

# ***Key elements for a successful PD program***

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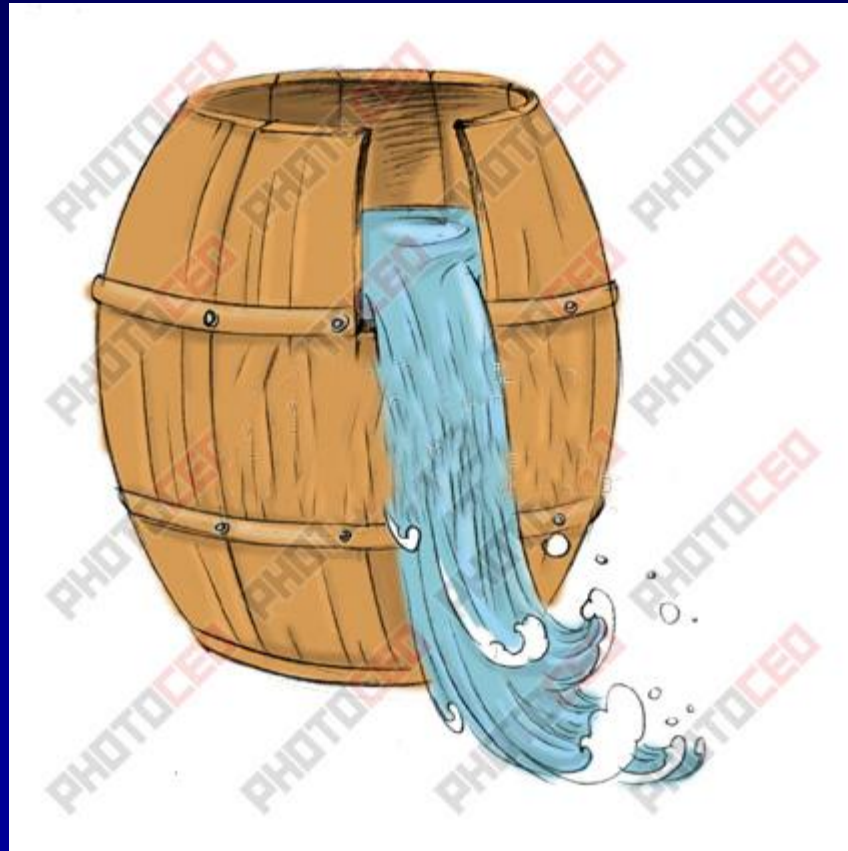
# What are the resources required for a PD program?

- Space
- Facilities and policies
- Supports from higher authority
- People: healthcare staff, patients and other stake holders
- Business case

# Patient preference

- Patients preference has been marked as the top factor for dialysis modality selection
- Why patient prefers one modality over other another modality with out self experience?

