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The Association of Hemodialysis Adequacy and Health-Related Quality of Life among Hemodialysis Patients of East Avenue Medical Center Using the KDQOL-SFTM: A Cross Sectional Study

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Objectives : This study aimed to analyze the relationship between hemodialysis adequacy and overall quality of life among maintenance hemodialysis patients at East Avenue Medical Center. It described the socio-demographic profile, clinical characteristics, and quality of life using the KDQOL-SF Filipino Version 1.3 questionnaire, while also examining the links between biochemical profiles, URR, Kt/V, and the quality of life of these patients.
Methods : This prospective cross-sectional study examined the link between quality of life and hemodialysis adequacy in 63 adult patients at East Avenue Medical Center in mid-2024. Study adapted Kidney Disease Quality of Life Short Form (KDQOL-SF) assessed health-related quality of life (HRQOL) in relation to hemodialysis adequacy indicators like Urea Reduction Ratio (URR) and Kt/V.
Results : The study evaluates the quality of life in relation to demographic and health factors such as age, gender, BMI, and dialysis duration. Most individuals aged 51-69 report good quality of life, while those 70 and older typically have poor quality of life. Males (62.5%) are more likely to report good quality of life than females (37.5%). Normal BMI individuals (47.92%) also tend to have better QoL compared to underweight and overweight individuals (18.75% each). Significant associations exist between albumin levels and QoL, with 60.27% of those with high QoL having normal levels. Higher hemoglobin levels and lower URR percentages are linked to better QoL, yet Kt/V and URR do not show a significant relationship with it.
Conclusions : The study indicates that demographic, health, and biochemical factors significantly affect the quality of life (QoL) of hemodialysis patients. Key factors include age, gender, BMI, and dialysis duration. Patients aged 51-69 report better QoL compared to younger and older groups, while males tend to have higher QoL levels. Dialysis duration is the most critical factor impacting QoL, suggesting that longer treatment periods may negatively affect overall well-being.

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Table .0 ***Comparison of good and poor quality of life among CKD Patients***

Parameter	GOOD QUALITY OF LIFE		POOR QUALITY OF LIFE	
PARAMETER	**n**	**Percentage**	**n**	**Percentage**
Albumin				
Normal	44	60.27	23	31.50
Low	3	4.10	2	2.73
High	1	1.40	0	0
Hemoglobin				
<100	27	36.99	11	15.07
100-115	14	19.18	11	15.07
>115	7	9.59	3	4.10
URR				
<65	30	41.09	11	15.07
>=65	18	24.66	14	19.18
KT/v				
<1.2	24	32.88	12	16.43
>=1.2	24	32.88	13	17.81

Table 7.0 ***Comparison of good and poor quality of life among CKD Patients***

Parameter	GOOD QUALITY OF LIFE		POOR QUALITY OF LIFE	
	n	**Percentage**	**n**	**Percentage**
ACCESS				
AVF	17	23.29	27	36.99
AVG	2	2.74	4	5.47
Perm Catheter	3	4.10	4	5.47
IJ	3	4.10	12	16.44
Femoral Catheter	0	0	1	1.40
Dialyzer				
High Flux	24	32.86	45	61.64
Low Flux	1	1.40	3	4.10

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Table 10. Kendall's Tau-b Correlation of Quality of Life and Biochemical Parameters

		Albumin	Hemoglobin	KT/v	URR
Quality of Life	Correlation Coefficient	.195*	0.031	-0.087	-0.053
	Sig. (2-tailed)	0.027	0.724	0.342	0.540
	N	73	73	73	73