

Haemodialysis and peritoneal dialysis patients' health perceptions: a comparative study

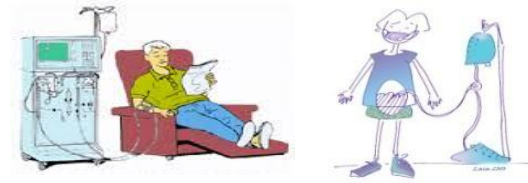
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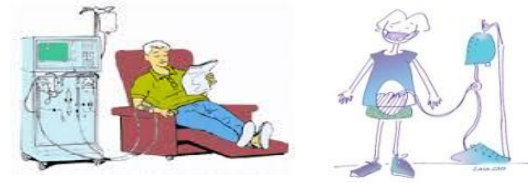
Background



- **Health-related quality of life (HRQoL)** is the measure of an individual's assessment of his/her physical, emotional and social well-being affected by the disease and/or its treatment (Rebollo & Ortega 2002)
- **Chronic kidney disease** has a great impact on HRQoL – several aspects in life are altered/disrupted (Finkelstein *et al.* 2009)
- Higher rates of **anxiety and depression** among the **dialysis patients** (Cukor *et al.* 2007)
- Anxiety and depression **impair HRQoL** (Creed *et al.* 2002)



Why is HRQoL important?



Family support

Psychological well-being



Autonomy



Good functional capacity

Knowing patients' HRQoL helps to create interventions aiming to improve care and enhance QoL

Megari 2013

Etceteras...

Pain

Loneliness



Depression

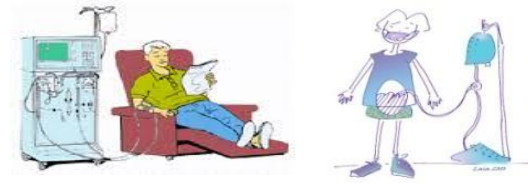
Lack of social support



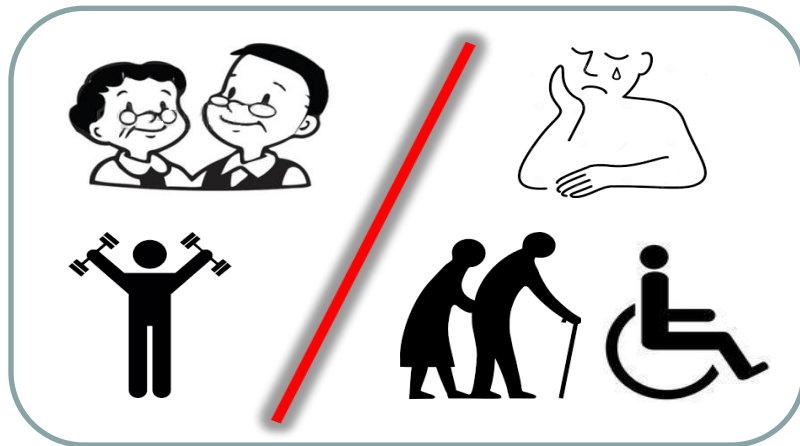
Poor functional capacity



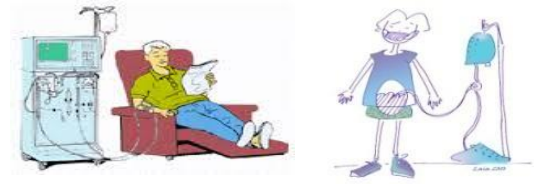
Objective of study



To assess and compare the health perceptions between haemodialysis (HD) and peritoneal dialysis (PD) patients.



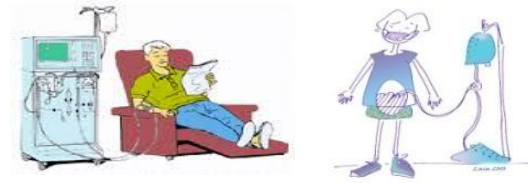
Methodology ¹



- Retrospective & descriptive study
Period: 2015.
- Included all HD & PD patients of our centre.
Variables:
 - ✓ Gender, age
 - ✓ Diabetes
 - ✓ Functional capacity
 - ✓ Psychosocial status.



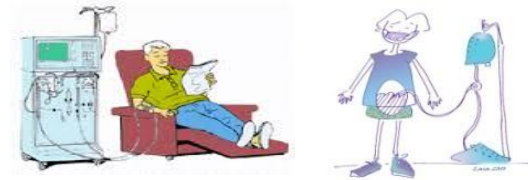
Methodology ²



- 5 instruments used to measure HRQoL:
 - ✓ Medical Outcomes Study Short Form Scale (SF-12) – 12 items to measure physical & mental status. **Scores:** 0 – 100 (**50** represents **lowest acceptable health status** & **100** represents **excellent state**).
 - ✓ Charlson comorbidity Index – 17 items to relate patient's comorbidity with mortality at long-term.
 - ✓ Barthel ADL Index – 10 items to assess patient's autonomy in performing basic activities of daily living (ADL).
 - ✓ Lawton-Brody IADL Scale – 8 items to assess patient's ability in performing instrumental activities of daily living.
 - ✓ Geriatric Depression Scale (GDS) – 5 items to screen for depression in patients >65 years of age.



