



**BC Renal
Agency**

An agency of the Provincial
Health Services Authority



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The BC Provincial Renal Agency (BCPRA), an agency of the Provincial Health Services Authority, plans and coordinates the care of people with kidney disease throughout the province to ensure equitable access to high quality care.

MEDIA RELEASE

January 31, 2007

For Immediate Release

Home dialysis improves quality of life for BC patients with kidney failure, saves health system money

Until recently, Pat Chadwick spent the better part of three days every week hooked up to a dialysis machine. It was a demanding routine, but a necessary one – without dialysis, the 72-year-old would die.

When Chadwick heard about a new BC Provincial Renal Agency program that would allow her to perform the same life-saving procedure in the comfort of her own Victoria home, she didn't think twice. For three years now, with the help of her husband, she has administered her own hemodialysis treatments. Despite an intense training period and the responsibility of being "both the patient and technician," Chadwick has never felt better.

"I have my life back!" says Chadwick, who dialyzes every second night while she sleeps. "Dialysis used to feel like a part time job, and there was very little time for anything else."

Since its launch in 2004 as Canada's first provincial independent hemodialysis initiative, the program has grown to include 157 patients across the province. Most of these patients, like Chadwick, were formerly spending hours a week traveling to and from dialysis units to get hooked up to a machine that took the place of their failed kidneys, cleansing waste and extra fluids from their blood. Peritoneal dialysis (PD) offers another home-based solution for 625 patients with kidney disease around the province. PD is a good option for patients who travel, since it is transportable and the supplies can be shipped almost anywhere.

"Both independent hemodialysis and PD offer flexibility and independence for patients, and are excellent and cost effective therapies," says Dr. Adeera Levin, the Renal Agency's executive director. "With either, patients can cleanse their blood more often and for longer periods." Compared with traditional hemodialysis, patients who dialyze independently experience improved energy, reduced need for medication, fewer diet restrictions, fewer side effects, and fewer hospital emergency room visits. Eliminating trips to and from the clinic is another bonus, both for those who live in remote communities and those facing commutes in busy city traffic.

Independent dialysis also offers significant savings for the healthcare system, from reduced need to build dialysis units, to reduced hospital stays (2.75 days a year per patient as opposed to 7.7 days for conventional hemodialysis patients), to societal savings from patients returning to work. The independent hemodialysis program is also expanding options for self-care within dialysis units, for patients who could benefit from increased independence but are not able to dialyze at home.

An estimated 145,000 British Columbians live with some level of kidney disease. About 1,780 patients in BC receive some form of hemodialysis treatment. The number of people who are diagnosed with end-stage kidney disease and require dialysis to survive is growing by up to eight percent a year.

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