

Myth-busting Fact Sheet: Home Dialysis



The
HOME
Network[™]
Educate, Enable, Empower
Established 2009

Developed by the healthcare professional education working group
for The HOME Network — updated August 2018

There are many myths surrounding home dialysis. Home dialysis incorporates both home peritoneal dialysis and home haemodialysis. This fact sheet aims to shed some light on some of the concerns patients may have, and provides suggestions for healthcare professionals who may need to advise their patients.

MYTH: There is no support for me at home if things go wrong.

During training, home dialysis nurses will teach you everything you need to know about doing dialysis. The emphasis is on the correct way for a person to do their dialysis, staying safe and well.

You will be taught how to problem solve, stay safe and gain confidence.

Your unit will provide you with details on seeking help and advice as required. Help is as close as the telephone.

MYTH BUSTED

MYTH: I am too old to learn to do my dialysis

Most people have the ability to learn. Home dialysis is available for all ages and walks of like. Home dialysis training is adjusted for each person. Most people have the ability to learn something new.

Your dialysis training times will vary according to your learning requirements — importantly, a person is never sent home unless you and your training nurse feel they are safe with the technique.

Peritoneal dialysis is quicker to learn than home haemodialysis.



MYTH BUSTED



MYTH: I could not do home haemodialysis because I cannot put a needle in my arm.

Putting needles in (cannulation) can be very scary. Your nurse will teach and guide you to cannulate. Your nurse will be with you to learn until you are confident. Once a person learns to cannulate themselves they will tell you they never let a nurse put the needles in their fistula again!

MYTH BUSTED



MYTH: I will be forgotten at home.

People on home dialysis are never forgotten. All home dialysis units will have a regular contact with you. Your home dialysis unit will let you know how this works at your hospital. You will have regular contact with your home dialysis team.

MYTH BUSTED



MYTH: It will cost me a lot of money to do home dialysis.

Home dialysis does cost a lot but fortunately the renal unit pays the majority of the costs for both home haemodialysis and home peritoneal dialysis. All of the machinery (including plumbing and installation), the fluids, peritoneal dialysis bags, dialysis tubing and dialysers, chemicals, and cleaners will be provided. Ongoing dialysis supplies will be delivered and packed away in your home.

The good news is that the reduced travel costs compared to attending a dialysis unit three times a week.

You may have to pay for:

- Additional electricity (a variable rebate is available in each state)
- Weighing scales (provided in some states)
- Water charges for haemodialysis (in some states only)
- A table or trolley may have to be found/adapted
- A reclining chair for daytime haemodialysis (provided in some states)
- Antibacterial soap and paper towels
- A blood pressure machine.

Visit The HOME Network website at <http://themenetwork.weebly.com/patient-information.html> for more information about financial support available to patients.

MYTH BUSTED



MYTH: I live in a rented house; therefore, I can't do dialysis at home.

Living in a rented house should not exclude you from home dialysis. The home dialysis staff will contact your landlord through the real estate (if applicable) to ask permission to install the plumbing for home haemodialysis. The majority of landlords approve the plumbing to be installed although some request that the plumbing be reversed if the person moves out. Temporary plumbing may be available – please discuss this with your home dialysis unit staff.



MYTH BUSTED

MYTH: I need a lot of room in my house to do dialysis.

It is true that room will be needed to store dialysis supplies. These will need to be stored out of the weather. The home dialysis nurses will be able to advise you on areas for storage within your home. Stock can sometimes be delivered more frequently, reducing the



amount of stock that needs to be stored at any one time; speak to the home dialysis nurses about this

option. Smaller items can be stored in a cupboard or filing cabinet.

MYTH BUSTED



The
HOME
Network[™]

Educate, Enable, Empower

Established 2009

MYTH: I use tank water and may not have enough water for home haemodialysis.

Peritoneal dialysis is an option that does not need a lot of water. This is the easy solution. Many people do home haemodialysis with tank water.

Home haemodialysis does use a lot of water you will need to talk to a technician about recycling options. A 5-hour treatment plus a 30-minute clean can use around 300 L of water; however, a lot of the water used in dialysis can be recycled back to another water tank for general household or garden use.

Everybody's situation is different: an assessment of your home and situation needs to be completed to find out the facts. The rainfall in the area, the water catchment area of the roof, the cleanliness of the roof and tanks, and the cost of buying water are all considerations. If needed, the hospital may be able to help with costs.

MYTH BUSTED



MYTH: I have a septic tank and cannot get rid of all the water from home haemodialysis.

Peritoneal dialysis is an option that does not generate large volumes of water; it only generates a small volume of fluid to be disposed of each day.

Home haemodialysis can usually be managed with a septic tank. The technicians can assist with alternatives to assist with the extra water from haemodialysis.

Your home situation is unique a thorough assessment is needed before a decision can be made.

MYTH BUSTED

MYTH: I cant take time off work or travel away from home

Training can be individualised to your needs. You will need to discuss this with your home dialysis team on the best options for you.

Travel options are available when you are on home dialysis. These may require planning and organising in advance. This can be discussed with your home dialysis nurses.

MYTH BUSTED

MYTH: I have limited or no English; therefore, I can't do home dialysis.

Australia is a multicultural society. There are people from all different cultures in Australia who successfully dialyse at home.

During training, family members may be able to assist with training or learn alongside the person who requires dialysis. Most hospitals have access to an interpreter service that can assist with home dialysis training.

It is recommended that a non-English person has someone who can assist when making contact with the home dialysis unit if telephone-based support is required.



MYTH BUSTED



It is hoped this information will help to dispel some of the myths about home dialysis. There should be ways to overcome barriers for those who want to dialyse home. The best source of information locally is your own home dialysis training unit.

It is important to remember that **home dialysis offers many advantages** to people living with chronic kidney disease.

- Control over health and treatment regimes
 - Improved quality of life
 - Increased access to travel and holidays (particularly peritoneal dialysis)
 - Improved health outcomes (particularly for enhanced hours of haemodialysis)
 - Reduced diet and fluid restrictions
 - Reduced medication load
-

MORE INFORMATION

Visit the HOME Network at <http://themenetwork.weebly.com/> to find out more about the group's activities and access resources for healthcare professionals and Australians with chronic kidney disease who may be considering the home dialysis option.

ACKNOWLEDGEMENTS

The HOME Network would like to thank the following past and present members for their time and input into the development of the home dialysis myth-busting fact sheet: Elizabeth Hunn, Marion Shaw, Melinda Tomlins, Anna Lee, Dana Windebank, Serena Frasca.