Practical Guide to Surgical and Endovascular **Hemodialysis Access Management**

Hemodialysis is a life-sustaining treatment for patients with end-stage renal disease (ESRD). It involves filtering the blood through a dialysis machine to remove waste products and excess fluid. To perform hemodialysis, a vascular access point is required to connect the patient's bloodstream to the dialysis machine. The most common types of vascular access are arteriovenous fistulas (AVFs), arteriovenous grafts (AVGs), and central venous catheters (CVCs).



Practical Guide To Surgical And Endovascular Hemodialysis Access Management: Case Based

Illustration by Maxime J. Durand



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Surgical hemodialysis access management involves the creation, maintenance, and repair of vascular access points. Endovascular hemodialysis access management uses minimally invasive techniques to create and maintain vascular access points. These techniques can be used to reduce the risk of complications and improve patient outcomes.

Surgical Hemodialysis Access Management

Arteriovenous Fistulas (AVFs)

AVFs are the preferred type of vascular access for hemodialysis. They are created by surgically connecting an artery and a vein in the forearm or upper arm. AVFs typically have a long lifespan and are less prone to complications than other types of vascular access.

Arteriovenous Grafts (AVGs)

AVGs are created by surgically connecting an artery and a vein using a synthetic graft. AVGs are typically used when an AVF cannot be created or maintained. AVGs have a shorter lifespan than AVFs and are more prone to complications.

Central Venous Catheters (CVCs)

CVCs are inserted into a large vein in the chest or neck. CVCs are typically used for short-term hemodialysis or when an AVF or AVG cannot be created or maintained. CVCs have a high risk of complications, including infection and thrombosis.

Endovascular Hemodialysis Access Management

Endovascular hemodialysis access management uses minimally invasive techniques to create and maintain vascular access points. These techniques include:

Percutaneous Fistula Creation

Percutaneous fistula creation is a minimally invasive technique used to create an AVF. It involves using a needle and catheter to connect an artery and a vein. Percutaneous fistula creation is less invasive than surgical fistula creation and can be performed in an outpatient setting.

Endovascular Graft Placement

Endovascular graft placement is a minimally invasive technique used to create an AVG. It involves using a catheter to insert a synthetic graft into an artery and a vein. Endovascular graft placement is less invasive than surgical graft placement and can be performed in an outpatient setting.

Stent Placement

Stent placement is a minimally invasive technique used to repair stenosed or occluded vascular access points. It involves using a catheter to insert a stent into the narrowed or blocked blood vessel. Stent placement can help to improve blood flow and prevent complications.

Complications of Hemodialysis Access Management

Complications of hemodialysis access management can include:

Infection

Infection is a common complication of hemodialysis access management. It can occur at the site of the vascular access point or in the bloodstream. Infection can be treated with antibiotics, but it can lead to serious complications, including sepsis.

Thrombosis

Thrombosis is the formation of a blood clot in the vascular access point. Thrombosis can block blood flow and lead to complications, including limb loss. Thrombosis can be treated with anticoagulants, but it can be difficult to prevent.

Stenosis

Stenosis is the narrowing of the vascular access point. Stenosis can restrict blood flow and lead to complications, including thrombosis. Stenosis can be treated with angioplasty or stenting.

Aneurysm

An aneurysm is a ballooning out of the vascular access point. Aneurysms can rupture and lead to life-threatening bleeding. Aneurysms can be treated with surgery or endovascular techniques.

Best Practices for Hemodialysis Access Management

Best practices for hemodialysis access management include:

Patient Education

Patients should be educated about the importance of vascular access care and the signs and symptoms of complications. Patients should also be taught how to perform self-monitoring of their vascular access point.

Regular Monitoring

Vascular access points should be monitored regularly for signs of complications. Monitoring should include physical examination, blood flow

measurement, and imaging studies.

Prompt Treatment

Complications of hemodialysis access management should be treated promptly to prevent serious consequences. Treatment options may include antibiotics, anticoagulants, angioplasty, stenting, or surgery.

Hemodialysis access management is an essential component of hemodialysis treatment. Surgical and endovascular hemodialysis access management techniques can be used to create, maintain, and repair vascular access points. By following best practices, complications can be minimized and patient outcomes can be improved.



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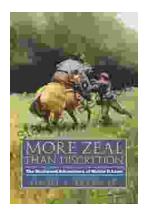
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