# Information asymmetry in medicine

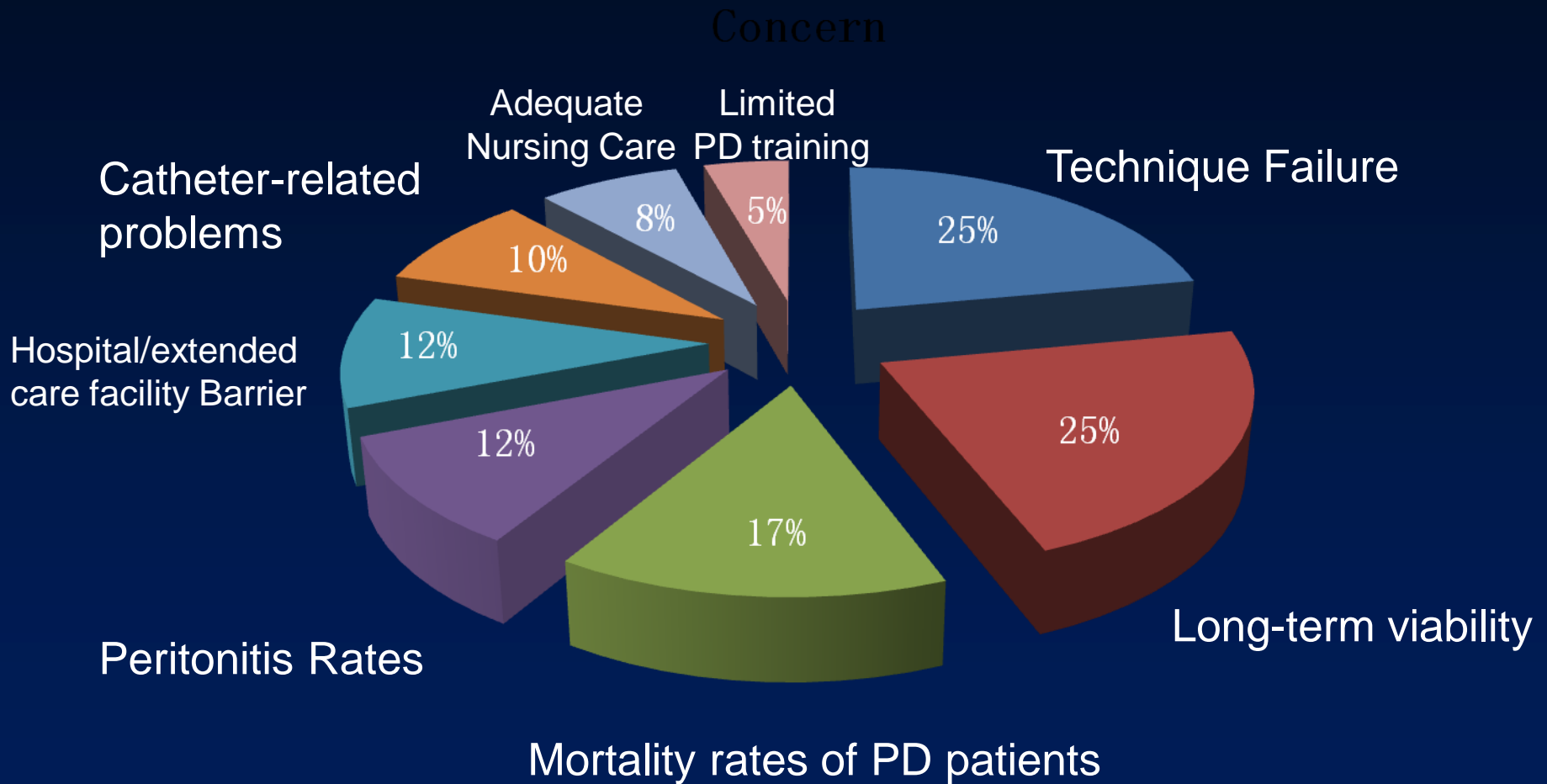


# People: the healthcare staff is the key

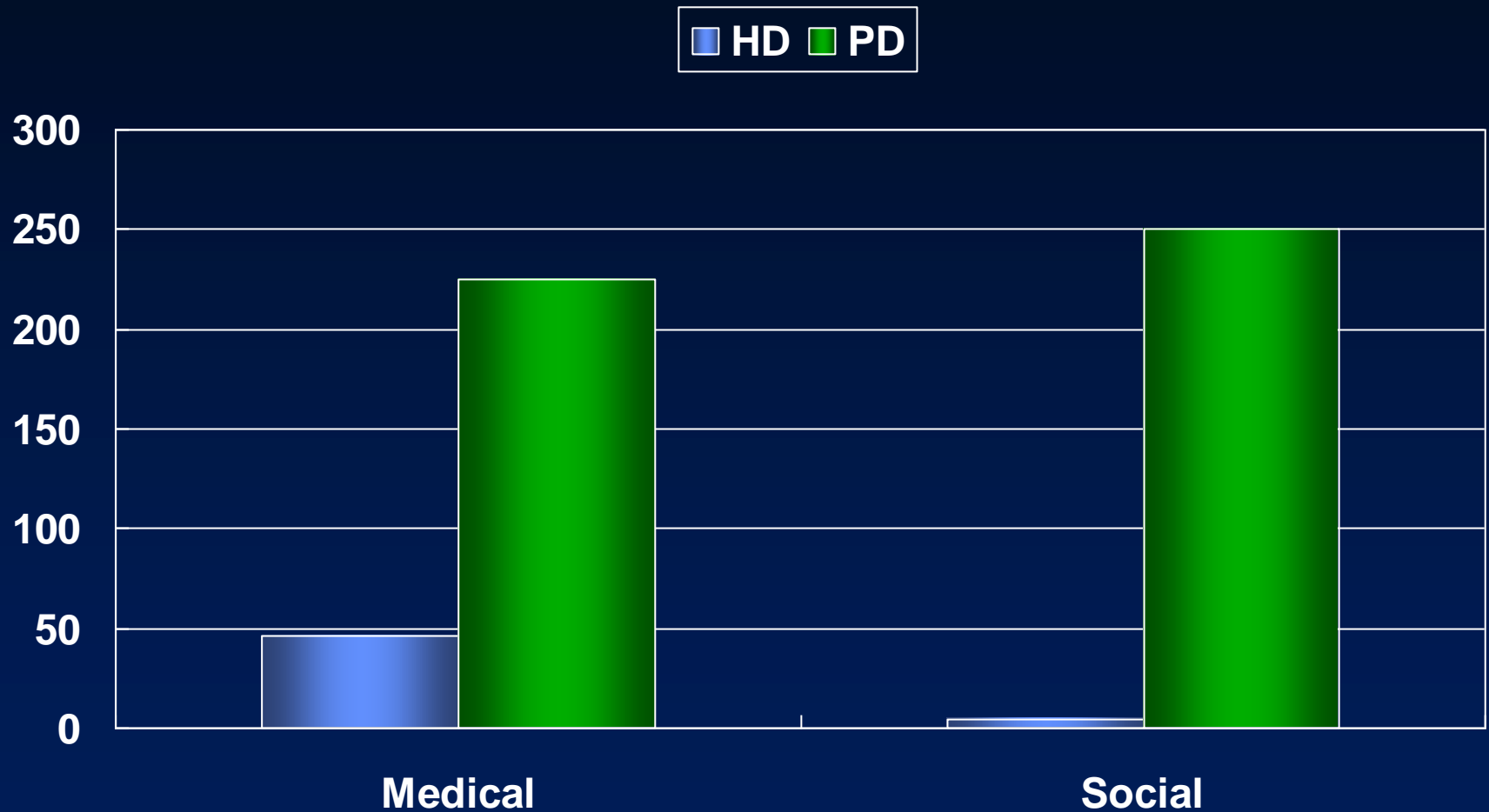
- Belief
- Knowledge
- Skill
- Attitude
- Value
- Preference
- Perceived need and ability
- Willingness to do

