



psychological factors in noncompliance among hemodialysis patients



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Noncompliance



Noncompliance among HD patients

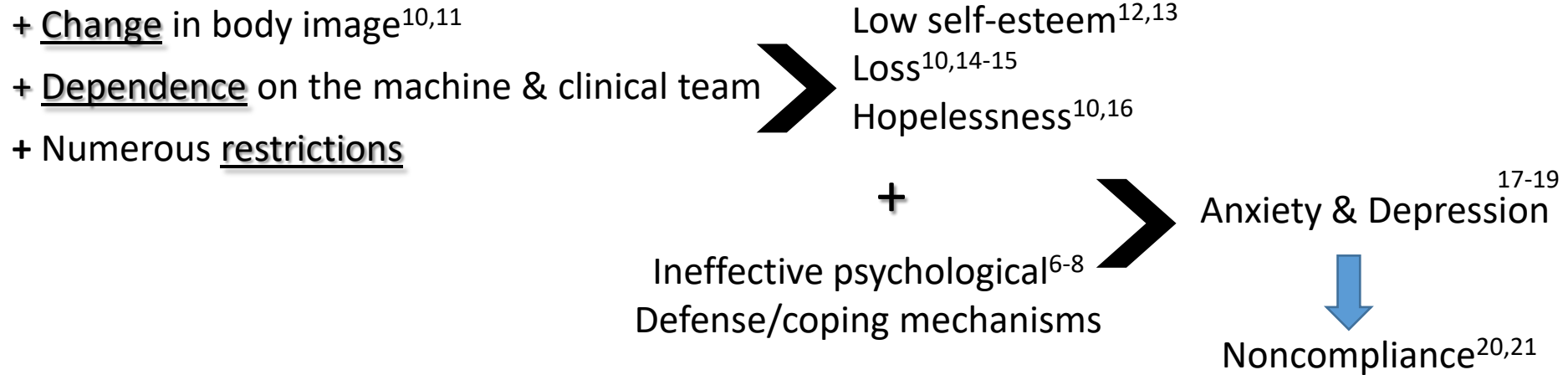
- None-adherence is universally recognized as one of the major clinical issues in the management of ESRD among Hemodialysis patient.

<u>Country</u> ↓	None Adherence		
	Fluid intake	Nutrition	Medication
Germany & U.S.A (N=456) ¹	72.3%	80.4%	
Iran (N=237) ²	45.2%	41.1%	
Turkey (N=154) ³	95%	98.3%	
Italy (N=1238) ⁴			52%
India (N=150) ⁵			37%



The psychological impact of HD

- Hemodialysis heavily violates the bio-psychosocial balance of the patient.
- HD patient tend to use neurotic and immature defense mechanisms (i.e. reversal reaction, denial, dissociation, projection, somatization and Splitting)⁶⁻⁸
- Anxiety & Depression are the most common psychological issues among HD patient⁹



Vaillant's Levels of Defense

Immature defenses

Passive aggression, Acting out, Dissociation, Projection
Autistic fantasy: Devaluation, Idealization, Splitting



Neurotic (intermediate) defenses

Intellectualization, Isolation, Repression, Reaction formation,
Displacement, Somatization, Undoing, Rationalization

