Effect of a Supportive Self-Care Educational Intervention on Quality of Life among Patients with End Stage Renal Disease undergoing hemodialysis

Yasmin A. El-Fouly, Manal M. Mostafa

Medical Surgical Nursing
Faculty of Nursing
Cairo University, Egypt

Abstract

End-stage renal disease (ESRD) and its treatments negatively affect quality of life (QOL). Self-care is a pressing approach for patients to deal with their problems. The deterioration in QOL is particularly evident in the patients who had been on hemodialysis for an extended period of time. Health education is an independent function of nursing practice and is a responsibility of the nursing profession to offer appropriate education. Nursing intervention is directed towards promoting, maintaining, and restoring health status, preventing illness, and supporting people to adapt to the residual effects of illness. The aim of the present study, was to evaluate the effect of a supportive self-care educational intervention on QOL among ESRD patients undergoing hemodialysis. It was hypothesized that ESRD patients undergoing hemodialysis who were subjected to a supportive self-care educational intervention would improve their QOL. Participants were 50 patients receiving maintenance hemodialysis. This study was conducted in the dialysis unit of King Khaled University Hospital, Arriyadh, - Kingdom of Saudi Arabia. A quasi-experimental research design was utilized in this study. The design was implemented before and after applying a supportive self-care educational intervention on one group of ESRD patients to evaluate their QOL during undergoing hemodialysis using an instructional Arabic booklet. Two tools were used to collect data: (1) demographic data sheets, (2) a structured interview questionnaire of the Kidney Disease Quality of Life scale short form KDQOL-SF". Results of the present study indicated that there was significant improvement revealed in the scores of all domains of QOL (general health, social and emotional status, illness impact, financial and medical satisfaction) p<0.001, except the physical domain. As well statistically significant associations were found between pre-post-intervention improvements in the total QOL scores. The statistically significant independent predictors of QOL improvement were supportive self-care educational intervention constant attendance, dialysis duration and marital status. The study concluded that implementation of the supportive self-care educational intervention was associated with significant improvement in all domains of QOL, except the physical domain. The study findings implied the necessity of developing supportive self-care educational intervention for HD patients to be implemented on a wider scale and evaluated for further improvement.

Key words: End stage renal disease, hemodialysis, supportive self-care educational intervention, quality of life.