

There are three different types of dialysis. The blood is returned to the body, along with replacement fluid.

**Peritoneal dialysis** Peritoneal dialysis involves surgery to implant a peritoneal dialysis (PD) catheter into your abdomen.

**Continuous renal replacement therapy (CRRT)** This therapy is used primarily in the intensive care unit for people with acute kidney failure.

Both the AV fistula and AV graft are designed for long-term dialysis treatments. After you've been on hemodialysis for an extended period of time, your doctor may feel that you're ready to give yourself dialysis treatments at home. The catheter helps filter your blood through the peritoneum, a membrane in your abdomen. Once the dialysate draws waste out of the bloodstream, it's drained from your abdomen.

The main ones are:

- Continuous ambulatory peritoneal dialysis (CAPD).
- Continuous cycling peritoneal dialysis (CCPD).

People who receive AV fistulas are healed and ready to begin hemodialysis two to three months after their surgery. However, hemodialysis treatment can also be completed in shorter, more frequent sessions. Most hemodialysis treatments are performed at a hospital, doctor's office, or dialysis center. During treatment, a special fluid called dialysate flows into the peritoneum. In CAPD, your abdomen is filled and drained multiple times each day. CCPD uses a machine to cycle the fluid in and out of your abdomen.

**Intermittent peritoneal dialysis (IPD).** This process uses an artificial kidney (hemodialyzer) to remove waste and extra fluid from the blood. To get the blood to flow to the artificial kidney, your doctor will perform surgery to create an entrance point (vascular access) into your blood vessels. This type connects an artery and a vein.