

Abstract Type : Oral

Abstract Submission No. : OR-1127

Adherence to the Exercise Program in Patients with Chronic Kidney Disease Undergoing Hemodialysis at Tertiary Hospital

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Objectives: Evaluate the adherence to exercise program(during dialysis and at home) by patients diagnosed with Chronic Kidney Disease (CKD) undergoing dialysis. Identify potential barriers to patient adherence to exercise program.

Methods: Patients with CKD undergoing dialysis as outpatients in a tertiary hospital were enrolled for the observational study(Fig 1). The baseline outcome measures of range of motion of upper and lower limbs and maximum repetition rate(MRR) testing of biceps, triceps, quadriceps, hamstrings were checked. Strengthening exercises for the upper limb and lower limb musculature using resistance band were carried out during haemodialysis and a home exercise program(HEP) was advised. Patient's adherence to exercise was observed every week on their visit to dialysis and during dialysis for three months through observational check list & semi structured questionnaire. Patient log diary to record the exercises performed was used to observe the HEP adherence. The data were analyzed using percentile and frequency table.

Results: Forty two patients(n=42) were enrolled, 23 men and 19 women with a mean age of 45±4.8 years. At the end of 12 weeks, twenty two(N=22) patients adhered to the exercise with 52% during dialysis(Fig 2). Potential barriers to exercise reported were surgeries(N=4), hospitalization(N=10), feeling sick(N=11) and lack of interest(N=16). Twenty patients'(N=20) completed the study with 48% of adherence to HEP, which was inconsistent with many reporting lack of interest, decreased motivation and frequent illness

Conclusions: Adherence to exercise during dialysis and to HEP was 52% and 48% respectively; indicating that adherence to exercises by patients with CKD was moderate. The study concludes that the factors having an impact on adherence have to be addressed as a multidisciplinary team

Clinical Implication: Indicator to plan an appropriate and safe exercise intervention to improve patient's quality of life(QOL).

Acknowledgement: This research is supported by Rajiv Gandhi University of Health Sciences, Bangalore.

Fig 1 - Methodology Summary Flow Chart

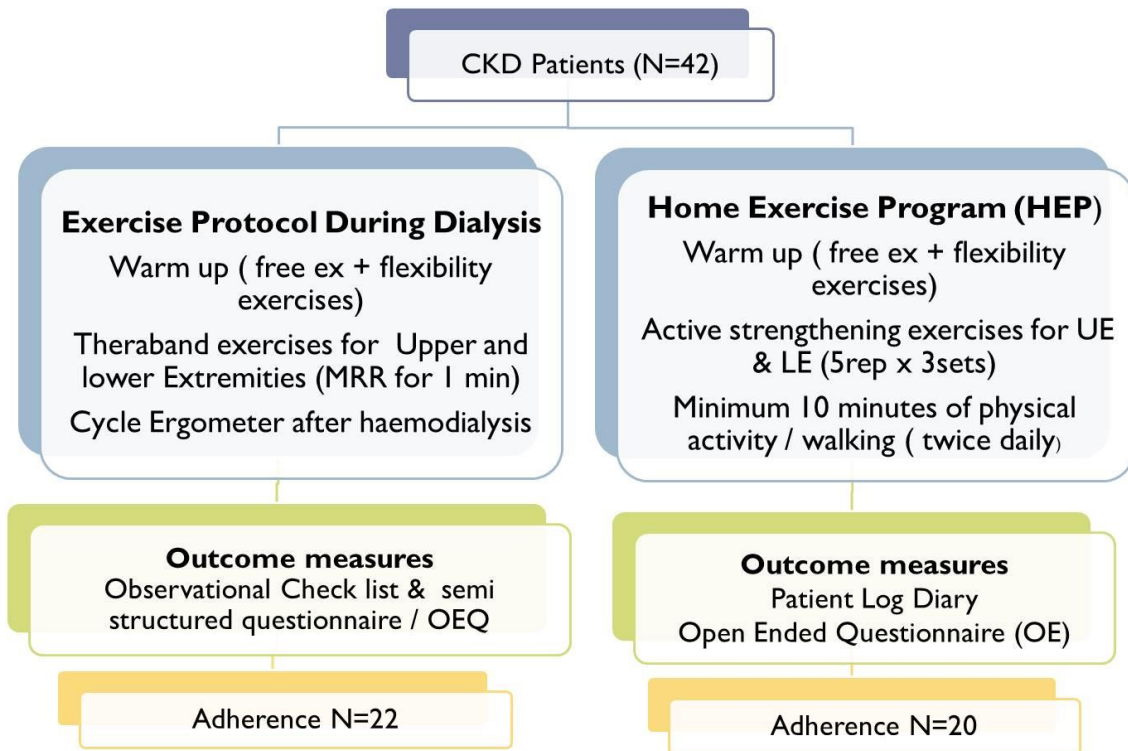


Fig 2- Adherence to Exercise During Dialysis

