



A STUDY TO ASSESS THE QUALITY OF LIFE AMONG PATIENTS UNDERGOING HAEMODIALYSIS IN NEPHROLOGY WARD

¹ Rajalakshmi .N ² Dr.M.Kavitha

¹Nursing Tutor. ² Professor

¹ community Health Nursing ²Medical SurgicalNursing

¹ Ph.D(N) Scholar, Meenakshi Academy of Higher Education and Research Centre, Chennai, Tamil Nadu-78

²Ph.D(N), Meenakshi Academy of Higher Education and Research Centre, Chennai, Tamil Nadu-78

Abstract : Chronic disease thereby developing kidney failure cause the impact on quality of life of patients which moves to global health burden which seeks immediate attention.

Objectives: To assess the quality of life among patients undergoing hemodialysis and to associate the quality of life among patients with their selected sociodemographic variables **Hypothesis** There is statistically significant relationship between quality of life among dialysis patients with sociodemographic variables **Methodology:** Non experimental descriptive (multivariate) research design **Result:** 61% of dialysis patients were had below average level of quality of life There was significant association between the quality of life among hemodialysis patients with their selected sociodemographic variables like Age, duration of dialysis and frequency of dialysis. **Conclusion:** chronic renal patient has profound effect on quality of life, these issues would enable health care providers to deliver more patient-centered care and improve overall well-being of the patients.

IndexTerms - Quality of life, hemodialysis patients, Nephrology

INTRODUCTION:

Generation today is very different from the past years. Many things are invented in terms of food, technology and other things that make a lot of people to live in luxury. But along these, in terms of the health of people nowadays, there are certain disease that are quite making a name in the statistical data of our health department. Due to sedentary life style, stress from daily living and lack of healthy activities, numerous people are now suffering from certain disease.

Chronic diseases have become a major public health problem and the leading cause of mortality and morbidity Global status report on non-communicable disease (2018) stated that 80% of chronic disease deaths worldwide occur in low-middle-income countries, End-stage renal disease (ESRD) is one among chronic disease which possess great threat globally and increased burden in the healthcare system and leads to increased morbidity and decreased the Quality of life (QOL)

Need for the Study

In India few devastating statistics about CKD are 17% of Indians have some form of chronic kidney disease. There are 60 million people with diabetes in India, more than any other nation on the planet. Sadly, the majority of them are either not diagnosed or poorly treated. Throughout the entire illness nurses play a crucial role in providing information, support understanding and therapeutic counselling to the patient and the family. Hence there is need for considering to assess the quality of life of hemodialysis patients and coping style when they are treated in hospital

METHODOLOGY:

Research approach:The research approach adopted in this study quantitative approach

Research Design: non experimental descriptive (multivariate) research design.

Setting: The study was conducted in Nephrology ward in Government Rajaji Hospital Madurai.

Sampling Technique:Non-probability (consecutive) sampling technique

Population: Accessible Population 1200

Sample: 100 samples were selected by who met the inclusion criteria.

The inclusion criteria: Age group between 20-60 years and patients in 7 years duration of hemodialysis, patients who were available at the time of data collection.

The Exclusion criteria: patients who were terminally ill and mentally ill and who had acute renal failure. the quality of life is assessed by kidney disease quality of life questionnaire (KDQOL-36TM).

Scoring procedure: The SF-12 is a healthy related quality of life questionnaire consisting of twelve questions that measure eight health domains to assess physical and mental health. <50 -below average score, >50-above average score. Higher scores reflecting a better quality of life and lesser impact of functional scale. Each patient was interviewed for 30 minutes to complete the questionnaire and their cooperation was imperative.

Statistical tools: Descriptive statistics such as frequency and percentage distribution were used to analyze the data collection the tool was used for data collection was

Section A: Demographic Variables

Section B: Assess the Quality of life by using KDQOL-36 Questionnaire

RESULTS AND DISCUSSION:

Frequency and percentage of Distribution Based on demographic variables of Hemodialysis patients n=100

