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## **Chronic Kidney Diseases Patient With Pulmonary Edema And Vascular Access Problem Manage With Acute Peritoneal Dialysis**

**Safitri Ammarie**, nasrum machmud , syakib bakri, haerani rasyid, hasyim kasim, st rabiul zatalia, akhyar albaar

Department of Internal Medicine-Nephrology, medical faculty hasanuddin University, makassar, south sulawesi, Indonesia, Indonesia

**Case Study :** Emergency dialysis sometimes needed in patient with chronic dialysis and vascular access problem, performed with acute Peritoneal dialysis (PD). Generally, this procedure use cyclor machine for exchange fluid every 2 hours known as automated peritoneal dialysis (APD) machine, but in emergency case can be done manually as an alternative, especially in dialysis centre with limitation that doesn't have APD machine, then continue to Chronic PD. Case Report, 76 years old woman admitted to the hospital with severe shortness of breath and pulmonary edema, already on Hemodialysis (HD) in the last 3 years. 2 weeks ago, HD was postponed due to infection in vascular access and failure to repair, that caused vascular access problem. Acute PD was success manually performed, with input dianeal 2.5% 500 cc each session 2 hours for 3 days with output 600-750 cc each session as expected. Vascular access problem frequently found in patient with HD. Because of it, acute PD is needed for acute dialysis procedure. This procedure needs APD machine, but in this case, we used manual PD, because limitation of APD machine. After 3 days of Acute PD, result in clinical and laboratory improvement, then continue with chronic PD. This procedure was chosen because of several reasons Such as pulmonary edema, anuria, and vascular access problem. Acute PD can be an alternative management for chronic kidney diseases on HD patient, in acute condition and has no vascular access but needs immediate dialysis. Acute PD can perform manually in dialysis centre that don't have APD machine and result in patient improvement.