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Assessment of Quality of Life in Hemodialysis patients and Associated Factors

Abdulla Al-Sayyari

Department of Medicine, King Saud Bin Abdulaziz University for Health Sciences, Saudi Arabia

Objectives: Assessing quality of life among our hemodialysis patients and the associated factors

Methods: The QoL was assessed using KdQoL 36. Subscales Physical Component Summary (PCS) and Mental Component Summary (MCS) Burden of Kidney Disease and Effects of Kidney Disease were calculated. according to the KDQOL-36 scoring system. The effect of sex, diabetic status, marital and employment status, exercise, dialysis shift, vascular access type, Kt/V and dialysis vintage on subscales were evaluated
Reliability was determined by calculating Cronbach's alpha.

Results: Two hundred and fifty five patients were enrolled. The Cronbach's alpha for internal consistency in was 0.9. The scores for the physical component summary (PCS), mental component summary (MCS), burden of kidney disease and effects of kidney disease subscales were 49.4, 38.7, 52.6, and 37.2 respectively.

Afternoon shift patients score highest in MCS and PCS ($p=0.0001$). The MCS score (38.7 ± 28.7) was significantly lower than PCS (49.4 ± 16.5) ($p=0.0001$). The "effect of kidney disease" subscale was higher in males ($p=0.02$), among the employed patients ($p=0.02$), in the afternoon dialysis shift (0.0001)

For Physical component score (PCS) higher scores were seen in males ($p=0.0001$), in non-diabetics (compared to diabetics) ($p=0.006$), in the employed patients ($p=0.02$) and was higher in those exercised more but this did not reach significance level ($p=0.07$). Marital status, vascular access type or whether the patient was using HD or G=HDF did not make a difference to the QoL

We found positive correlation between mental health (MH) and social functioning (SF) [correlation coefficient 0.70 , $p=0.0001$] and between mental health (MH) and general health (GH) [correlation coefficient 0.75 , $p=0.0001$](fig 1_

Conclusions: The highest score was seen in the "burden of kidney disease" subscale and the lowest in the "effects of kidney disease" subscale). Higher scores were seen in males, in non-diabetics, in the employed patients.

Correlation between mental health (MH) and social functioning (SF) mental health (MH) and general health (GH)

