



QUALITY OF LIFE AMONG PATIENTS WITH CHRONIC KIDNEY DISEASE AND UNDERGOING HAEMODIALYSIS AT TWO SELECTED TEACHING HOSPITALS, SRI LANKA

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ABSTRACT

The prevalence of chronic kidney disease (CKD) is continued to rise across the globe including Sri Lanka. Haemodialysis (HD) is a method of management of patients with CKD. Quality of life (QOL) is a measurement of how many diseases and its treatment affects the life and feelings of the patients. Improving and maintaining the QOL is a major goal of nursing care for patients with CKD and undergoing HD. However, though there is a high number of patients with CKD receiving HD in Sri Lanka there is a lack of data on QOL among patients with CKD and undergoing HD. This study was aimed to assess the QOL among patients with CKD and undergoing HD who are attending haemodialysis units at two teaching hospitals in Sri Lanka. A descriptive cross-sectional study was carried out among purposively selected participants (n=250) who are attending the haemodialysis units at two teaching Hospitals, Sri Lanka during the study period. Data was obtained through pre-tested questionnaires: Socio-demographic questionnaire and WHOQOL-BREF and analysed for descriptive statistics. Ethical approval was obtained from the ethics review committee, KAATSU International University, Sri Lanka. Findings revealed that majority of participants were male 184 (73.6%), and in the 30-64 age group. Majority of them were unemployed (42%). Most of the 121 (48.4%) had 3 months-1yr duration of HD and 135 (54%) of them admitted three times per week for HD. The Environmental domain has the highest mean value (59.2±16.6) and social relationship domain has the least (49.5±22.5). Physical health and psychological domains have 51.9 (15.6) and 52.3 (19.9) mean values respectively. More than 50% of the participants were having poor physical (82%), psychological (64.8%), social (69.2%) and environmental QOL (52.8%). Most of the participant was (69.2%) represented poor overall QOL. Education level (p=0.000), average monthly income (p=0.002), the frequency of dialysis (p=0.000) and QOL were statistically significant. Results concluded that most of the participant was (69.2%) represented poor overall QOL. Health education programs and nursing interventions should be organized to enhance QOL among patients with CKD and undergoing HD. Further studies are needed to explore this phenomenon in Sri Lanka.

Keywords: chronic kidney diseases, haemodialysis, quantitative research, Sri Lanka, quality of life