

## Living with peritoneal dialysis: A patients journey - Gina Granger- KGH Education Zone

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Patients with Chronic Kidney Disease commonly develop End-Stage Renal Disease (ESRD); which requires renal replacement therapy at some stage. The disease combined with the treatment, have a major impact on patients personal, family and social lives. Patients have to get used to changes in their life styles, diet & fluid intake; due to the condition, routine medical procedures, doctors' visits and medical expenses. Studies have found that elderly and younger patients experience the disease and treatment differently; and have different needs. In one study, younger patients have expressed certain gaps in healthcare; that can help improve younger patient's experiences. Many of them volunteered to act as mentors for other new patients; to improve patient education. Families are usually the main social support system for patients, and can greatly contribute to the patient's disease management. In patients with ESRD consultation is largely with the families. One large study showed a close relationship between family education levels and PD patient outcomes. This may be due to higher education levels being associated with better access to healthcare, as well as better understanding of information. Apart from the effects on the patient, the disease also impacts on the patient's family; who may have to help care for him/ her. The whole family is affected by the fact that dialysis and kidney

transplant is needed; and this can be overwhelming for both patient and family members. The incidence and prevalence of ESRD in the United States continues to increase. Currently there are over 26,000 patients maintained on peritoneal dialysis. Mortality rates have fallen over the past several years, but long-term survival remains poor, with only 11% of peritoneal dialysis patients surviving past 10 years. Cardiovascular disease accounts for most deaths, and dialysis patients have many traditional and nontraditional cardiovascular risk factors. Lowering of these risk factors has not resulted in reduced cardiovascular morbidity and mortality in dialysis patients. Maneuvers to improve long-term peritoneal dialysis patient survival must therefore focus on modifiable risk factors including residual renal function, peritoneal membrane integrity, rate of infections, and peritoneal dialysis center size. This article reviews strategies for preserving residual renal function and peritoneal membrane integrity as well as strategies for reducing the rate of infections to enhance long-term survival in peritoneal dialysis patients. Financial pressures due to medical costs and sick leave, place a further strain on the wellbeing of the whole family. The speaker will present the experience of a peritoneal dialysis patient whose father also suffered from CKD, and had a kidney transplant.