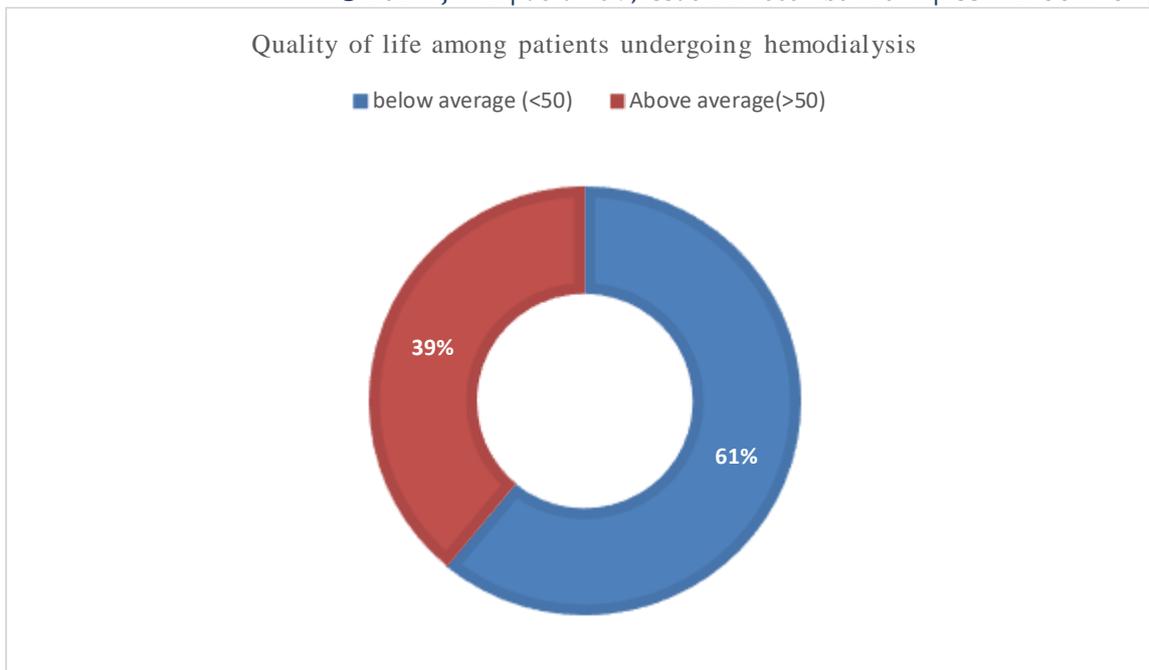
S.no	Socio Demographic Data	Frequency	%	
1.	Age	20-30 years	16	16.0
		31-40 years	24	24.0
		41-50 years	37	37.0
		51-60 years	23	23.0
2.	Gender	Male	64	64.0
		Female	36	36.0
3.	Religion	Hindu	86	86.0
		Muslim	9	9.0
		Christian	5	5.0
4	Educational status	Non formal	86	86.0
		Primary education	23	23.0
		Secondary education	17	17.0
		graduates	24	24.0
5	Occupation	Daily wages	46	46.0
		Business	27	27.0
		Private employee	9	9.0
		Government employee	18	18.0
6	Monthly income	Rs 5000-10,000	52	52.0
		Rs 10,001-15,000	6	6.0
		Rs 15,001-20,000	39	39.0
		>20,000	3	3.0
7.	Marital status	Married	67	67.0
		Unmarried	25	25.0
		Divorced	3	3.0
		Separated	5	5.0
8.	Type of family	Nuclear family	80	80.0
		Joint family	20	20.0
9.	Duration of dialysis	0-2 years	62	62.0
		3-5 years	20	20.0
		6-7 years	8	8.0
10.	Frequency of Dialysis	Once a week	35	35.0
		Twice a week	58	58.0
		Thrice a week	7	7.0

The above table explains the frequency and percentage distribution of Sociodemographic variables among patients undergoing hemodialysis. Majority of patients were in the age group 41-50 years, majority of them 86% belongs to Hindu religion and in Gender most of them were Male 64% in view of educational status 86% were had Non formal education majority 46% of them were daily wages in regards to duration of dialysis majority were under 0-2 years and majority were 58% doing twice a week dialysis.

Frequency and percentage distribution of quality of life among patients undergoing Hemodialysis n=100