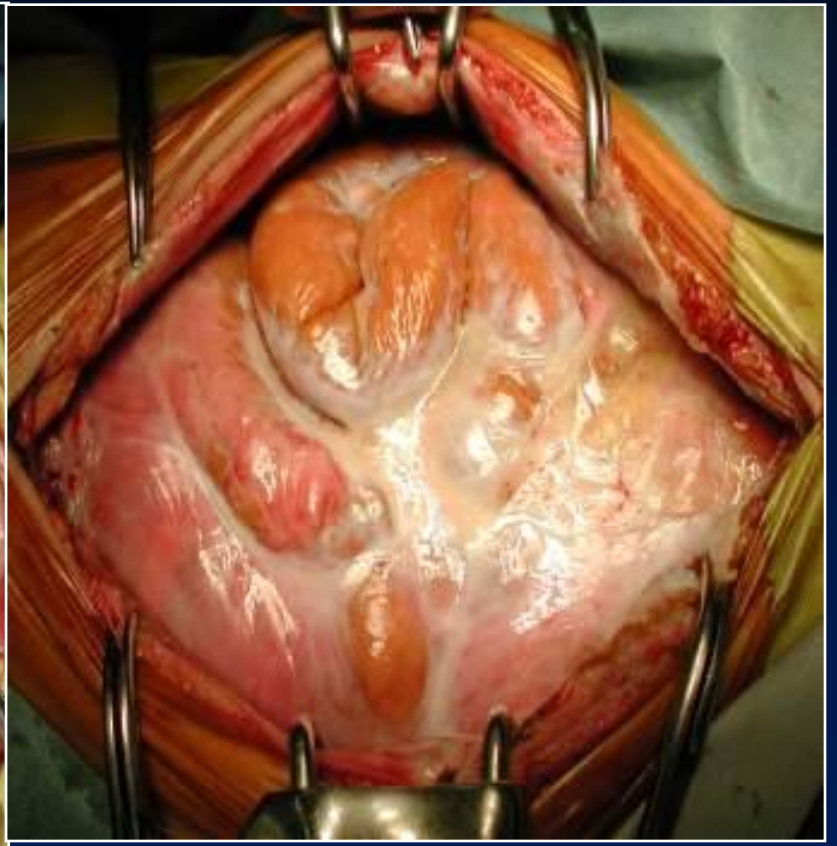
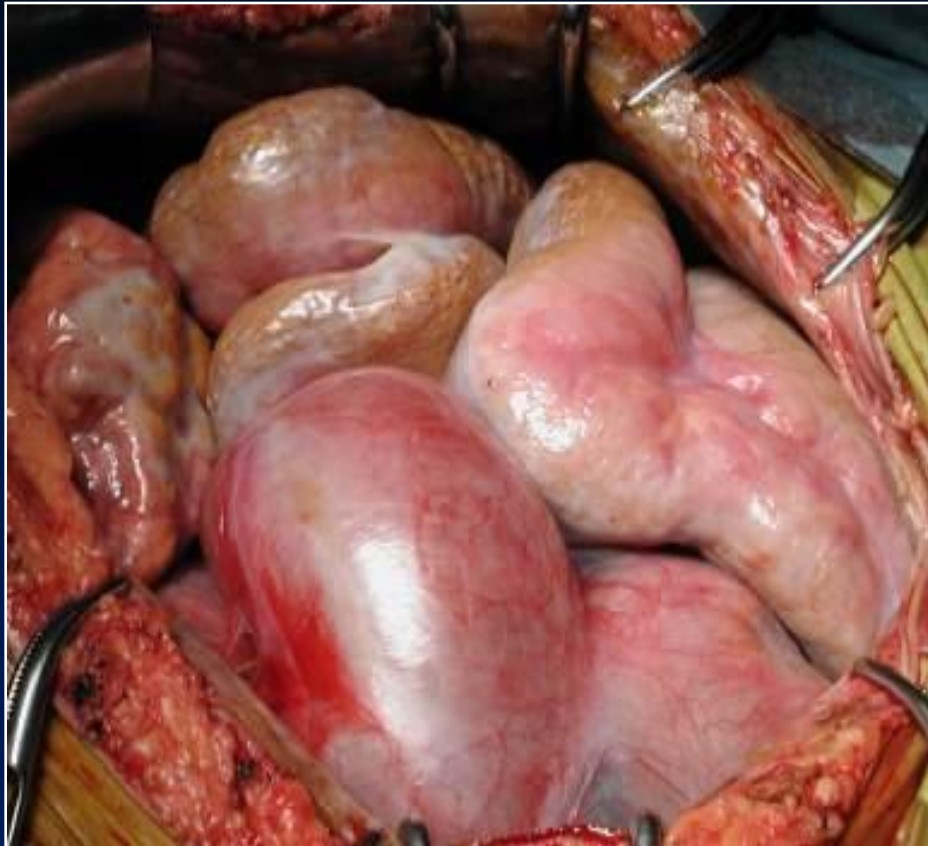
# High Technique Failure is a limiting factor of PD Utilization

## - Medical Director's Concerns related to Chronic PD -



# Contraindications to HD and PD Therapy





# Major concerns in PD therapy

- Perceived inferior long-term survival and high technique failure
- Membrane related problems
  - Inadequate dialysis after the loss of RRF, especially in low transporters
  - Poor volume control especially in high transporters or ultrafiltration failure
  - Developing EPS after years on PD
- Malnutrition, loss of appetite, nutrients loss
- Burden on the caregivers
- Poor economical case
- Lack of adequate resources
- Peritonitis
- Catheter related problems

# Duration on Dialysis in HD & PD



# Various forms of PD

- IPD
- CAPD
- CCPD
- NIPD
- TPD、 NTPD
- AAPD
- DAPD
- CFPD、 Wearable kidney
- PHD

# CAPD could mean different things

- Different exchange number
- Different osmotic agents
- Different concentration of glucose
- Different dwell time
- Different calcium concentration
- Different sodium concentration
- Different connector
- Different person to do the exchanges

# Key factors affecting the success of PD

- Strong believe in the therapy
- Appropriate resources
- Appropriate prescription
- Dietary management
- Chronic disease management
  - Personal empowerment
  - Continuity of care
  - Holistic care focusing on rehabilitation
  - Team work
- Passion for Excellency

# Strong believe in the therapy

- Continuous therapy should be better than intermittent therapy
- Home based therapy should be better than hospital based therapy
- PD does not remove less uremic toxins and fluid
- PD costs much less than that of HD
- PD membrane is durable for a life-long therapy if we treat it very carefully
- The image of PD is not inferior to HD patients in our hands

