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Selection of renal replacement therapy

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As chronic disease and elderly population increased, chronic kidney disease and the patients receiving renal replacement therapy also increased. In the past, the patients thought dialysis as a quick death. However, recently, as patients who have received renal replacement therapy have long been alive, the CKD patients have changed mind about the lives receiving dialysis. Although it is essential to prepare renal replacement therapy as renal function is reduced in patients with chronic renal failure, debate continues as to when to start renal replacement therapy and what dialysis therapy to choose. In particular, recently, as the law of "Withdrawing of Life Sustaining Treatment" is passed, the patients have also been a right to stop renal replacement therapy. Traditionally, the selection of renal replacement therapy have been determined based on the patient's survival rate. However, recently, it is thought that the patient's quality of life and the patient's own decision to continue the renal replacement therapy are also another important factor for determining the selection of renal replacement therapy. Kidney transplantation, hemodialysis and peritoneal dialysis have been proposed as renal replacement therapies, and research has been continuing to determine which renal replacement therapies is more beneficial to patients. However, "the conclusion" is still unclear. In addition, there are continuing studies of which methods performing renal replacement are more beneficial to the patient in each renal replacement therapies including hemodialysis and peritoneal dialysis respectively. From these various perspectives, I will discuss how to select the renal replacement therapy in patients with chronic kidney disease.