

A STUDY TO ASSESS THE QUALITY OF LIFE OF PATIENTS UNDERGOING HEMODIALYSIS FOR CHRONIC RENAL FAILURE

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Abstract

An investigation of the quality of life of chronic renal failure patients undergoing hemodialysis at selected hospitals in Bangalore was conducted by Mr. Kothawala Ameet Bhaskar Rao, a master's student at the Rajiv Gandhi University of Health Sciences, Karnataka. Select hospitals in Bangalore participated in the study. 50 individuals with Chronic Renal Failure on hemodialysis were studied for this study. Patients getting hemodialysis at selected hospitals in Bangalore were assessed for quality of life using a modified standardized medical outcome short form (SF-36). Purposeful sampling was employed. The study used a descriptive approach to research. Most of the chronic renal failure patients on hemodialysis in the research were between the ages of 41 and 50, men from the Hindu faith with a monthly family income between Rs.10001 and Rs.20000, according to the findings of the study. In addition; the majority of them were on cannula dialysis and did not have any related illnesses. There was a statistically significant correlation (chi square 5.128) between age and quality of life. Chronic renal failure patients on hemodialysis had a low quality of life, according to a total score of 48.37 percent in all eight parameters. Management will undertake in-service training for staff nurses on renal rehabilitation in order to motivate Chronic Renal Failure patients undergoing hemodialysis to enhance their quality of life and maximize their dialysis care.

Keywords: Rehabilitation, Chronic Renal Failure, Haemodialysis, Demographic variable,

1. INTRODUCTION

Chronic renal failure (CRF) is a leading cause of morbidity and death in today's population. The quality of life of individuals with chronic renal failure (CRF) is a significant consideration when evaluating their results. To better understand the patient's perspective on health, a variety of tools are available. Surviving longer is associated with better health, according to recent research. The quality of life of patients with chronic renal failure (CRF) must be preserved both before and after the start of hemodialysis.

A rigorous evaluation of hemodialysis patients' health-related quality of life might have various advantages. It has the potential to shed light on the issues that exist.

Receptive to care providers' assistance. There may be policy and therapeutic changes as a result of the acknowledgment of these health issues. The information on the impact of quality of life on health service providers and commissioners might be useful in

determining the amount of service required. Second, chronic renal failure therapy is quite costly.

This raises the question of how these therapies stack up against other health care options in a time of restricted resources. Measures that can be used by everyone are needed for these kinds of comparisons. The caretakers can use standardized instruments to assess the quality of life connected to general health in order to identify the obstacles. Insights about how to enhance one's quality of life can be gleaned through quality of life assessments. A person's quality of life can be influenced by the care they get from others. Patients with chronic renal failure who are receiving hemodialysis treatment must have their quality of life assessed using the Standardized Questionnaire.

Physical functioning (PF), Role limitations due to physical difficulties (RP), body pain (BP), perception of general health (GH), Vitality (VIT), social functioning (SF), role limitations attributed to emotional problems (RE), and mental health (MH).

The conceptual frame work serves as a spring board for theory development and scientific advancements. The theoretical context enhances the importance of the study, where a model symbolically represents a phenomenon. It is a device that helps to stimulate research and the extension of knowledge by providing direction, impetus as well as application of this process in clinical area.

Roy's adaptation Model is selected as the conceptual frame work for this study which was designed by Sister Callista Roy in 1970. The focus of Roy's adaptation Mode list he set of process by which a person adapts to the environmental stress.

2. LITERATURE REVIEW

Review of literature, according to Polit and Beck, describes the current level of knowledge on a certain topic.

The purpose of reading relevant literature is to get a wide awareness of the material that is available and relevant to a particular topic. Data collection and analysis, as well as interpretation of findings, were examined in detail at the outset of the study project. 21

According to Treece & Treece, research may be viewed as a continuous process that incorporates information obtained from previous investigations.

The researcher was able to obtain a deeper understanding of the problem and learn about what has been done in the past by doing a literature review of relevant research and non-research publications. The following is a summary of our review of the relevant literature for this investigation.

It was determined that chronic renal failure patients getting hemodialysis therapy had a lower quality of life than those who did not. In order to avoid actions that might negatively affect the quality of life. The Medical Outcome Survey-Short-Form 36 was used to examine 125 patients with chronic renal failure who were receiving hemodialysis therapy (SF-36). Semi-structured interviews were used to gather information on daily routines.

The results showed that the quality of life of these people is deteriorated, both physically and emotionally.

Chronic renal failure patients' quality of life was studied by Cleary J and Drennan J in a research published in the Journal of the American Medical Association.

