

THE DEVELOPMENT OF AN ASSISTED AUTOMATED PERITONEAL DIALYSIS (AAPD) PROGRAMME UTILISING COMMUNITY NURSES – A PILOT STUDY

Ridge, A, Banks, I
Dorset County Hospital

PROBLEMS: The numbers of elderly renal patients requiring dialysis are the fastest growing category of patients requiring renal replacement therapy. Existing PD patients often become less independent as they grow older and therefore less capable of performing their own dialysis at home. While haemodialysis may be an alternative, travelling to the centre three times a week may be exhausting for some elderly patients and takes a high proportion of the renal unit budget.

PURPOSE: Assisted Automated Peritoneal Dialysis (aAPD) exists in many European countries. In the UK Health Care Assistants are available on an agency basis to strip and set up the APD machine in the patients home. This paper sets out our experience with establishing an aAPD programme using existing community services.

DESIGN: The Twilight Community Nursing Service were approached and agreed to participate in the project. A training programme was developed and involved both Registered Nurses and Health Care Assistants. Patients who were unable to perform their own peritoneal dialysis were enrolled onto the programme over a 12 month period. Data was collected and analysed.

FINDINGS: Data was available for six patients between the ages of 41 – 91. Two patients died, two were transferred to haemodialysis and the other two remained on PD. None of these outcomes were related to a failure of the service.

CONCLUSION: The patients were all highly dependent and frail and therefore a high turnover of these patients is to be expected. The excellent communication between the community nurses and the PD staff meant that frequent home visits by the renal team were unnecessary and the daily visits resulted in much speedier attention to dialysis related issues.

RELEVANCE: While greater numbers and a longer period of follow up is needed to fully evaluate this service, it offers potential to treat a large number of PD patients in the home. It provides a “safety net” for those who become unable to perform their own dialysis and has the possibility of providing respite care for the carers. The Community Twilight team see this task as part of their role and therefore there is currently no extra cost to the renal unit for this service. The establishment of an aAPD programme offers a home therapy for the less able patient, eliminating the need for frequent, costly and cumbersome trips to the haemodialysis unit.