

WHAT IS THE NEXT BEST STEP?

- A. Increase each NIPD exchange volume from 2L to 2.3L
- B. Add a last fill of icodextrin of 1.5L to be kept in for the day
- C. Change NIPD exchanges from 1.5% to 2.5% solution
- D. Add an additional NIPD 2L exchange such that it is 5 exchanges over 11 hours

The correct answer is C.

After conservative measures for treating volume overload are exhausted (eg. minimizing salt intake, diuretics, etc.), it then becomes imperative to adjust the PD prescription. A good rule-of-thumb is to choose a path that has the least impact on the patient's daily routine, especially if they live a life around dialysis.

Choices B and D are both acceptable ways for increase ultrafiltration, however, they involve some changes to her daily routine. The addition of day-time icodextrin is a relatively minor adjustment, so it is in fact a viable 'second best' answer. If the patient had diabetes with suboptimal glucose control, we an argument can even be made against increasing dextrose concentration.

However, adding additional nighttime exchange will significantly impact her daily routine, especially as it pertains to her job hours.

Further reading:

https://qxmd.com/wp-content/uploads/2017/10/USMP_76_14-00012_2-PD-Prescription-Management-Guide_FINAL.pdf

<https://www.kidneywi.org/wp-content/uploads/2020/11/AM-4-The-PD-Prescription.pdf>