

How to prescribe On-line HDF

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Standard low-flux haemodialysis (HD) is not very efficacious, and patient morbidity and mortality rates are still very high. The MPO study reported that high-flux HD (hf-HD) showed a significant 37% relative risk reduction of mortality in patients with serum albumin  $\leq 4$  g/dl; online haemodiafiltration (HDF) is considered the most efficient technique of using high-flux membranes, as clearances of small solutes, like urea, are higher than in haemofiltration and clearances of middle solutes, like  $\beta_2$ -microglobulin, are higher than in hf-HD. Standard hemodialysis (HD) is not good as compared to normal kidney function and patient morbidity and mortality rates are still very high. To increase mid-to-large molecule clearance by combining diffusion and convection, the use of On-line hemodiafiltration (HDF) is required. Compared with standard HD, On-line HDF is associated with better control of anemia, nutritional status, treatment adequacy, hospitalization and greater reduction in calcium phosphate product, higher elimination of parathyroid hormone (PTH). Because of these things mentioned earlier, On-line HDF is considered to be superior in the morbidity and mortality than standard HD.