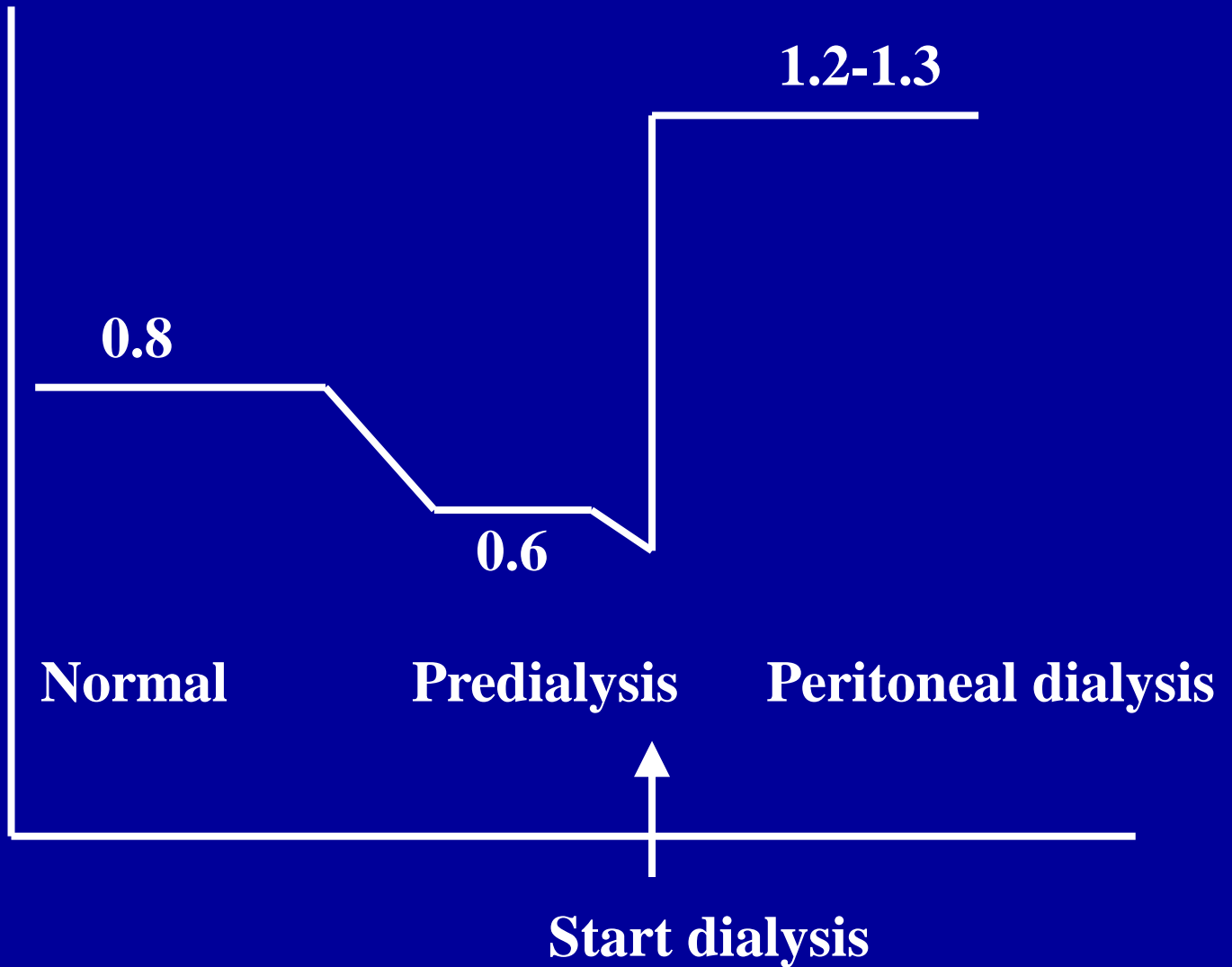
# Why more select HD?

- Familiar with the acute care model
- Better trained staffs
- Easy to be managed and standardized
- Fee for service system
- Visibility
- Better image