Using comparing the general population who are sufficiently dialyzed and those who are inadequately dialyzed, the overall quality of life of patients receiving hemodialysis may be measured by (dialysis adequacy) assessments. Haemodialysis has restrictions in a variety of areas, including physical functionality and role, etc., according to a new study.

Hemodialysis patients' quality of life, self-care abilities, and overall feeling of coherence were assessed in a comparative research done by Ageborg M., Allenius BL., and Cederfjall C. For the purpose of this study, researchers wanted to find out if there are any differences between patients who dialyze at home (self-care) versus those who dialyze in an outpatient dialysis facility (nurse-assisted). Short Form 36 (SF36) health survey, Appraisal of Self-Care Agency questionnaire, and Sense of Coherence questionnaire were used in the study. As many as nineteen patients participated in the study, which found that those who dialyzed at home scored higher on quality of life, self-care capacity, and feeling of coherence than those who dialyzed at a dialysis clinic.

Study:

Acaray A, Pinar R, surveyed chronic hemodialysis patients and their families on their quality of life a total of 100 hemodialysis patients and their family members were included in this study. The SF-36 was used as the primary tool for assessing the quality of life of the patients investigated in this study. The study found that patients' quality of life scores were often between average and below average. Families were more pessimistic about the social functioning and functional status of their loved ones on the SF-36, but they were more upbeat about own well-being. As a result of the study's findings, it is recommended to conduct regular assessments of the quality of life of people.

3. RESEARCH GAP

It is the goal of research technique to assist the researcher in answering the research questions in an efficient, accurate and cost-effective manner.

These processes are described in detail in this chapter which covers the investigation's data collection and organization.

It is important to consider all of these factors when developing a methodology since they affect everything from study design to data collecting and analysis. An evaluation of the quality of life at selected Bangalore hospitals for chronic renal failure patients undergoing hemodialysis is the focus of this study. Methodology provides the broad framework for obtaining accurate responses to the questions that were specified in the study.

When it comes to applying research, it's all about finding out what's working and what's not, and that's the primary purpose of applied research.

The study's goal is to obtain information about chronic renal failure patients' quality of life using a descriptive method. Describes the world as it is and offers a realistic depiction of what's going on.

Specific qualities of the sample, people, and situations under consideration. For quantitative studies, descriptive research serves as a foundation.

Data collection, measurement, and analysis are all guided by a study's research design, which is a conceptual framework. From drafting the hypothesis and its operational implications through final data analysis, it provides an overview of what the researcher will perform.

The research design is the plan for the study, linked to a researcher's overall framework for conducting the study and obtaining the answers to the research questions, it is stated that the research design incorporates the most important methodology, decisions that a researcher makes in conducting research.

Data analysis and interpretation are both guided by study design, which aids in subject selection for interviews with patients. Which research design is best for a given study is determined by the study's stated goals.

The study's methodology is based on a descriptive approach. As a result, the descriptive design was chosen since it facilitated the collection of first-hand data as well as boosted the collection of accurate and actionable data.

4. RESEARCH OBJECTIVE & METHODOLOGY

Sarvodaya Multi-Specialty Hospital, Narayana Hrudayalaya, and Bhagvan Mahaveer Jain Hospital, Bangalore, were selected for the current study. In all, Sarvodaya Multi-Specialty Hospital has a capacity of 250 beds. It is equipped with a dialysis facility.

Hospitals such as Narayana Hrudayalaya and Bhagvan Mahaveer Jain Hospital, Bangalore, are multi-specialty facilities. The facility also features a dialysis unit. Patients with Chronic Renal Failure attend hemodialysis on a daily basis, on average, between 5 and 6.

This location was chosen for this study because of its closeness to the research site, the practicality of the investigation, and the availability of a sufficient number of participants to conduct it.

The term "population" refers to any group of people that share one or more traits of interest to researchers.

Patients on dialysis at Sarvodaya Multi-Specialty Hospital and Narayana Hrudayalaya, Bangalore, are the study's primary focus.

Development of a tool and testing for validity and reliability are part of the process of collecting data. The instruments used in research should be as close as feasible to the optimal vehicles for obtaining relevant data for generating conclusions.

When conducting the study, researchers decided to use a structured interview schedule. Non-literate and literate consumers alike can benefit from using this strategy because it is relevant to both.

Based on the Roy's Adaptation model and the investigator's own experience and consultation with topic specialists, a modified SF36 medical outcome questionnaire was developed. First written in English, the utility was translated into Kannada.

