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FACULTY OF NURSING

End Stage Renal Failure



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OVERVIEW

- End stage renal disease (ESRD) occurs when the kidneys are functioning at a level of 10 percent or less.
- ESRD is a permanent condition that occurs at the final stage of chronic kidney disease (CKD).
 - CKD is divided into 5 stages: Stage 5 is the last stage
 - GFR (glomerular filtration rate) is less than 60 ml/min for more than 3 months
 - 20 million Americans have diagnosed CKD and 20 million more are at an increased risk
- Patient is unable to continue living without dialysis or a kidney transplant.

FUNCTIONS OF KIDNEY

- Controls blood pressure
- Controls fluid balance
- Maintain homeostasis:
 - Regulates blood pressure and electrolytes, maintenance of acid-base balance
- Production of hormones
 - Calcitriol, renin, erythropoietin
- Production of red blood cells
- Reabsorption of water, glucose, and amino acids
- Removes waste from blood
- Removes waste via urine
 - Excretes waste such as urea and ammonium

COMMON CAUSES

Most common

- Diabetes Mellitus (46%)
- High blood pressure (27.2%)

Other Causes

- Congenital abnormalities
- Reactions to medications
- Injuries
 - Trauma to kidneys
 - Major loss of blood

SIGN/SYMPTOMS

• Excessive thirst

- Muscle twitching
- Bruise easily
- Orowsiness
- Onfusion

• Fatigue

- Headaches
- Difficulty concentrating
- Weight loss/Loss of appetite

- Edema in hands and feet
- Numbness in extremities
- Nose bleeds
- Bone pain
- Nausea/Vomiting

TREATMENT

- Dialysis or kidney transplant are the only treatments for ESRD
- Dialysis
 - Too much waste in the body
 - 2 Types
 - Hemodialysis Blood circulates through a machine
 - Enters and exits the body through a "gortex graft" or "cimino fistula"
 - Peritoneal dialysis Places fluid in stomach to remove waste via catheter
 - Lab test results
 - Severity of symptoms
 - Patient readiness
- Medications
 - ACE inhibitors
 - Angiotensin receptor blocker
 - High blood pressure medication

• Changes in diet

- Low protein diet
- Limit:
 - Fluids
 - o Salt
 - Potassium
 - Phosphorous
 - Electrolytes

Other treatments

- Anemia
 - Increase iron intake
 - Phosphate binders
 - Prohibit elevation of phosphorous levels
 - Increase calcium and vitamin D

LAB TEST PERFORMED

- Creatinine (10-12 cc/minute level)
- BUN (Blood urea nitrogen)
- Potassium
- Sodium
- Albumin
- Phosphorous
- Calcium
- Cholesterol
- Magnesium
- Complete blood count (CBC)
- Electrolytes
- * Labs must be drawn regularly if patient is prescribed dialysis



• 45% of ESRD are diabetic and inactive

Low functioning capacity

Average peak oxygen consumption is 20 ml·kg-¹·min-¹

- Very light intensity
- Increased leg fatigue

BENEFITS OF EXERCISE

Goal of exercise: Improve or maintain exercise capacity

- Challenged by daily tasks of living
- Resistance and aerobic exercise training to increase

Improves blood pressure control