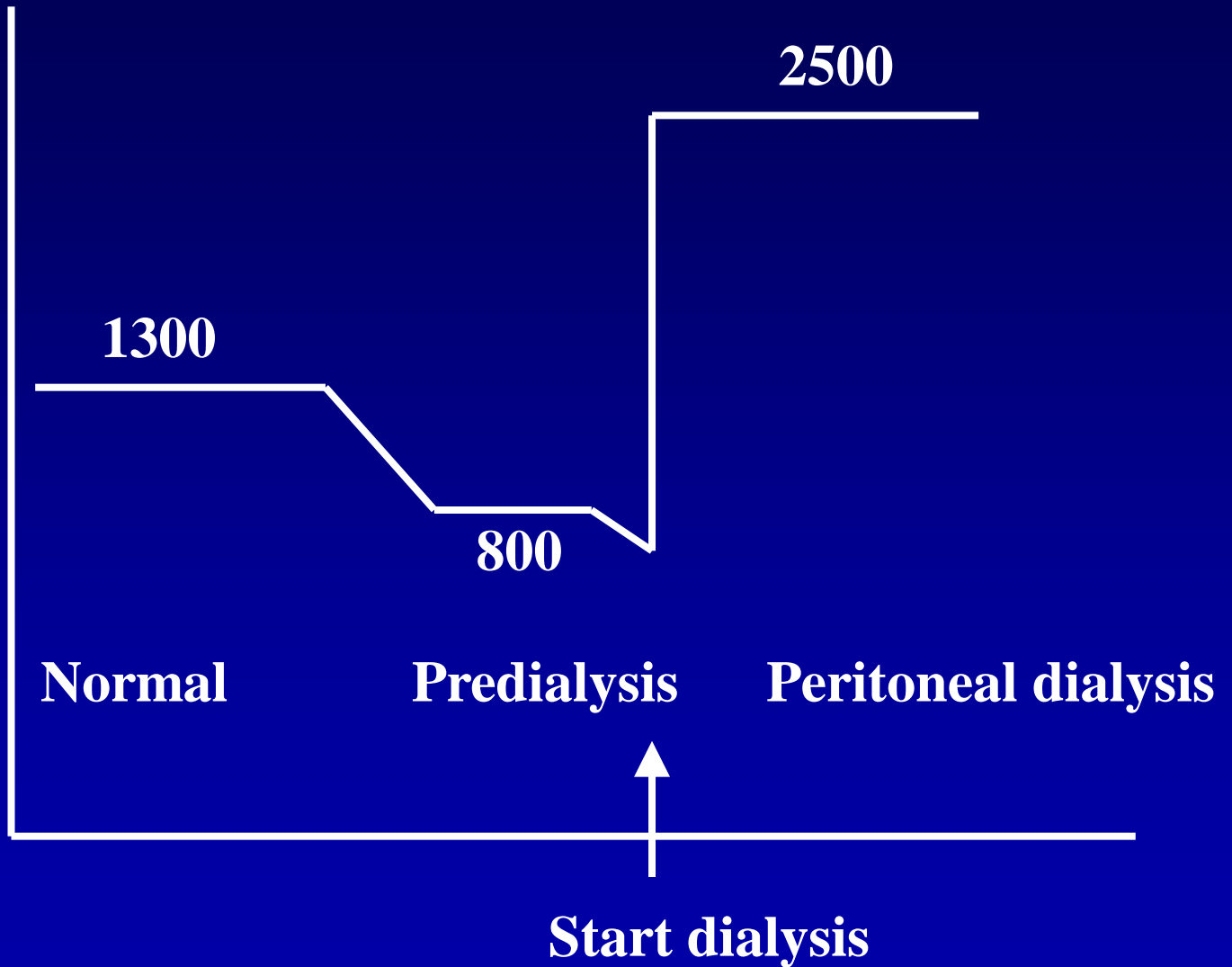
# Attitudes and moods

- Be positive
- Be grateful
- Be focused
- Be creative
- Be open-minded
- Be flexible
- Be responsible

