Tidying Up the Peritoneal Dialysis Modality Classification: A Proposal

Editor:

Newcomers are often confused by the inconsistent names and abbreviations of the peritoneal dialysis (PD) modalities. For example, the letter C in CAPD (continuous ambulatory PD) refers to continuous treatment, while the letter C in CFPD (continuous-flow PD) refers not to continuous treatment but to a continuous in-and-out flow of dialysis fluid. Not to mention other minor variations in the abbreviation expansions, such as the N in NIPD referring either to “nocturnal” or “nightly” intermittent PD, and the second C in CCPD meaning cycler, cyclic, or cycling PD.

Considering advancements in PD technique, we believe that it is time to tidy up the PD modality classifications. There is no better a forum for discussion about this issue than *Peritoneal Dialysis International*. We would like to start that discussion with our proposal for a systematic nomenclature and abbreviation for the PD modalities, modified from current usage.

Because the term CAPD has been the most widely used and well understood, the new system should be consistent with that term. Our proposed system (see Table 1) has two letter positions to describe technical differences between the various PD modalities.

The first letter position describes the continuity of dialysis therapy, either “continuous” (C) or “intermittent” (I). “Continuous” refers to dialysis during which dialysis fluid is always present in the abdomen. “Intermittent” refers to dialysis in which there is a period of time when no dialysis fluid is left in the abdomen (“dry” abdomen).

The second letter position describes the technique of dialysis fluid exchange, “ambulatory” (A), “cycling” (C), “tidal” (T), or “irrigating” (I). “Ambulatory” refers to the manual exchange of dialysis fluid, such that the patient can ambulate during dwells. In other options, an automated machine performs the dialysis fluid exchanges. “Cycling” refers to automated exchanges with complete drainage of effluent, and “tidal” refers to automated exchanges with partial drainage of effluent. “Irrigating” refers to automated exchanges with continuous flow of PD fluid throughout the treatment period, which may itself be either

TABLE 1
Current Usage and Proposed System for Naming Peritoneal Dialysis (PD) Modalities

Volume–time curve	Current term	Proposed term
Continuous ambulatory PD (CAPD)	Continuous ambulatory PD (CAPD)
Nocturnal intermittent PD (NIPD)	Intermittent cycling PD (ICPD)
Continuous cycling PD (CCPD)	Continuous cycling PD (CCPD)
Continuous cycling PD (CCPD)	Continuous cycling PD boosted (CCPD ^b)
Tidal PD (TPD)	Intermittent tidal PD (ITPD)
Tidal PD (TPD)	Continuous tidal PD (CTPD)
Continuous-flow PD (CFPD)	Intermittent irrigating PD (IIPD)

continuous or intermittent. The term “irrigating” is selected here instead of “continuous” to avoid confusion.

Additionally, the optional term “boosted”—shown as a superscript letter b—could be added at the end of the resulting terms to signify a combination of automated and manual exchanges in some patients.

Our effort is far from perfect, and yet we hope it is at least a sensible start. With input from readers of *Peritoneal Dialysis International* and probably meetings organized by the International Society for Peritoneal Dialysis, we are certain that the PD modality classification will eventually be nicely tidied up.

DISCLOSURES

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