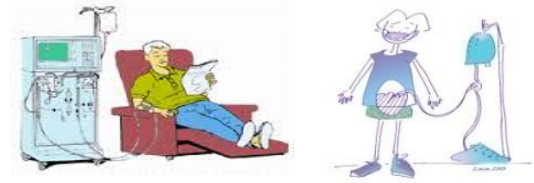
Methodology ³



- **HD treatment sessions & PD follow-up visits**
 - ✓ Patients approached for participation
 - ✓ Study explained
- **Descriptive analysis**, using **SPSS 21.0 (IBM Corp. Chicago, USA)**
 - ✓ Categorical variables: frequency & %
 - ✓ Continuous variables: median (range)
 - ✓ Chi-square test: to compare categorical variables
 - ✓ Student's T-test: to compare unpaired categorical variables
 - ✓ Mann-Whitney U test: to compare continuous variables not normally distributed.
 - ✓ Statistical significance: $p < 0.05$



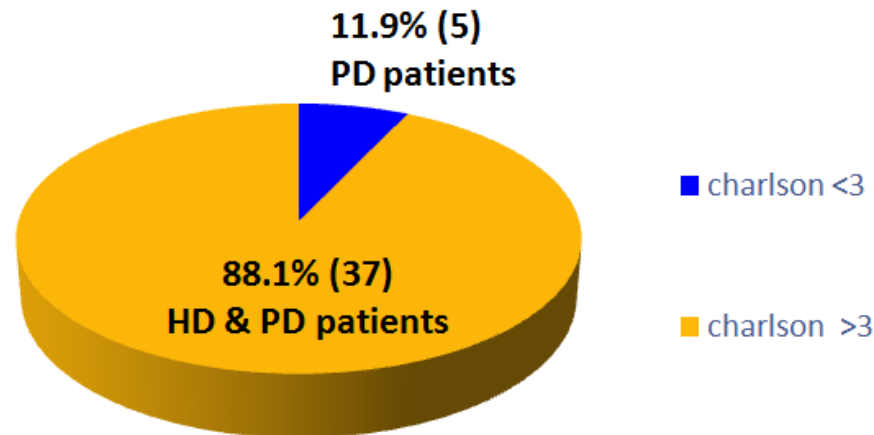
Results ¹



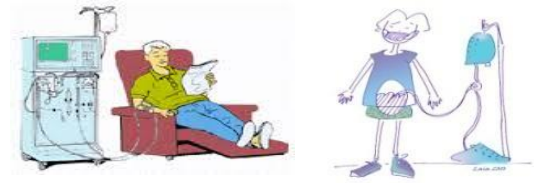
N 42 (21 HD & 21 PD)

- **Males: 69% (29) / Females: 31% (13)**
- **Median age in years: 66 (30 – 90)**
- **Diabetics: 52.4% (22).**
- **Patients with possible depression: 40.5% (17)**

- **Charlson index:**



Results ²



* Activity of daily living (ADL)

Autonomy

- ✓ Barthel >75%: 85.7%
- ✓ Lawton-brody >5: 78.6%

ADL* dependency: 14.3%

Dependency: 21.4%

Functional capacity

- ✓ No physical exercise: 33.3% (14)
- ✓ Physical exercise (>30-60 min/week): 66.7% (28)

Quality of life (SF-12) score 0 -100:

