

# Review of: "Audit of Haemodialysis Vascular Access in a Sub-Saharan Tertiary Hospital"

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Potential competing interests: No potential competing interests to declare.

Review of "Audit of hemodialysis Vascular Access in a Sub-Saharan Tertiary Hospital" by **Dada Samuel Ayokunle, Aremu Ayanwale Olusegun, Thomas Anthony Awolowo**, and **Isijola Bukola Ibisio**

SUMMARY: This study has shown the current practice of vascular access for hemodialysis and the complications associated with vascular access in a resource-poor setting where both funding and expertise are challenges. It is important and relevant to highlight the various practices and complications to improve the outcomes of hemodialysis.

The article is easy to read and understand in simple English.

**TITLE AND AIM:** The title and aim are also clearly stated. There are different types of dialysis; specify which type of dialysis (haemodialysis) in the title.

**LITERATURE REVIEW:** Comparison of the various methods of vascular access for haemodialysis was not done adequately. Are there centers that practice the different vascular access methods, or are there centers that used femoral catheters previously and are currently using arterio-venous fistulas (AVFs), and what are their outcomes? What complications are more common with which?

**METHODS:** 1) The name of the tertiary center where data was collected or the study was

done should be included in the methodology. 2)The nephrologists in the hospital did placement of the vascular access except AVFs. It is important to indicate where and how the AVFs recorded in the study were done. 3) Are there any patients who started hemodialysis with a femoral or jugular line and ended up with an AVF?

RESULTS: 1) TABLE 1- How were those between the ages of 30-31 and 70-71 years classified? 2) It would be nice to see a table with the various vascular access routes and individual complications of each, if possible.

Discussion: Well done.

Conclusion /Recommendation: More scientific evidence is required by this article to recommend the AVF as documented by the guidelines. This is showing the superiority of AVF over other vascular access methods.