

Feel your best with continuous ambulatory peritoneal dialysis (CAPD)

CAPD is a simple and flexible home dialysis option that can help you take control of your health. You do three to four 30-minute treatment sessions each day in any clean environment—at home, at work, or while traveling. And, you'll gain the confidence to succeed with our award-winning education experience and 24/7 nurse support.



BENEFITS OF CAPD

CAPD is easy to learn, offers schedule flexibility, doesn't require a care partner, and provides health and lifestyle benefits.

Transplant ready

People who choose peritoneal dialysis therapy are more likely to receive a transplant than those who choose non-home modalities.^{1,2}

Emergency ready

If an emergency should arise, like a power outage or not having access to water, you can continue to perform your therapy in any clean area with minimal supplies. No power, water, or machines are required for this therapy.

Daytime therapy

Perform your therapy during daylight hours when you're most alert, and work it around your regular activities at home, work, or school.

Freedom to move

CAPD therapy can be done in many clean areas in and outside of your home. Between sessions you are free to resume your normal activity until your next session. And if you choose to travel, your supplies can easily go with you.

Fits better into your space

With no machine and fewer supplies needed, CAPD takes up less space in your home compared to other home modalities.

Quality sleep

Sleep is essential for your health. By doing your therapy during the day, nights are free for restful, uninterrupted sleep.



TAKE THE NEXT STEP Talk to your doctor about your treatment options and see if CAPD is the best fit for you and your lifestyle.

Sinnakirouchenan R, Holley JL. Peritoneal dialysis versus hemodialysis: risks, benefits, and access issues. Advances in Chronic Kidney Disease. 2011 Nov;18(6):428-432.
Fuquay R, Teitelbaum I. "Transplant Outcomes and Dialysis Modality," in Peritoneal Dialysis - State-of-the-Art 2012, eds. Ronco C, Rosner MH, Crepaldi C (Karger, 2012), 251-257.

