

Profile of the Renal Failure Patients under Haemodialysis at B. P. Koirala Institute of Health Sciences Nepal

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Abstract : Introduction: Haemodialysis (HD) is a mechanical process of removing waste products from the blood and replacing essential substances in patients with renal failure. First artificial kidney developed in Netherlands in 1943 AD First successful treatment of CRF reported in 1960AD, life-saving treatment begins for CRF in 1972 AD. In 1973 AD Medicare took over financial responsibility for many clients and after that method become popular. BP Koirala institute of health science is the only center outside the Kathmandu, where HD service is available. In BPKIHS PD started in Jan.1998, HD started in August 2002 till September 2003 about 278 patients received HD. Day by day the number of HD patients is increasing in BPKIHS as with institutional growth. No such type of study was conducted in past hence there is lack of valid & reliable baseline data. Hence, the investigators were interested to conduct the study on " Profile of the Renal Failure patients under Haemodialysis at B.P. Koirala Institute of Health Sciences Nepal". Objectives: The objectives of the study were: to find out the Socio-demographic characteristics of the patients, to explore the knowledge of the patients regarding disease process and Haemodialysis and to identify the problems encountered by the patients. Methods: It is a hospital-based exploratory study. The population of the study was the clients under HD and the sampling method was purposive. Fifty-four patients undergone HD during the period of 17 July 2012 to 16 July 2013 of complete one year were included in the study. Structured interview schedule was used for collect data after obtaining validity and reliability. Results: Total 54 subjects had undergone for HD, having age range of 5-75 years and majority of them were male (74%) and Hindu (93 %). Thirty-one percent illiterate, 28% had agriculture their occupation, 80% of them were from very poor community, and about 30% subjects were unaware about the disease they suffering. Majority of subjects reported that they had no complications during dialysis (61%), where as 20% reported nausea and vomiting, 9% Hypotension, 4% headache and 2%chest pain during dialysis. Conclusions: CRF leading to HD is a long battle for patients, required to make major and continuous adjustment, both physiologically and psychologically. The study suggests that non-compliance with HD regimen were common. The socio-demographic and knowledge profile will help in the management and early prevention of disease and evaluate aspects that will influence care and patients can select mode of treatment themselves properly.

Keywords : profile, haemodialysis, Nepal, patients, treatment

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