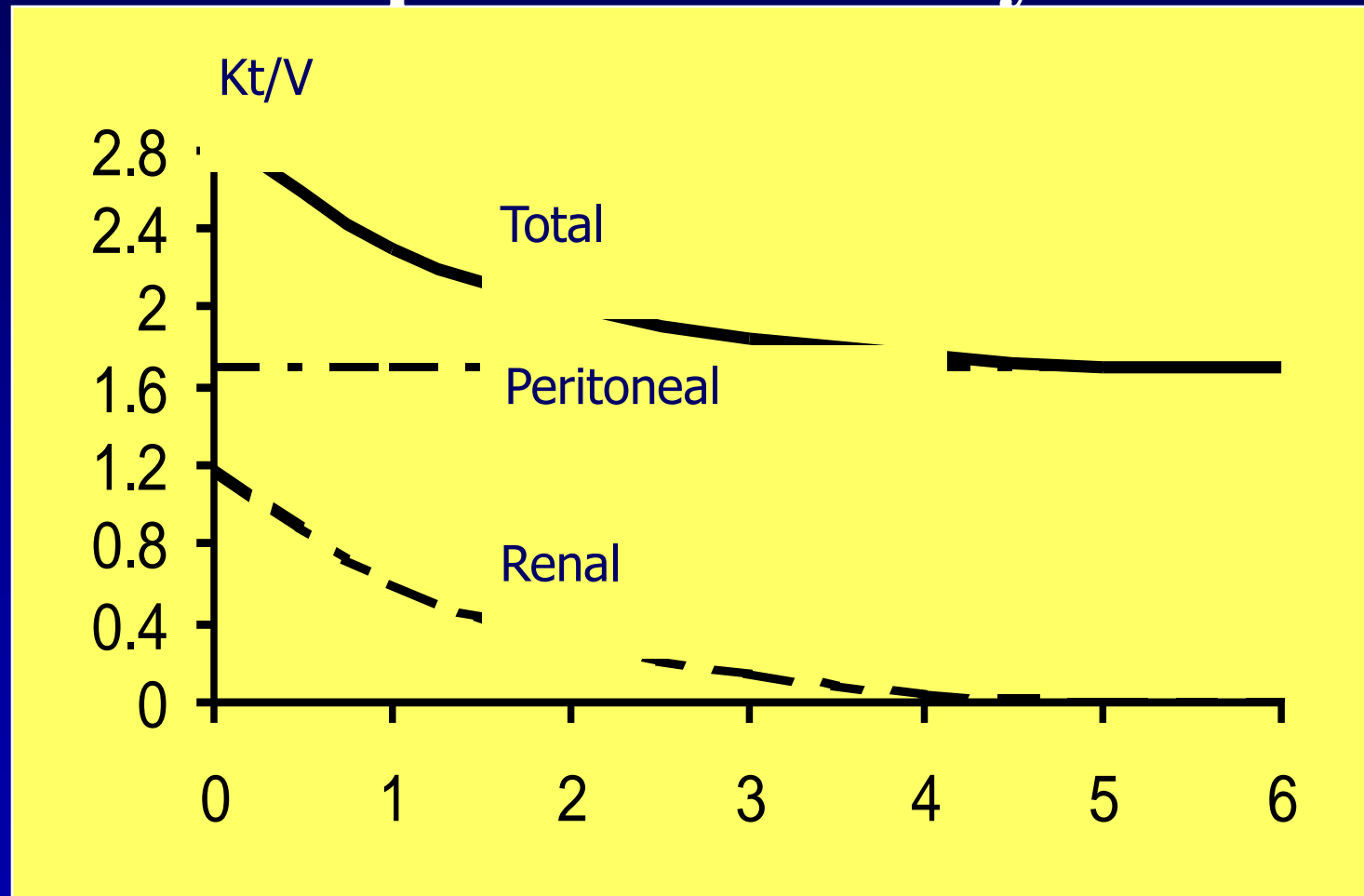
# Dietary protein intake, g/kg/d



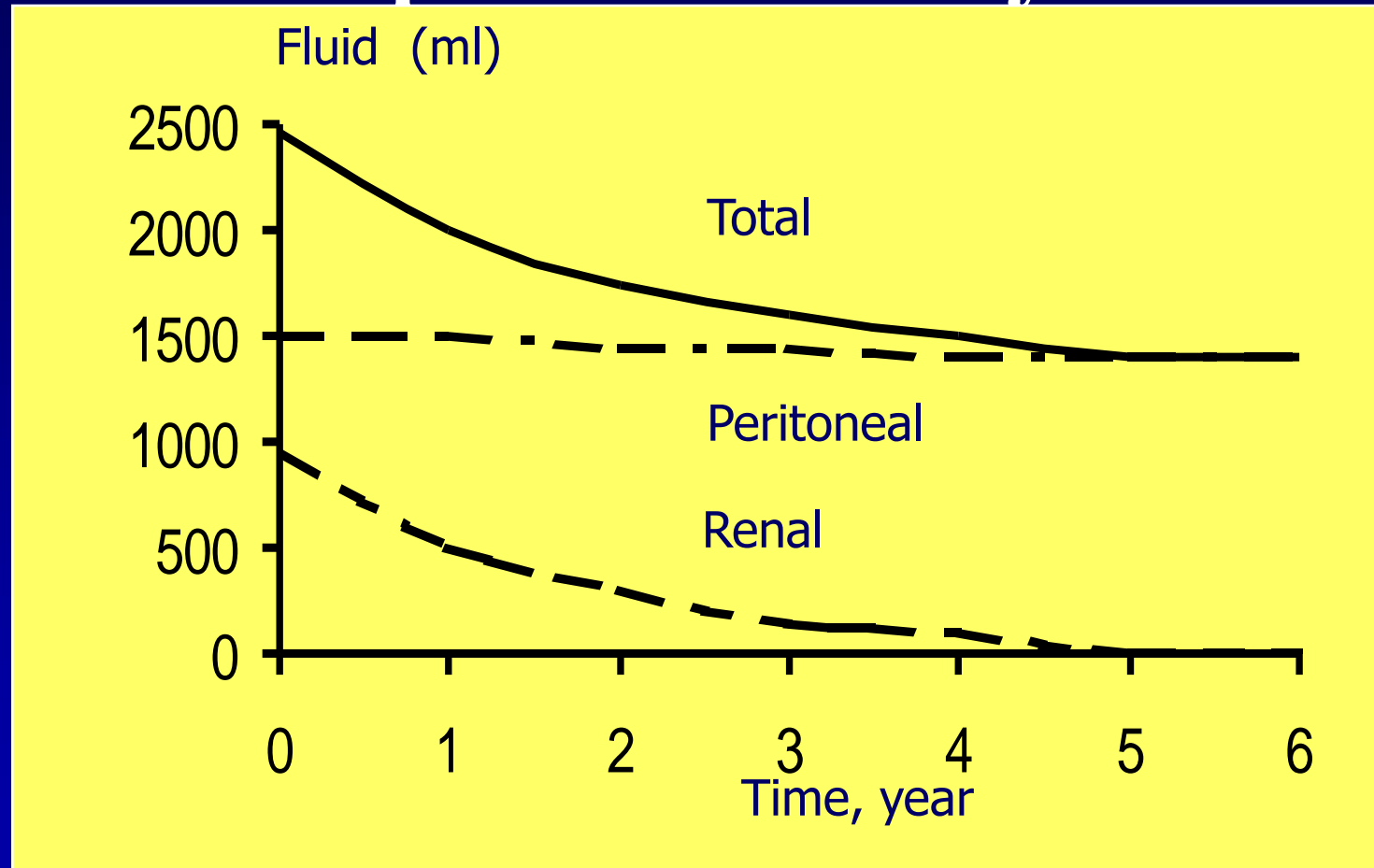
# Fluid removal, ml/day



# Changes in solute removal with time on peritoneal dialysis



# Changes in fluid removal with time on peritoneal dialysis



# Key factors affecting the PD outcome

## Dietary management

- Protein
- Salt & fluid
- $K^+$
- Phosphorus
- Glucose

# Key factors affecting the PD outcome

## Chronic disease management: from paternalism to collaborative care

Acute care	Chronic care	Palliative care
Professional dominant	Patient dominant	ECF dominant
Paternalism	Collaborative	Collaborative
D&T	Empowerment	Respect
Compliance	Adherence to concordance	Concordance