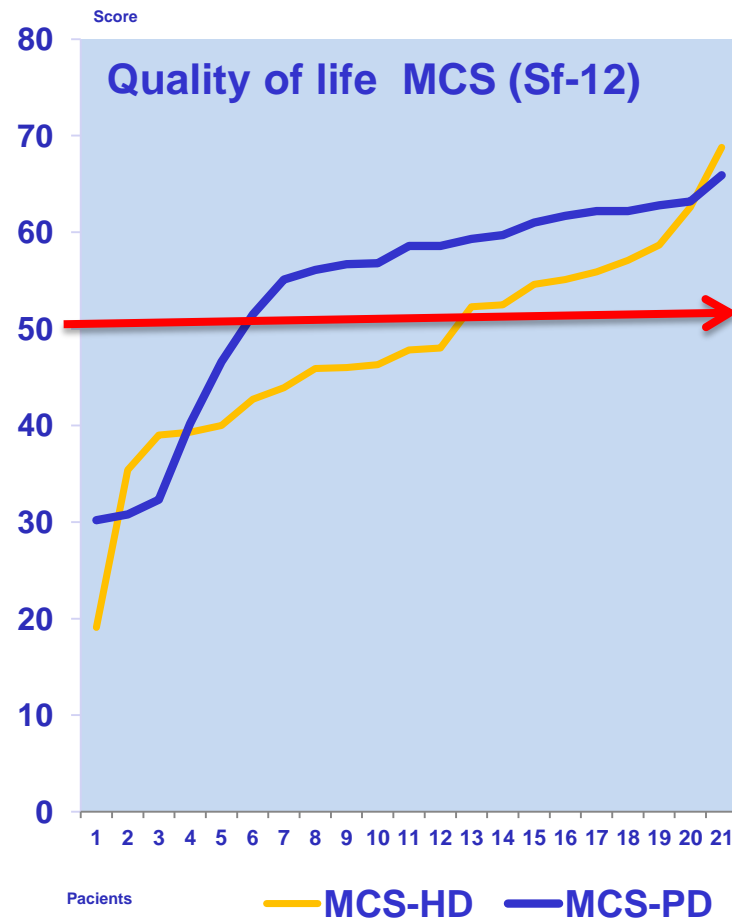
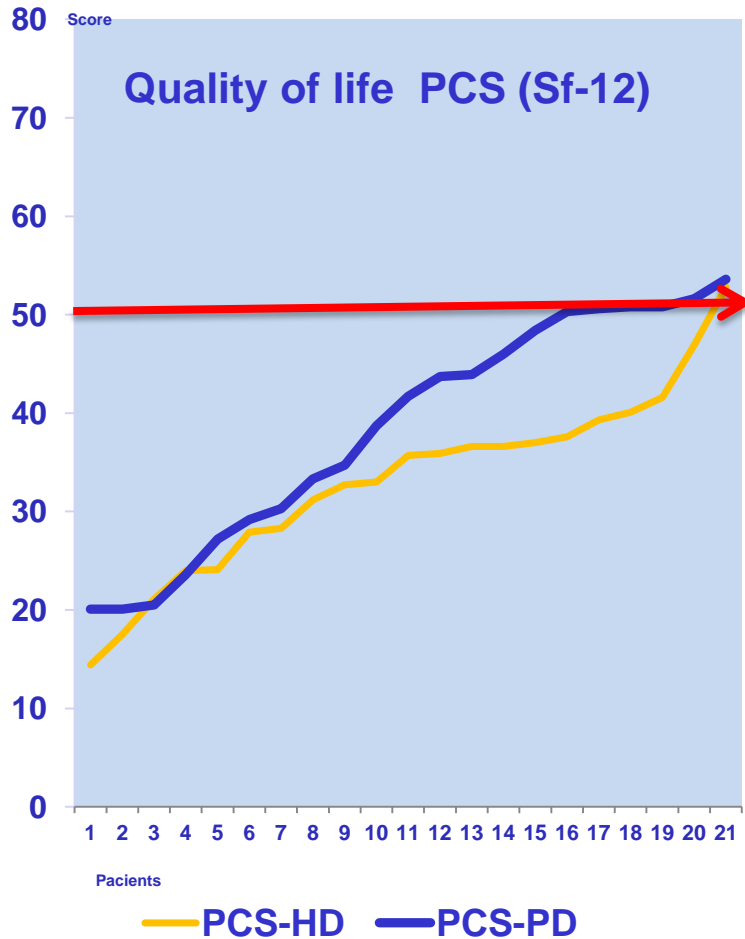
- ✓ Physical component Summary (**PCS**): 35.79 ±10.86
- ✓ Mental component Summary (**MCS**): 51.04 ±11.20



QoL: HD vs PD



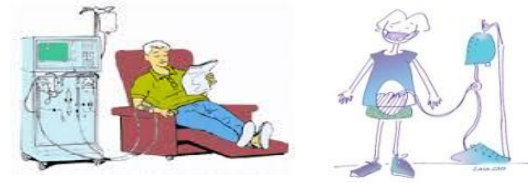
Scores



Acceptable QoL score: >50



Results ³

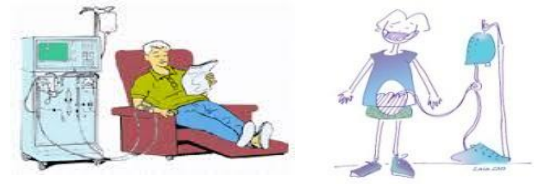


Statistical significance = $P < 0.05$

		HD (21) % (n)	PD (21) % (n)	P
SF-12: PCS	≥ 50	4.7% (1)	28.5% (6)	0.03
	< 50	95.3% (20)	71.5% (15)	
SF-12 : MCS	≥ 50	42.8% (9)	76.2% (16)	0.05
	< 50	57.2% (12)	23.8% (5)	
GDS	0 -1	33.3% (7)	81.0% (17)	< 0.01
	≥ 2	66.7% (14)	19.0% (4)	
Functional capacity				< 0.01
Sedentary		52.4% (11)	4.7% (1)	
Exercise (min/mod)		47.6% (10)	95.3% (20)	



Conclusions



- ❖ Physical health below acceptable minimum level
(especially in HD patients: more sedentary and therefore feel worse physically)

Intervention:

Exercise programme in collaboration with the Physiotherapy Department to be launched.

- ❖ Possible depression detected in 41% of these patients

Intervention:

Close follow-up to monitor affected individuals.



Thank you for listening!



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