COVID-19

An End Stage Renal Disease (ESRD) National Coordinating Center (NCC) Professional Education Quickinar

May 13, 2020
Agenda

• What is this call about?
• Today’s speaker:
  ▪ Tushar Chopra, MD
    Assistant Professor of Medicine, Division of Nephrology,
    University of Virginia
  ▪ Topic: Pathways of managing home dialysis patients during the era of COVID-19
  ▪ Questions and answers (Q&As) from chat and Q&A panels
What Is This Call About?

• Hear from stakeholders and peers in the ESRD community who are adapting to COVID-19.
• Share examples and provide real-world strategies for facilities to use.
• Engage in weekly calls on varying topics.
Pathways of Managing Home Dialysis Patients During the Era of COVID-19

Tushar Chopra, MD
Assistant Professor of Medicine, Division of Nephrology, University of Virginia
Why Choose PD During the COVID-19 Era?

- Autonomy: Patient-centered choice of modality based on lifestyle
- Access: Avoids central venous catheters
- Cost-effective
- Less exposure during the COVID-19 era
- Maintains RKF

PD = peritoneal dialysis
RKF = renal kidney function
Pathways to Increase Comfort in Managing a Kidney Disease Patient During the COVID-19 Era

**Pre-ESRD**
- Virtual education class
- Short videos on PD, HHD, transplant, diet, and conservative management

**Pre-ESRD**
- Access placement is essential
- Endovascular AVF

**Hospital Starts (AKI-D)**
- Urgent start PD
- HHD machines for SLED, nocturnal HD

**ESRD patients**
- Telemedicine
- Management PD patient with COVID-19
- Nursing home PD

HHD = home hemodialysis
AVF = arteriovenous fistula
AKI-D = acute kidney injury disease
SLED = sustained low efficiency dialysis
Hospital Starts AKI-D Patients With COVID-19

- **Urgent Start PD**
  - Personnel for catheter placement with good outcomes
  - Reimbursement of PD patient on AKI-D is yet to be covered by CMS

- **Short Daily HD**
  - Can use HHD machines for AKI-D patients

- **Nocturnal HD**
  - Use HHD machine overnight to allow patient to participate in rehabilitation during the day
Urgent Start PD

PD catheter, bowel prep, antibiotics

Purse string sutures, fibrin glue

Low-volume supine CCPD

CCPD = continuous cycling peritoneal dialysis.
Telemedicine and Home Dialysis

- Presently, CMS has provided waivers for the use of telehealth for PD patients during the current public health emergency.

- This includes relief from the requirement of:
  - Initial 3-months face-to-face MCP visit post-home dialysis initiation
  - Face-to-face MCP visit once every 3 months
  - Questions remain on which waivers will remain after the COVID-19 crisis improves.

- ESRD Telemedicine Toolkit

Advantages
- Cost-effective
- Fewer ER visits/hospitalizations
- Quality of life
- Access

Disadvantages
- Lack of outcome data
- Privacy concerns
- Internet access
- EMR integration
Management of a Home Dialysis Patient With COVID-19 in the ICU

- **Continuous veno-venous hemofiltration (CVVH)**
- **Anticoagulation needed**

- **Resource limitations**
  - **Home HD machines**
  - **2 machines for 4 patients**

- **Supine CCPD Q1–2 hours (start low volume and increase as tolerated)**

**Abbreviations:**
- **ICU** = intensive care unit
- **CRRT** = continuous renal replacement therapy
- **ARDS** = acute respiratory distress syndrome
- **PIRRT** = prolonged intermittent renal replacement therapy
Management of ESRD Patient With Mild-Moderate Symptoms of COVID-19 (Non-ICU)

<table>
<thead>
<tr>
<th>Method</th>
<th>RKF &gt; 3 ml/min</th>
<th>RKF &lt; 3 ml/min</th>
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| **CAPD** | • Maximize diuretics  
  • Increase frequency of hypertonic dialysate (start 2.5%)  
  • Increase fill volumes in 200 ml increments | • Increase frequency of hypertonic dialysate 2.5%  
  • Increase fill volumes by 200 ml increments in supine position |
| **CCPD** | • Day dwells to maximize water and salt removal  
  • Avoid long day dwells with glucose-based solutions  
  • Mid-day exchange | • Low, low average (avg) transporter 3–4 cycles over 9 hours + must use day exchange  
  • High, high avg transporter 4–5 cycles over 9 hours with more day dwells |

CAPD = continuous ambulatory peritoneal dialysis  
ml/min = milliliters per minute
Summary

Home Dialysis-centric

- Acute PD for AKI coverage by insurance
- Assist PD coverage

In-center Hemo-centric
Let Us Hear From You

Q&As from chat and Q&A panels
TheKidneyHub.org

Introducing TheKidneyHub.org.

• New resource for patients and professionals
• Secure, mobile-friendly web tool developed by the ESRD NCC with assistance from patient subject matter experts (SMEs)
• Links to important resources, such as:
  ▪ COVID-19 emergency resources.
  ▪ Patient-created resources on transplant, infection prevention, well-being, etc.
  ▪ Educational materials for new (and experienced) ESRD patients.
  ▪ And more.
Our Next COVID-19 Quickinar Events

• Save the dates for our next events.
  ▪ Patient-focused event:
    May 19, 2020, at 5 p.m. ET
  ▪ Provider-focused event:
    May 20, 2020, at 5 p.m. ET

• Visit www.kidneyCOVIDinfocenter.com for information and to register.
Thank You!

NCCinfo@hsag.com
844.472.4250
813.865.3545
www.esrdncc.org

Additional COVID-19 resources for patients and providers:

www.kidneyCOVIDinfocenter.com

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