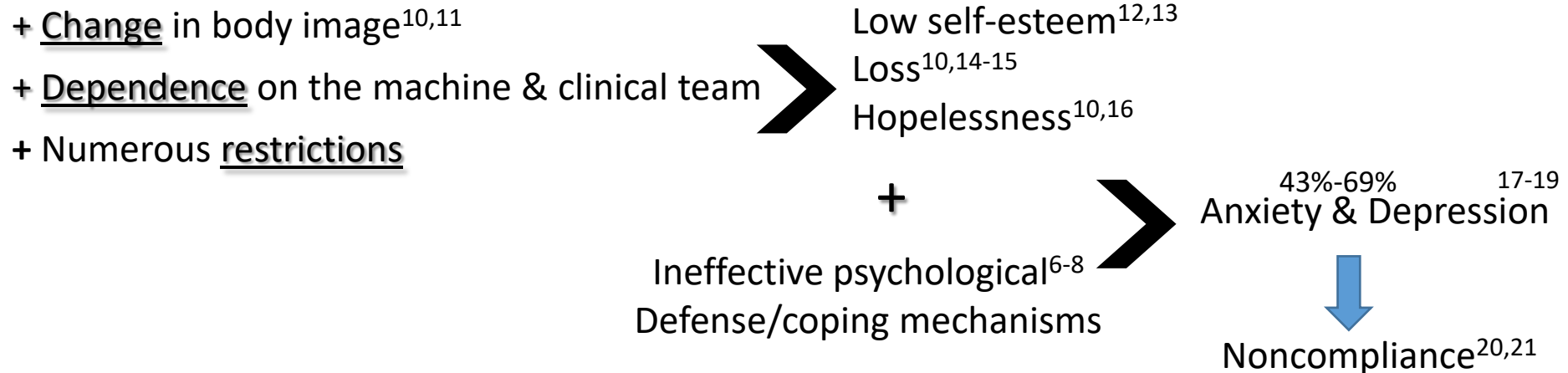


Mature defenses

Suppression, Altruism, Humor, Sublimation

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Treat the Defense mechanism ETHIOLOGY not the Nonadherence symptom

Cognitive Behavioral Therapy (CBT)²⁴;

- ✓ significant improvements in depression, quality of life, and prescription compliance.

Psychosocial influencers²⁵;

- ✓ Self-efficacy promotion and the support of family or healthcare providers could diminish the negative impact of depression on adherence.



