

# Kidney Disease Treatment Options

	In-Center Dialysis		Home Dialysis		Kidney Transplantation	
	Hemodialysis	Hemodialysis	Peritoneal Dialysis (CAPD)	Peritoneal Dialysis (CCPD)	(Cadaver) Deceased donor	Living donor
<b>How often do you need to have the treatment?</b>	Conventional hemodialysis is done 3 times a week for 3-5 hours per treatment.  Nocturnal hemodialysis is done 3 nights a week for 8 hours, while you sleep.	Conventional home hemodialysis is done 3 times a week for 3 or more hours per treatment.  Nocturnal home hemodialysis is done 3 or more nights a week for 8 hours, while you sleep.	You will need to do four to six exchanges a day, each taking about 20-30 minutes.	The cyclor will do three to five exchanges a night.	After the operation, you'll have regular check ups with your doctor.	After the operation, you'll have regular check ups with your doctor.
<b>What is the schedule?</b>	Mondays, Wednesdays, and Fridays, or Tuesdays, Thursdays, and Saturdays	Mondays, Wednesdays, and Fridays, or Tuesdays, Thursdays, and Saturdays	Every day	Every night, and you may need one daytime exchange, too.	You may have to wait several years before a kidney is available.	If a friend or family member is donating, you can schedule the operation when you're both ready.
<b>Where is it done?</b>	Dialysis facility	Home	Home	Home	The transplant takes place in a hospital.	
<b>Do you need to store equipment or supplies?</b>	No, all of the equipment and supplies are stored at the dialysis facility.	Yes, you will need room for the machine and it will need to be connected to plumbing.	Yes, you will need to store bags of dialysis solution.	Yes, you will need room for the cycling machine and bags of dialysis solution.	No, you will not need to store equipment or supplies at home.	
<b>How involved do you need to be?</b>	Staff does the treatments; you must follow a complex diet and fluid limits, take medications correctly, report any symptoms you are having, and come to your treatments on time.	You and a helper will attend training sessions. You'll clean and set up equipment, check your vital signs, keep records, order supplies, and tell the care team if you have a problem.	You'll need to attend training sessions. You must do exchanges four to six times a day, every day. You must also order supplies, check vital signs, keep records, and tell the team if you have a problem.	You'll need to attend training sessions. You must set up your cyclor every night. You must also order supplies, check vital signs, keep records, and tell the team if you have a problem.	You'll need to learn about your medications and when to take them. You must take anti-rejection drugs prescribed by your doctor every day for as long as your new kidney works.	
<b>How much does the treatment limit your freedom?</b>	You will have little freedom during treatment but greater freedom on non-treatment days.	You can set your own schedule and change it if you need to—as long as you do your treatments as prescribed.	You can move around, exercise, drive, and do the things you normally do with solution in your abdomen. You will need to take about 30 minutes out of your schedule for each exchange.	You're linked to a machine at night and may have one exchange during the day.	Once you've healed from the transplant operation and the kidney is working, you can live as you normally would with little disruption. The medications may have side effects that are troubling.	