**Diagnosis**

**End of life**

# Redesign healthcare delivery system for CKD patients

## ◆ Rethink Care

1. Self-management of chronic illness
2. Behavioral interventions to address psychosocial needs

## ◆ Restructure Care

- ◆ Telephone, group appointments, web-based care

## ◆ Retrain for Collaborative Care

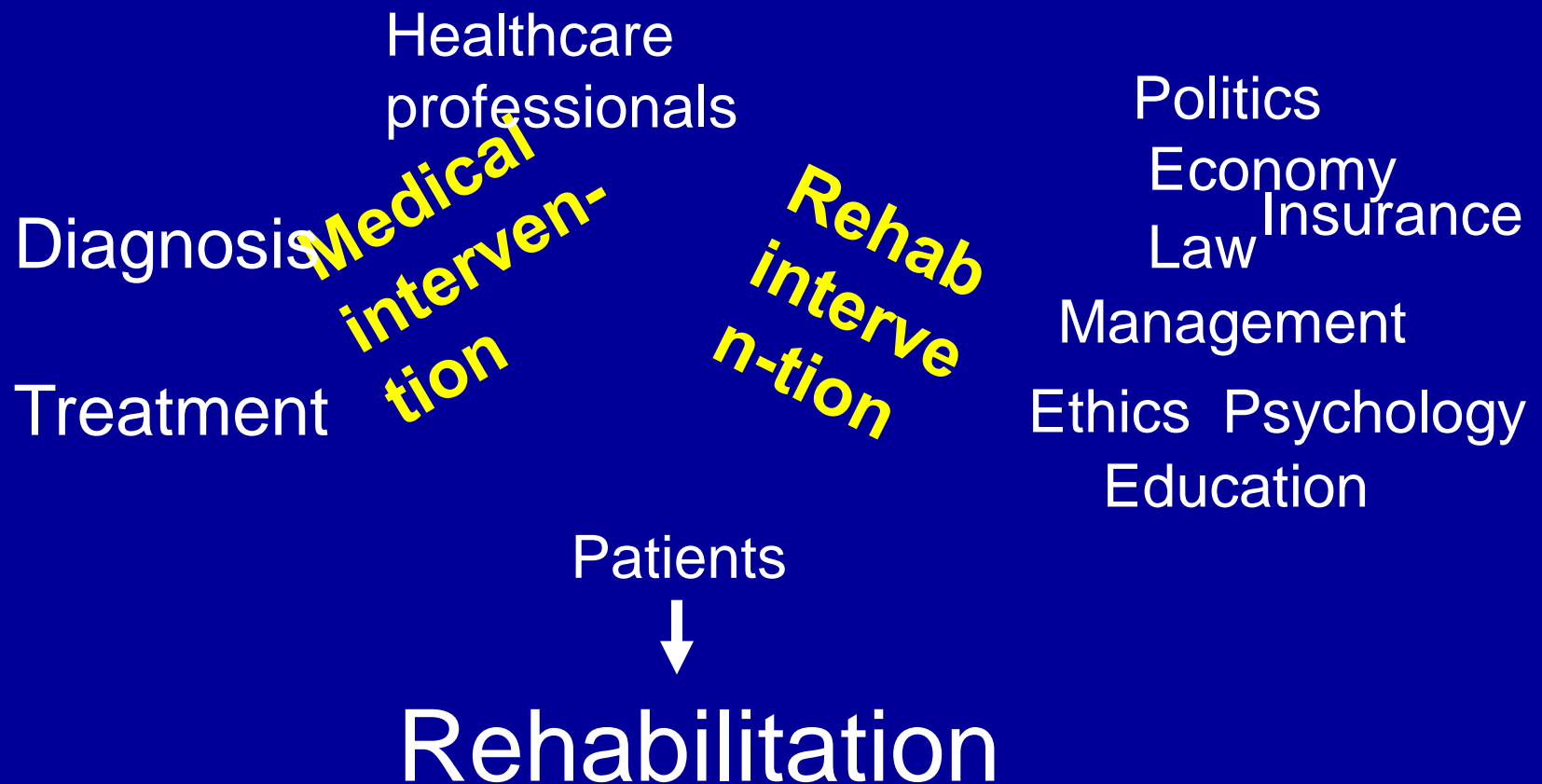
- ◆ Enhance understanding, skills, and confidence of members and professional staff as partners in care

# Self management skills

- ◆ Problem solving
- ◆ Decision making
- ◆ Resource utilisation
- ◆ Developing effective partnerships with health professionals
- ◆ Taking action

# Key factors affecting the PD outcome

## Holistic care approach



# Key factors affecting the PD outcome

## Team approach

- Patients and their family members
- Primary nurses (health care coordinators)
- Nephrologists
- Dieticians
- Social workers
- Other specialists
- Volunteers
- Expert patients

# Team approach

- Leadership
- Positive feedback from the stakeholders
- Team culture
- Learning organization

