

Kidney Disease: Treatment for Kidney Failure

How well your kidneys work is called kidney function. When kidney function falls below a certain point, you have kidney failure.

Kidney failure means your kidneys may no longer be able to keep you alive. If your kidneys get to the point where they can no longer remove waste, you may need dialysis or a new kidney. Many people have successful kidney transplants or live for years using dialysis.

Once you understand your options, you can make the choice that is best for you.

How kidney failure affects your body

Kidney failure affects your whole body and makes you feel very ill. Kidney failure can cause many problems, such as:

- A buildup of waste products and fluids in your body. This can affect many parts of your body, including the intestines, nerves, and heart.
- Anemia, which can make you feel weak and tired.
- Imbalances of minerals called electrolytes. This can cause an irregular heartbeat, muscle weakness, and other problems.
- Heart disease.
- Bone disease.

Treatment for kidney failure

If your kidneys reach the point where they can no longer remove waste, treatment options may include dialysis, kidney transplant, or no treatment.

Dialysis is a process that filters wastes from the blood when your kidneys can no longer do



the job. It is not a cure, but it can help you live longer and feel better.

There are two basic types of dialysis:

- **Hemodialysis** uses a man-made membrane called a dialyzer to clean your blood. You are connected to the dialyzer by tubes attached to your blood vessels. Before dialysis treatments can begin, the doctor creates a site where blood can flow in and out of your body. This is called the dialysis access. There are three types of dialysis access:
 - A fistula is an access made by directly connecting an artery to a vein, usually in the upper arm or forearm.
 - A graft is an access made by inserting a small tube between an artery and a vein, usually in the upper arm or forearm.

- A catheter is an access made by inserting a tube into a large vein, often in the neck or chest.
- **Peritoneal dialysis** uses the lining of your belly (or peritoneal membrane) to filter your blood. Before you can begin peritoneal dialysis, your doctor will need to place a catheter in your belly to be the dialysis access.

Each type of dialysis has pros and cons:

- Peritoneal dialysis can be done at home. Most people have hemodialysis at a dialysis center. But some people can do it at home.
- Peritoneal dialysis must be done every day. Home hemodialysis is done almost every day. In-center hemodialysis is usually done 3 times a week.
- Hemodialysis requires more food and fluid restrictions than peritoneal dialysis.

Kidney transplant may be a good choice if you are in good basic health. With a new kidney, you will feel much better, have a more normal life, and live longer. Finding a live donor is the best option, with the shortest wait and longest survival. A live donor may be either related or unrelated to you. Another option is to get a kidney from someone who died.

There are some drawbacks:

- If you cannot find a live donor, the wait for a transplant may be long. You will probably need to have dialysis while you wait for a kidney.
- It may be hard to find a good match for your blood and tissue types.

- You will have to take medicine called immunosuppressants for the rest of your life. These medicines lower your body's disease-fighting ability, so they increase your risk of getting infections or cancer.

It is hard to make treatment decisions when you are very ill. It may help to visit the dialysis center or transplant center and talk to others who have chosen these options.

Choosing not to treat kidney failure

Some people choose not to treat their kidney failure. Usually these people have other serious health problems besides kidney failure. They understand that if their kidneys are no longer able to remove waste successfully, choosing not to have treatment means they will live only a short time.

You have the right to choose not to treat your kidney failure or to stop treatment later on. Of course, this is a very personal decision. Discuss your thoughts and feelings with your loved ones and your doctor. You can change your mind at any time.

Another option is to try dialysis for a month or two. This is useful if you are not sure whether you want dialysis. Be clear on what your goals are. If you are not meeting those goals after trying dialysis, you might then choose not to continue dialysis.

Do you have any questions or concerns after reading this information? It's a good idea to write them down and take them to your next doctor visit.