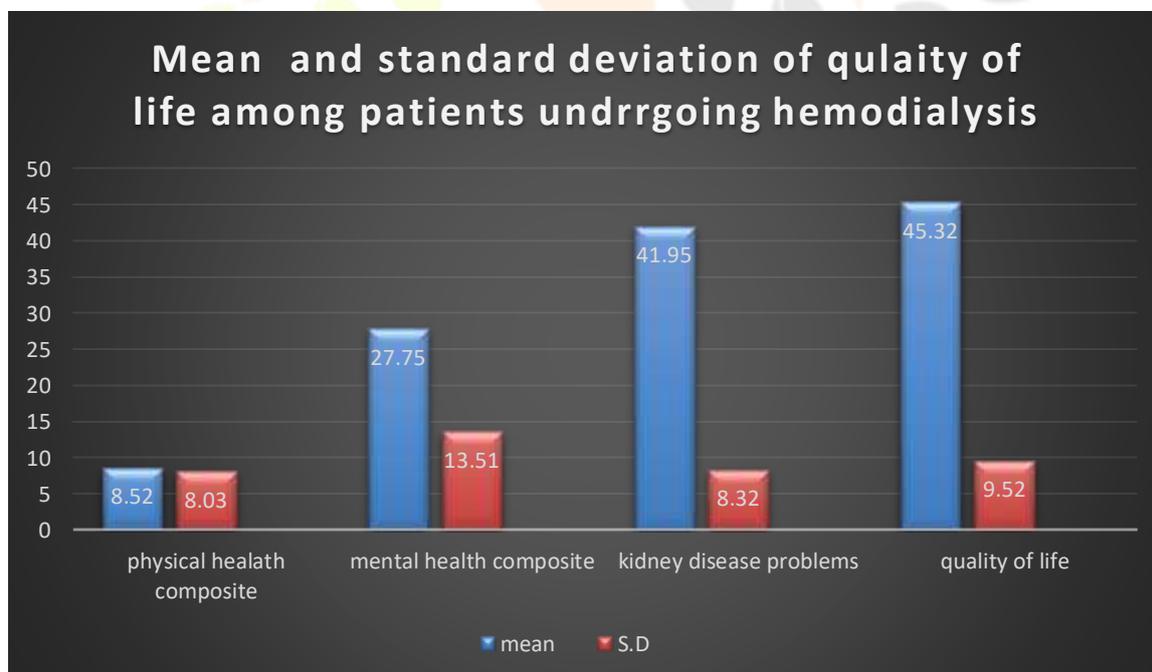
S.No	Quality of life	frequency	percentage
1	Below average	61	61.0
2	Above average	39	39.0

The above table depicts that majority of subjects 61% were had below level of quality of life and 39% were had above level of quality of life.



Description of mean and standard deviation of quality of life among patients undergoing hemodialysis n=100

Components of KDQOL-36	Mean	Standard Deviation
Physical health composite	8.52	8.03
Mental health composite	27.75	13.51
Kidney disease problem composite	41.95	8.32
Quality of life	45.32	9.52



Among 100 subjects, physical composite mean score was 8,52 with standard deviation 8.03 and mental health composite mean score was 27.75 with standard deviation 13.51 and kidney disease problem composite mean score was 41.95 with standard deviation 9.52. functional scale indicates the quality of life among patients undergoing hemodialysis was poor and higher psychological and physical problems.

Association between quality of Life among patients undergoing haemodialysis with their selected demographic variables

Demographic variables	Quality of life				N	χ^2	p-value
	Below average		Above average				
Age	f	%	f	%		10.5	0.017 (S)*
a) 20-30 yrs	8	13.3	8	20.5	16		
b) 31-40 yrs	15	24.6	9	23.1	24		
c) 41-50yrs	29	47.5	8	20.5	37		
d)							
e) 51-60yrs	9	14.8	14	35.9	23		
Duration of dialysis						7.08	0.008 (S)*
a) 0-2 yrs	56	91.8	28	71.8	84		
b) 3-5 yrs	5	8.2	11	28.2	16		
c) 6-7 yrs	0	0	0	0	0		
Frequency of dialysis						9.09	0.011 (S)*
a) Once a week	11	18	2	5.1	13		
b) Twice a week	38	62.3	35	89.7	73		
c) Thrice a week	12	19.7	2	5.1	14		

*p<0.05significant

DISCUSSION:

In this current study kidney disease quality of life (KDQOL-36) questionnaire used to assess the quality of life among patients undergoing hemodialysis. Majority of the subjects 61(61%) were had below average level of quality of life. Among 100 subjects physical composite mean score was 8.52 and the standard deviation was 8.03 and mental health composite mean score was 27.75 and standard deviation 13.51 and the mean score of kidney disease problem composite was 41.95 and the standard deviation was 8.32. the sum up of quality of life among 100 hemodialysis undergoing patients mean score was 45.32 and standard deviation was 9.52.

In this current study that there was statistically significant association between the quality of life and psychosocial problems undergoing hemodialysis with their age(41-50years) duration of dialysis(0-2 years) and frequency of dialysis(twice a week). The study concluded that there was most important outcomes were safety treatment, health-related quality of life and satisfaction with care, gender, profession and duration of dialysis had the strongest. influence on relevant differences of preferences for outcomes of quality of life of hemodialysis patients.

CONCLUSION:

The present study concluded that most of the hemodialysis patients were had poor quality of life. They need integrated strategies for the identification and management. chronic renal patient has profound effect on quality of life, these issues would enable health care providers to deliver more patient-centered care and improve overall well-being of the patients

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