued)

| | Peritoneal Dialysis | Palliative Care | Hospice Care |
|---|---|---|---|
| Schedule <ul style="list-style-type: none"> — <i>What is my treatment schedule?</i> — <i>Where will my treatment be done?</i> | <ul style="list-style-type: none"> ■ You will need up to 6 exchanges a day or 3 to 5 exchanges at night. ■ You will need to perform your exchanges in a clean environment. | You will receive care at home, a clinic, hospital or other care setting. | You will receive care at home or another care setting. |
| Responsibility <ul style="list-style-type: none"> — <i>What is my role in treatment?</i> — <i>What is the role of my care team in treatment?</i> | <ul style="list-style-type: none"> ■ You will need to attend several training sessions to learn how to do an exchange on your own. ■ You will need a place to store bags of dialysis solution. | Members of your health care team will help find a care plan that allows you to be as independent as possible. | Members of your health care team will focus on treating your physical, emotional and spiritual needs. |
| Access to Treatment <ul style="list-style-type: none"> — <i>When will I be able to begin treatment?</i> — <i>Will my insurance cover this treatment?</i> | <ul style="list-style-type: none"> ■ You will be able to start treatment right away. ■ Call your insurance provider to find out what is covered and what you may have to pay out of pocket. | <ul style="list-style-type: none"> ■ You have 2 years or less to live. ■ Call your insurance provider to find out what is covered and what you may have to pay out of pocket. | <ul style="list-style-type: none"> ■ You have 6 months or less to live. ■ You will be able to start treatment right away. ■ Call your insurance provider to find out what is covered and what you may have to pay out of pocket. |
| Risks <ul style="list-style-type: none"> — <i>Are there any side effects?</i> | <ul style="list-style-type: none"> ■ Side effects may include: <ul style="list-style-type: none"> — infection — headaches — low blood pressure — muscle cramps. | <ul style="list-style-type: none"> ■ Palliative care will help decrease the number of hospital visits. ■ You can continue your treatment with transplant and dialysis. | <ul style="list-style-type: none"> ■ Hospice care will focus on your comfort and quality of life. ■ You will not be able to continue your treatment with dialysis. |

My Preferences

| Questions | My Thoughts |
|---|-------------|
| As you think about the possible risks, what are your fears or concerns? | |
| As you think about your options, what are your hopes and goals? | |
| Are you clear about the benefits and risks of each option? What matters most to you? | |
| Which of these options, at this time, do you feel fits best with your treatment goals? | |
| Is there anything that may get in the way of you doing this? | |
| Do you feel you have enough support and information? | |

My Preference at This Time

transplant
 hemodialysis
 peritoneal dialysis
 palliative care
 hospice care

Next Steps

Questions for Your Health Care Provider

1. What is the best treatment option for me?
2. How will I know I am ready to leave the hospital?
3. Do I need help making appointments, transportation and paying for treatment?
4. How likely am I to benefit from the option I prefer?
5. What location(s) offer the option I prefer?
6. What red flags should I watch for?
7. Is there a difference in the quality of care at different locations?
8. Is there a difference in how my care will be coordinated at different locations?
9. What kind of therapy will I need?
10. What is the next step for me?
11. Other questions and notes? _____

Next Steps

Questions for Your Insurance Provider

It is important for you to understand your health care benefits as you make your treatment decision.

Call your insurance provider and find out exactly what is and is not covered under your plan, and how much you have to pay yourself. Look for the telephone number on your membership card.

1. Which options are covered?
2. Are any of the options in my network?
3. Are there specific requirements or criteria I need to meet in order to get the option I choose?
4. How many therapy visits will be covered?
5. How long is my stay covered?
6. How much will I need to pay?
7. Other questions and notes: _____

Resources

- **Allina Health**
wellness.allinahealth.org/specialty/241
- **National Kidney Foundation**
<https://www.kidney.org>

Allina Health Account

Sign up for an Allina Health account online to get:

- better communication with your clinic, hospital, and provider
- faster answers
- online access to you and your loved one's health information anytime

With your account you can:

- read visit notes and follow-up instructions
- view and pay bills
- refill a prescription
- view immunization and medicines
- set and track health goals
- receive lab results sooner
- do an online visit for common conditions
- manage another person's care
- write a health care directive
- email your care team*
- schedule appointments*

Sign up for a secure account online at allinahealth.org. Your account is a free service of Allina Health.

**Availability varies by location. Ask your clinic or hospital if this service is available*

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English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-877-506-4595.

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-506-4595.

Hmong: LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-877-506-4595.



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