

You and your hemodialysis access

VASCULAR ACCESS FOR HEMODIALYSIS

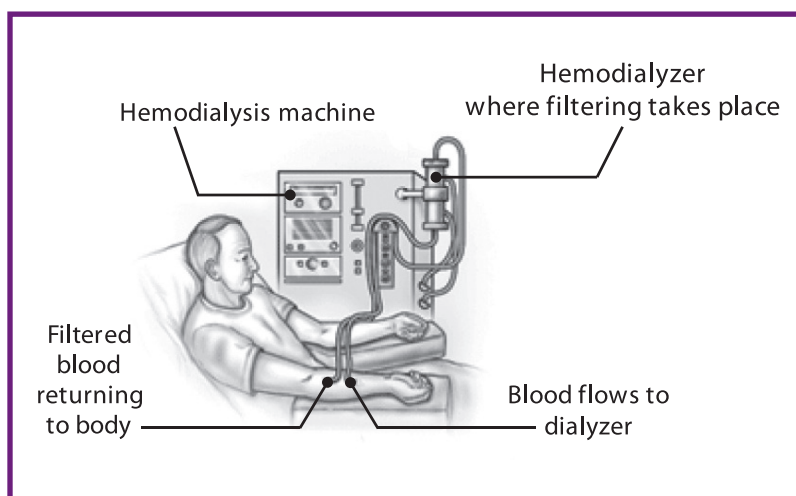
During hemodialysis, blood must continuously be removed, cleaned and then returned to your body. In order for this to happen, you will need a **vascular access**.

The best type of vascular access is a fistula.

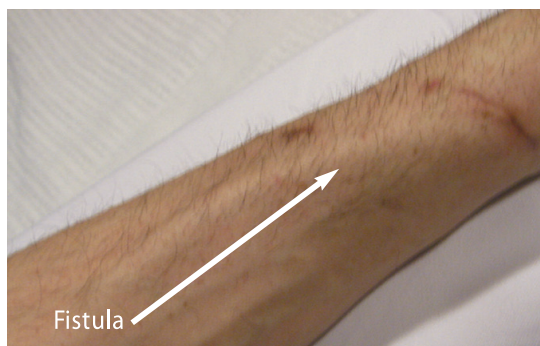
A surgeon joins a vein to an artery, which causes the vein to become bigger and stronger.

This new vein is called a fistula. A fistula is the *gold standard*, meaning that it is the best choice.

- It performs the best
- It lasts the longest
- It has fewer complications (infections)
- It requires fewer hospitalizations



There are some patients for which creating a fistula may not be possible. Your doctor might suggest another option called a graft. A graft is like a fistula but it uses a short piece of soft, plastic-like tubing to join the vein to an artery.



Fistula First!

- Talk to your doctor about all of your options
- The sooner you learn about your options, the more choices you may have available to you

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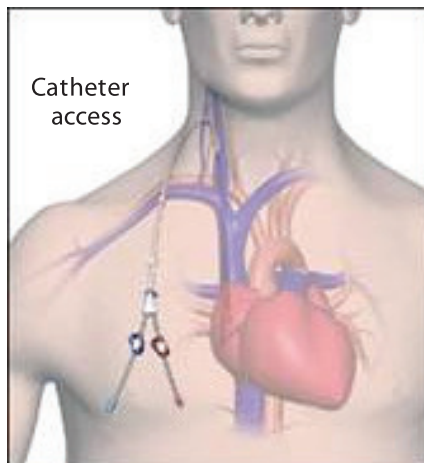
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The best type of vascular access is a fistula.

Catheters are not a good choice for long-term treatment because they can damage veins and are not considered reliable (they block frequently).

Compared to patients with fistulas, patients with catheters have:

- A greater risk of death
- A greater risk of serious infection
- An increased risk of having to go to the hospital for care
- A greater chance that the dialysis machine will not remove all the waste products and fluids from their blood
- A greater chance of having more vascular access procedures done



The information in this pamphlet is provided for educational and information purposes, and to support discussion with your health care team about your medical condition and treatment. It does not constitute medical advice and should not substitute advice given by your physician or other qualified health care professional.

Important Phone Numbers

Kidney Doctor:

Vascular Surgeon:

Dialysis Unit:

Kidney Clinic:

Vascular Access Clinic:

Studies have shown that 77% of patients with a fistula would recommend it to a friend.*

There is a small group of patients for which a fistula or graft may not be possible. Your doctor will discuss your options with you.

Our thanks to the multidisciplinary renal care team at Providence Health Care, who initially developed the information used in this pamphlet. This brochure can be downloaded from the BC Renal Agency website: www.bcrenalagency.ca

* Quinn RR, Lamping DL, Lok CE, Meyer RA, Hiller JA, Lee J, Richardson EP, Kiss A, Oliver MJ: *The Vascular Access Questionnaire: Assessing patient-reported views of vascular access.* J Vasc Access 9: 122-128, 2008.