

Intensive kidney dialysis indicates better survival rates than conventional dialysis

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Patients suffering with end-stage renal disease could increase their survival chances by undergoing intensive dialysis at home rather than the conventional dialysis in clinics. A new study by Lawson Health Research Institute shows the potential of more intensive dialysis completed in a home setting.

potential to influence policies centered around funding and gaining more resources to help make intensive at home kidney dialysis more readily available.

Provided by Lawson Health Research Institute

The study found that patients who underwent intensive dialysis at home have better [survival rates](#) than patients who had conventional dialysis in clinics. Intensive dialysis patients also had better blood pressure results and biochemical test values than conventional [dialysis patients](#).

Dr. Gihad Nesrallah, a Lawson researcher, led the observational study comparing at home intensive dialysis and conventional dialysis in clinics. Intensive dialysis at home consists of eight hours of treatment, three to seven nights a week. Conventional dialysis that takes place in dialysis clinics is usually conducted in less than five hours, three days per week.

Dialysis providers and governments are recognizing the benefits of home based dialysis. The Ontario Renal Network has made independent, at [home dialysis](#) a priority for funding more frequent or longer term dialysis therapy. More observational studies, such as this one are needed to further investigate why intensive dialysis at home is more beneficial to the survival of patients.

"Strategies to improve survival for persons with end-stage renal disease are needed, and more intensive dialysis represents one of the more promising options that had emerged in the last two decades. We think that patients may wish to seriously consider intensive hemodialysis where possible," said Dr. Nesrallah.

This study, along with other [observational studies](#) focusing on kidney [dialysis treatment](#), has the

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