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Govt releases new guidelines for peritoneal dialysis services

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The guidelines aims to serve as a comprehensive manual to States that intend to set up peritoneal dialysis



In what can be considered as a very important step in the care of patients with kidney disease in India, the Ministry of Health and Family Welfare has come up with guidelines for establishing peritoneal dialysis services under the Pradhan Mantri National Dialysis Program. It has also requested all States to include proposals for establishing peritoneal dialysis under their respective program implementation plans.

The guidelines aims to serve as a comprehensive manual to States that intend to set up peritoneal dialysis and for providers of peritoneal dialysis as a best practice document for ensuring delivery of high quality, cost effective service and supplies to develop a clinically safe and effective program for children, young people and adult women and men.

It also aims to achieve equity in patient access to home-based peritoneal dialysis, reduce the overall cost of care to the system by focusing on efficient leveraging of resources, and bring in consistency of practice, pricing and a full range of product availability.

Development of these guidelines involved a consultative process that was coordinated by the National Health Systems Resource Center and an Expert Committee that was chaired by Prof Vivekanand Jha, Executive Director of the George Institute for Global Health, India and included nephrologists from around the country, as well as health systems and policy experts.

Welcoming the move, Prof Vivekanand Jha, who is also the president of the International Society of Nephrology, said, “This is good news for about two lakh Indians, who develop end-stage kidney failure every year in India. They now have another treatment option that allows them to do dialysis at home with potential flexibility in lifestyle. Mass-based peritoneal dialysis programs also have the potential to substantially bring down the cost of treatment”.

The Government of India announced the National Dialysis Program in the 2016 Union Budget. The first phase of the program envisaged setting up of hemodialysis centres in all districts, Given that peritoneal dialysis avoids the substantial costs of infrastructure set up and maintenance and staffing, reduces the demand on healthcare system and offers patient autonomy, the decision has now been made to include peritoneal dialysis in the ambit of the National Dialysis Program.

“Our evaluation of the implementation of the Hemodialysis program implemented by the State of Andhra Pradesh under the Pradhan Mantri National dialysis scheme shows that making quality dialysis services affordable for people living in rural areas of the country is critical. Establishing Peritoneal Dialysis services under proper supervision of trained manpower can go a long way in making this a reality,” points out Dr Jha.

Prof Arvind Bagga, Professor and Head of the department of Pediatric Nephrology at the All India Institute of Medical Sciences, New Delhi, and a member of the Expert Committee said, “Children with kidney failure were particularly disadvantaged due to the exclusion of peritoneal dialysis from this program. This modality is particularly suited to children who need dialysis because of biological and lifestyle reasons. Further, pediatric hemodialysis facilities are scarce in India.”

The guidelines envisage providing training to community health workers to provide support to persons on peritoneal dialysis in home or in primary health care settings.

Prof Narayan Prasad, Secretary General of the Indian Society of Nephrology and a member of the Expert Committee said, "We recommend that simple self-care tools can be developed which can help people on peritoneal dialysis to pre-empt development of complications by detecting them early and be in constant communication with care providers.”

“Our research shows that home-based or self-dialysis can improve the quality of life as well as be cost-effective in the long run. A self-care tool can help patients be in control of their health by receiving real-time assistance through an automated evidence-based clinical decision support system,” says Prof Jha.

As part of The George Institute’s larger work on prevention and management of chronic kidney disease, the Institute has developed an innovative mobile phone-based self-care tool for patients suffering from end-stage renal treatment. The application provides a virtual simulation of the care provision scenario under the supervision of primary care patients and nephrologists.