Fact Sheet on Peritoneal Dialysis

Information courtesy of Home Dialysis Central (www.homedialysis.org)

Peritoneal Dialysis (PD) uses the inner lining of your abdomen (the peritoneum) as a dialysis filter. The peritoneum is lined with tiny blood vessels. Wastes and extra water in your blood can flow out of these blood vessels, through the peritoneum and into special fluid that you put into your abdomen. Then you drain the fluid and the wastes out of your body.

PD Catheter:
To do PD, you’ll have to have a soft plastic tube, called a catheter, placed in your abdomen by a surgeon. You’ll learn how to use the catheter to fill your abdomen with sterile fluid called a dialysate. Most people use about 2 liters of dialysate for each treatment.

PD Exchanges:
After you put the dialysate in your abdomen, it stays there for a few hours. The period between putting fresh fluid in and taking used fluid out is called dwell time. While you go about your day, the fluid with collect all of the wastes and water it can hold. Then you drain out the used fluid and put in clean fluid. This process is called an exchange. There are two types of exchanges:
1. Exchanges by hand—usually 4 each day, and
2. Exchanges with a machine while you sleep at night.

Benefits of peritoneal dialysis:
- Portable—take it with you
- Saves time—fewer trips to clinic
- No needles—avoid needle sticks
- Flexible treatment times
- Easy—learn it in a week or two
- Fewer limits—eat a more normal diet

Who is best suited for peritoneal dialysis?
The most important factor in whether you are suited for PD is how much you want to do it. If you have had many or complex abdominal surgeries, you may not be able to do PD. If you are a large person, it may be hard to get enough dialysis with PD.
Remember to compare all the advantages and disadvantages for each of the dialysis types so that you can find the treatment that works absolutely best for you!