

# Home haemodialysis as a mean of patient empowering and rehabilitation . A clinical case.

Anna Marti i Monros  
CHGU Valencia SPAIN



# From Hospital to Home

- End of 2015 our Nephrology Department reopened the Home Haemodialysis program (HHD) with the new monitor Nx Stage System One, and the self care approach.
- April 2017 when we'd already placed seven patients on HHD, a 48 years old patient was transferred to us from another Hospital, following his request.

# The Patient

- Patient clinical condition, in summary:  
Diabetes-mellitus, morbid-obesity,  
hypertension, three episodes (2008, 2010,  
2016) of cerebral stroke with right hemiparesis  
(sequel), bariatric surgery (134kg/80kg).
- September 2016, he had initiated hospital  
haemodialysis for end stage renal failure  
(vascular access: right forearm  
arteriovenous/fistula).



# The approach



- The HHD team acknowledged the challenges of this patient request, based on his clinical condition and medical reports, but despite them, decided to interview him to assess suitability, inform and double check his willingness to meet all the demands of HHD.
- The patient made clear his interest on HHD (asked to be transferred from other Hospital) in order to gain autonomy, treatment tolerance and to improve recovery time.
- The extra burdens identified derived mainly from the right hemiparesis, as he was not able to fill in the HD form or to self needle with the buttonhole technique.

# Results/1

- The HHD team prepared a plan to optimise patient skills on his left hand and started the training. Six weeks later the patient was able not only of performing all technical aspects of the HHD including self needling, but he'd learned to fill in the treatment forms using his left hand, and he was sent home where he is happily managing his treatment (8months)

**Hemiparesis:  
Muscle Weakness  
after Stroke**



# Results/2

- During this time (nearly one year) he has had no problem at all, is working and the tolerance during the HD session has improved dramatically: total absence of hypotensive and vomits episodes.



# WHY-HOW?

- Nurses ready to overcome burdens.
- Team approach.
- Patient commitment.
- Purpose designed monitor.



# From Hospital to Home

- With this case we show that despite some apparently insurmountable difficulties, when properly trained, HHD can be an excellent option helping the patient holistic rehabilitation.