

HOME FIRST DIALYSIS	NLPKP - 001
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Office of Administrative Responsibility	Issuing Authority
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Overview

The provinces and territories, along with federal counterparts, agreed to the Common Statement of Principles on Shared Health Priorities in 2017. The common principles regarding improved access to home and community care were developed to address the increasing rate of chronic disease as Canada’s population ages and address the need for more access to home and community based health care services to reduce reliance on facility-based care.

The prevalence of diabetes and hypertension, known risk factors contributing to the development of renal failure, is high in the population of Newfoundland and Labrador. While kidney transplant is the preferred first option for treatment of end stage kidney disease (ESKD), non-facility based renal replacement therapy options should be adopted when medically appropriate. Evidence indicates that peritoneal dialysis and home hemo-dialysis achieve clinical outcomes equal to in-centre hemo-dialysis. Home based therapy patients

report a better quality of life compared to in-centre patients. Patients with end-stage renal failure should receive the right care modality, in the right setting, at the right time.

Policy

1. All end stage kidney disease patients shall be evaluated to assess suitability for kidney transplant.
2. Patients who require dialysis shall be screened for suitability for use of a home based dialysis modality. Unless contraindicated, home-based therapy options are considered the first line of treatment for all patients.
3. All patients and family, if applicable, shall be provided home based dialysis modality education.
4. All dialysis health care providers shall be provided home based dialysis modality education.
5. All in-centre dialysis patients shall be assessed for re-capture to a home based modality when indicated by clinical condition.

Guidelines

1. Establish a regional chronic renal disease list to monitor pre-renal impairment in patients with end-stage kidney disease at all levels.
2. Use the Method to Assess Treatment Choices for Home Dialysis (MATCH-D) tool to assess for suitability for Home-based dialysis on all pre-renal impairment patients.
3. Review goals of care with patients annually.

Quality Control

Key Words

dialysis, home-hemodialysis, MATCH-D, peritoneal dialysis, transplant

References

Medical Education Institute. (2013). Method to Assess Treatment Choices for Home Dialysis (MATCH-D) (version 4). Retrieved from HomeDialysis.org