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The Association of Poor Self Care with Chronic Kidney Disease among Normal Weight Hypertension

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Objectives: Hypertension is a major risk factor for cardiovascular and renal disease. Conversely, chronic kidney disease (CKD) is the most common form of secondary hypertension and mounting evidence suggests it is an independent risk factor for cardiovascular morbidity and mortality.¹ Association of CKD with obesity were well documented, but less in normal weight persons. We believe that adequate self-care may reduce cardiovascular disease and target organ damage in hypertension.

Methods: From a total of 1,461 hypertension attended 11 primary care settings in southern Thailand, 571 were normal weight, and 302 cases were eligible. The Self-Care Maintenance for Hypertension Index (SCMT-HTI), Thai version. We modified from the original version of Barbara Riegel's SCHTI. Response method was 1-4 rating scale from 1, never to 4, always. As original version, scores on each regimen were standardized to a score of 100, which a score of <70 indicated poor self-care. Estimate glomerular filtration rate (eGFR) defined according base on CKD-EPI formula and kidney function decline cut-off point of eGFR < 60 ml/min per 1.73 m² was defined based on KDIGO 2012. We compared CKD and poor self care using Chi-square, and odds ratio (OR) with 95% confidential interval (95%CI).

Results: Prevalence of CKD was 35.2%. Prevalence of Follow up was 61.1%, Diet 78.7%, Exercise 60.5%, Medication 26.9%, Alcohol 16.6%, Smoking 10.3%, Weight control 43.9% and Total self care 47.2%. Patients with CKD had higher rates of poor self-care on Smoking (OR 3.11, 95%CI 1.16-8.35). Follow up, Diet, Exercise, Medication, Alcohol, Weight control and Total self care were not significantly differences.

Conclusions: Normal Weight hypertension with CKD have poor self-care. Improving self-care on smoking may reduce chronic kidney disease in hypertension.