Thank you



Psychological assessment helps

References

1. Kugler, C., Maeding, I., & Russell, C. L. (2011). Non-adherence in patients on chronic hemodialysis: an international comparison study. *Journal of nephrology*, 24(3), 366.
2. Ahrari, S., Moshki, M., & Bahrami, M. (2014). The relationship between social support and adherence of dietary and fluids restrictions among hemodialysis patients in Iran. *Journal of caring sciences*, 3(1), 11.
3. Efe, D., & Kocaöz, S. (2015). Adherence to diet and fluid restriction of individuals on hemodialysis treatment and affecting factors in Turkey. *Japan Journal of Nursing Science*, 12(2), 113-123.
4. Neri, L., Martini, A., Andreucci, V. E., Gallieni, M., Rocca Rey, L. A., Brancaccio, D., & MigliorDialisi Study Group. (2011). Regimen complexity and prescription adherence in dialysis patients. *American journal of nephrology*, 34(1), 71-76.
5. Sontakke, S., Budania, R., Bajait, C., Jaiswal, K., & Pimpalkhute, S. (2015). Evaluation of adherence to therapy in patients of chronic kidney disease. *Indian journal of pharmacology*, 47(6), 668.
6. Carvalho, A. F., Ramírez, S. P., Macêdo, D. S., Sales, P. M. G., Rebouças, J. C., Daher, E. F., & Hyphantis, T. N. (2013). The psychological defensive profile of hemodialysis patients and its relationship to health-related quality of life. *The Journal of nervous and mental disease*, 201(7), 621-628.
7. Nowak, Z., Wańkowicz, Z., & Laudanski, K. (2015). Denial Defense Mechanism in Dialyzed Patients. *Medical science monitor: international medical journal of experimental and clinical research*, 21, 1798.
8. Zoccali, R., Bellingeri, G., Mallamace, A., Muscatello, M. R. A., Bruno, A., Santoro, D., ... & Meduri, M. (2006). Defense mechanisms in hemodialysis-dependent patients. *Clinical nephrology*, 65(2), 119-123.
9. Kimmel PL, Cukor D, Cohen SD, Peterson RA. Depression in end-stage renal disease patients: a critical review. *Advances in Chronic Kidney Disease* 2007; 4: 328-34.
10. Gorman, L. M., & Sultan, D. F. (2007). *Psychosocial nursing for general patient care*. FA Davis.
11. Gerogianni, K. S., & Babatsikou, P. F. (2014). Psychological aspects in chronic renal failure. *Health science journal*, 8(2), 205-214.
12. Poorgholami, F., Javadvpour, S., Saadatmand, V., & Jahromi, M. K. (2015). Effectiveness of Self-Care Education on the Enhancement of the Self-Esteem of Patients Undergoing Hemodialysis. *Global journal of health science*, 8(2), 132.
13. Magela Salomé, G., de Almeida, S., & Silveira, M. (2014). Quality of life and self-esteem of patient with renal disease. *Journal of Coloproctology*, 34(4), 231-239.
14. Chan, R., Brooks, R., Gallagher, M., Erlich, J., Snelling, P., Chow, J., & Suranyi, M. (2010). Measuring Kidney Disease-Related Loss in Samples of Predialysis and Dialysis Patients: Validating the Kidney Disease Loss Scale. *Clinical Journal of the American Society of Nephrology*, 5(7), 1249-1254.
15. Monaro, S., Stewart, G., & Gullick, J. (2014). A 'lost life': coming to terms with haemodialysis. *Journal of clinical nursing*, 23(21-22), 3262-3273.
16. Aasen, E. M., Kvangarsnes, M., & Heggen, K. (2012). Perceptions of patient participation amongst elderly patients with end-stage renal disease in a dialysis unit. *Scandinavian journal of caring sciences*, 26(1), 61-69.
17. Ng, H. J., Tan, W. J., Mooppil, N., Newman, S., & Griva, K. (2015). Prevalence and patterns of depression and anxiety in hemodialysis patients: A 12-month prospective study on incident and prevalent populations. *British journal of health psychology*, 20(2), 374-395.
18. Bayat, A., Kazemi, R., Toghiani, A., Mohebi, B., Tabatabaee, M. N., & Adibi, N. (2012). Psychological evaluation in hemodialysis patients. *J Pak Med Assoc*, 62(3 Suppl2), S1-5.
19. Hou, Y., Li, X., Yang, L., Liu, C., Wu, H., Xu, Y., ... & Du, Y. (2014). Factors associated with depression and anxiety in patients with end-stage renal disease receiving maintenance hemodialysis. *International urology and nephrology*, 46(8), 1645-1649.
20. Weisbord, S. D., Mor, M. K., Sevick, M. A., Shields, A. M., Rollman, B. L., Palevsky, P. M., ... & Fine, M. J. (2014). Associations of depressive symptoms and pain with dialysis adherence, health resource utilization, and mortality in patients receiving chronic hemodialysis. *Clinical Journal of the American Society of Nephrology*, 9(9), 1594-1602.
21. Cukor, D., Rosenthal, D. S., Jindal, R. M., Brown, C. D., & Kimmel, P. L. (2009). Depression is an important contributor to low medication adherence in hemodialyzed patients and transplant recipients. *Kidney international*, 75(11), 1223-1229.
22. Oh, H. S., Park, J. S., & Seo, W. S. (2013). Psychosocial influencers and mediators of treatment adherence in haemodialysis patients. *Journal of advanced nursing*, 69(9), 2041-2053.
23. Cukor, D., Ver Halen, N., Asher, D. R., Coplan, J. D., Weedon, J., Wyka, K. E., ... & Kimmel, P. L. (2014). Psychosocial intervention improves depression, quality of life, and fluid adherence in hemodialysis. *Journal of the American Society of Nephrology*, 25(1), 196-206.
24. Cukor, D., Ver Halen, N., Asher, D. R., Coplan, J. D., Weedon, J., Wyka, K. E., ... & Kimmel, P. L. (2014). Psychosocial intervention improves depression, quality of life, and fluid adherence in hemodialysis. *Journal of the American Society of Nephrology*, 25(1), 196-206.
25. Oh, H. S., Park, J. S., & Seo, W. S. (2013). Psychosocial influencers and mediators of treatment adherence in haemodialysis patients. *Journal of advanced nursing*, 69(9), 2041-2053.