

What does the literature tell us about the role of intensive hemodialysis modalities in the management of chronic dialysis-dependent patients?

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End-stage renal disease (ESRD) is associated with an unacceptably high mortality that has remained relatively unchanged in several decades. This has resulted in resurgent interest in intensive hemodialysis modalities such as nocturnal and short daily hemodialysis (NHD/SDHD). Small underpowered cohort and quasi-experimental studies dominated early research in this area. More recently, a number of important publications, including the two Frequent Hemodialysis Network randomized trials and several larger population-based cohort studies with mortality as part of their outcomes, have received much attention and warrant a careful analysis of their internal and external validity. A nuanced understanding of this rapidly evolving body of literature is necessary in order to appreciate how these novel modalities are best integrated into the spectrum of ESRD treatment options.

Biography

Dr. Pauly received his clinical training in Nephrology at McGill University in Montreal and subsequently completed a Master's degree in Epidemiology from McGill and a research fellowship in home nocturnal hemodialysis at the University of Toronto. Dr. Pauly is currently Associate Professor of Medicine in the Division of Nephrology at the University of Alberta and medical director of the Northern Alberta Home Hemodialysis Program. His research focuses on delivery of home intensive hemodialysis (nocturnal and short daily hemodialysis – NHD and SDHD) and how these dialysis paradigms are integrated into the spectrum of end-stage renal disease treatment options. Dr. Pauly's research is supported by operating grants from the Canadian Institutes of Health Research and the Kidney Foundation of Canada among others.

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