# Team approach

- Educate
- Motivate
- Build skill
- Change the environment

**“We all the time did the same way  
and we are very good already,  
should not change”**

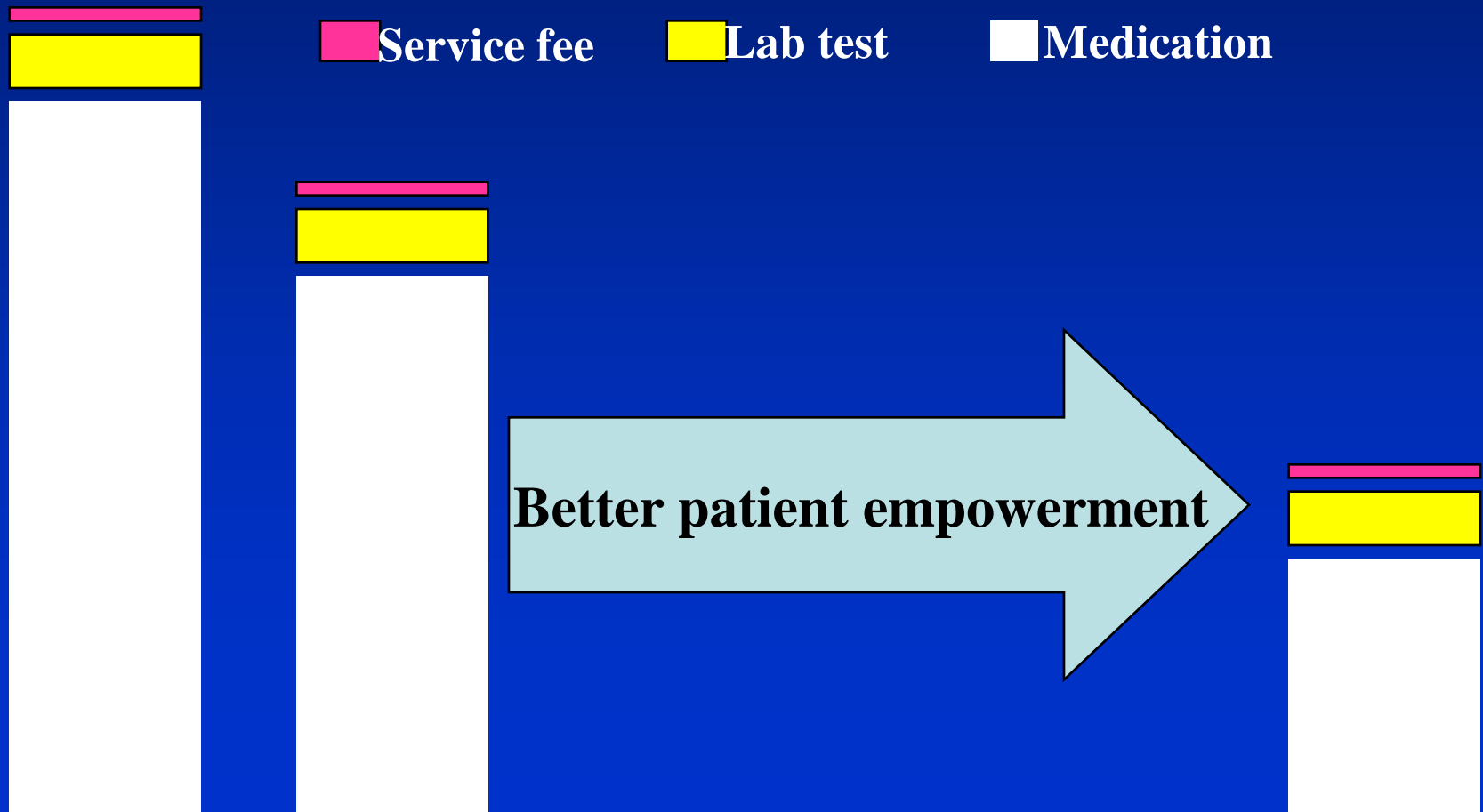
## **Two different ways of management**

**“innovation, transformation and  
improvement ”**

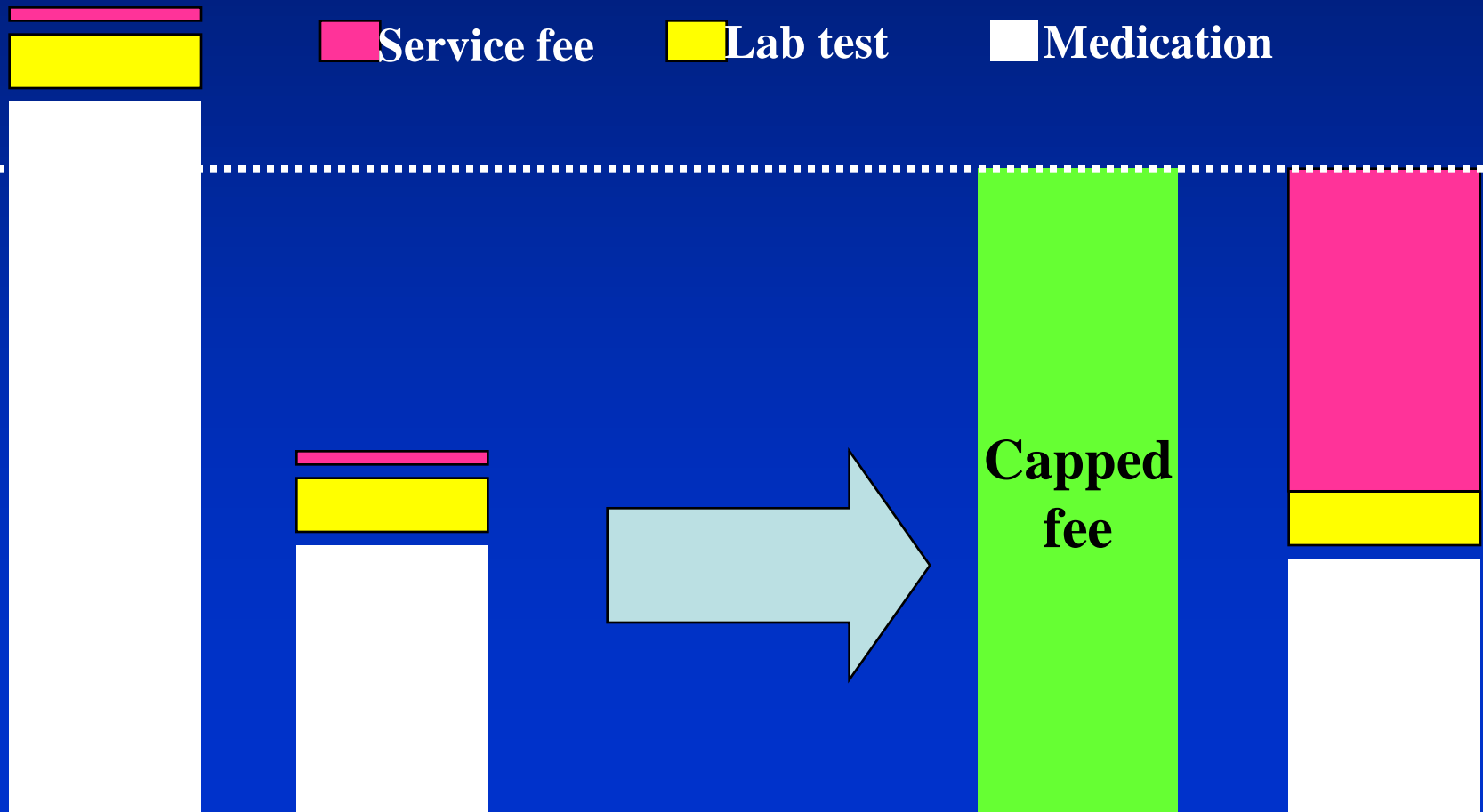
# Other elements

- Accessibility, availability and affordability
- Program and service
- Skill
- Money and time
- Facilities
- Policy and law

# Healthcare expenditure



# Sustainable mechanism for patient empowerment



# Summary

- The key elements for a successful PD program:
  - The people!
  - Avoid iatrogenic damages (the people!)
  - Change the model of care (the people!)
  - Make a workable business case (the people!)