Prior to the building of a structured interview schedule, a blue print was drawn up detailing which items will be included. Items were arranged according to the content of the places displayed.

The quality of life of chronic renal failure patients undergoing hemodialysis was assessed using a structured interview schedule.

Content validity was established by submitting seven experts to the produced instruments together with the stated objectives and operational definitions as well as the blue print of the tool, scoring key and a checklist for validation.

No one objected to the tool's design, but a few ideas were made to improve the distractors of specific questions, and these changes were implemented in response to the feedback.

5. DATA ANALYSIS & FINDINGS

Testing an instrument before to use is called pre-testing. An instrument's reliability is measured by its ability to consistently produce the same findings when tested again and again.

The instrument was administered to ten chronic renal failure patients getting hemodialysis at Sarvodaya Multi-Specialty Hospital in Bangalore for pre-testing purposes. "The Spearman–Brown prophecy formula was employed to test the tool's dependability.

There was a correlation coefficient of 0.94. An evaluation of the tool showed it to be accurate, dependable, and practical.

Quality of life in chronic renal failure patients undergoing hemodialysis was assessed on eight dimensions: physical functioning (PF), role constraints owing to physical issues (RP), bodily pain (BP), perception of general help (GH), vitality (VIT) and social functioning (SF) (MH).

When a limited number of people participate in a pilot study, it is known as a pre-experimentation study. The primary goal is to determine whether or not the measurement is adequate.

From October 31 to November 7, 2006, a pilot research was carried out at Sarvodaya Multi-Specialty Hospital in Bangalore. Ten chronic renal failure patients on hemodialysis were given a new tool to improve their quality of life. Descriptive statistics were used for data analysis. The results of the pilot research showed that a full-scale investigation is viable.

Permission from the appropriate authorities was acquired prior to any data being collected. The researchers also got informed consent from individuals undergoing hemodialysis for chronic renal failure and preserved patient anonymity during data collection.

From November 16th to December 16th, 2006, the data was gathered. Interviewing the chronic renal failure hemodialysis patients took an average of 30-40 minutes per patient per day, with a daily average of 5–6 patients being questioned per day.

The frequency, percentage, mean, mean percentage, and standard deviation were all used to assess the quality of life in patients with chronic renal failure receiving hemodialysis.

The chi-square test is frequently used to examine the relationship between demographic characteristics and knowledge.

A criterion for determining the importance of a difference is to adopt a level of significance of 0.5.

It was important to use descriptive and inferential statistics to produce a substantial overview of the findings of the structured interview schedule's data collection.

When a patient is admitted to a medical facility, nurses are solely accountable for their care. Researchers in Bangalore aimed to assess the quality of life for chronic renal failure patients getting hemodialysis.

During the four-week period from November 16th to December 16th, 2006, a descriptive research was undertaken. The equipment was used to collect data from 50 Chronic Renal Failure patients getting hemodialysis in selected Bangalore hospitals.

6. CONCLUSION

The quality of life of Chronic Renal Failure patients getting hemodialysis in Bangalore was found to be low in this research.

Chronic renal failure patients receiving hemodialysis have role restrictions owing to their physical health, emotional health, social functioning, and emotional well-being, according to the results of this study.

Quality of life was correlated with demographic characteristics such as age, current dialysis modality used, and current status of kidney dialysis.

According to the current findings, future nursing staff should get client education on how to maintain a high quality of life while on hemodialysis for patients with Chronic Renal Failure. This may be done by including this topic within the nursing curriculum, which incorporates technological innovation, shifting trends, and concepts connected to theory and practice.

Nurses are the most important members of the health care team, and they play a critical role in promoting and maintaining good health. Along with experienced hemodialysis

caregivers, newly-hired staff nurses can be given the chance to learn and emphasize the importance of patient quality of life in Chronic Renal Failure patients.

As the field of nursing is always growing, the primary goal of research is to create a body of knowledge. Professions can build on this study's findings to undertake other research. A group of nurse researchers can inspire nursing students to conduct further research in this area.

Management will offer in-service education on renal rehabilitation programmers for staff nurses to motivate them to care for Chronic Renal Failure patients undergoing hemodialysis to maximize their dialysis care and enhance their quality of life.

Patients with Chronic Renal Failure getting hemodialysis in several Bangalore hospitals are the focus of the study. The current research is a descriptive one that lasted for four weeks, from November 16 to December 16 of last year.

Surveys were conducted in Bangalore on 50 patients with Chronic Renal Failure (CRF) who were getting hemodialysis at various hospitals using the standardized modified medical outcome short form 36 (SF-36).

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