Home Care Management Practices of Caregivers of Patients Undergoing Hemodialysis

Mr. Pankaj Pandey¹, Dr. Harleen Kaur²*, Ms. Sonia Rawat³, Dr. Sanchita Pugazhendi⁴

¹M.Sc. Nursing Student, Department of Medical Surgical Nursing, Himalayan College of Nursing, Swami Rama Himalayan University, Jolly Grant, Dehradun, Uttarakhand, 248140, India
²Associate Professor & HOD Fundamentals of Nursing, Himalayan College of Nursing, Swami Rama Himalayan University, Jolly Grant, Dehradun, Uttarakhand, 248140, India
³Nursing Tutor, Department of Obstetrics and Gynecology Nursing, Himalayan College of Nursing, Swami Rama Himalayan University, Jolly Grant, Dehradun, Uttarakhand, 248140, India
⁴Professor cum Principal, Himalayan College of Nursing, Swami Rama Himalayan University, Jolly Grant, Dehradun, Uttarakhand, 248140, India

Abstract

Aim: The study sought to evaluate the home care management practices of caregivers responsible for patients undergoing hemodialysis and examine the potential correlation between these practices and the caregivers' socio-demographic variables, the research aimed to shed light on how socio-demographic variables might influence the caregivers’ approach to managing home care for patients undergoing hemodialysis.

Material and Method: A quantitative research approach with a descriptive research design was used for the study. A total of 134 caregivers of patients undergoing hemodialysis were selected by purposive sampling technique. Data was collected by interview method with the use of a structured practice scale.

Result: The result showed that caregivers 93(69.40%) had average practices 29(21.64%) had poor practices and only 12(8.95%) had good practices.

Conclusion: It showed that an awareness program is required to enhance the knowledge of caregivers regarding home care management to improve the practices while giving care to their patients at home.

Keywords: Home care management practices, Caregivers, Haemodialysis, Real failure, Kidney Function.
INTRODUCTION

When the kidneys fail to adequately excrete waste and fluids from the body over an extended period, dialysis becomes necessary. Dialysis comes in two main forms: peritoneal and haemodialysis. Haemodialysis specifically works to remove excess chemicals and toxins from the bloodstream. When the kidneys fail to adequately excrete waste and fluids from the body over an extended period, dialysis becomes necessary. Dialysis comes in two main forms: peritoneal and haemodialysis. Haemodialysis specifically works to remove excess chemicals and toxins from the bloodstream.¹

Worldwide occurrence of CKD in 2017, it was approximately 9.1 percent, corresponding to approximately 700 million cases nationwide. The occurrence of CKD has increased up to 29.3 percent since 1990, but the age-standardized prevalence has remained constant (1.2 percent, -1.1 to 3.5).² In 2017, 1.4 million deaths occurred due to cardiovascular illness because of loss of kidney function which showed 7.6 percent deaths due to cardiovascular illness. Deaths from CKD and cardiovascular diseases due to impaired kidney function accounted for 4.6 percent of total mortality.³

Caregiver/family member perform vital responsibilities for their patient who were on dialysis. Caregiver/family member provide care to their patients during dialysis as well as in home, they help them in daily routine activities of life, also help them physically, mentally and socially. Caregiver/family member are one’s who perform unpaid care to the individual who need help and on hemodialysis. Home care should also need a plenty of learning for providing care to a dialysis patient. For patients on hemodialysis, it is essential to regularly check adherence to drug regimens, food restrictions, and fluid restrictions. These people have to deal with issues like medication management, care of an arteriovenous fistula, dietary restrictions, sodium and fluid intake limits, handling complications, warning signs, and worries about marriage, family planning, and the effect of their illness on their loved ones. Caregiver can experience stress because of more responsibility while handling the patient during medical treatment, hospital appointments and psychological issue.⁴

Home care management practices are necessary for patients who were on dialysis which were provided by their caregivers/family member for improving the health status and activities of daily living of chronic renal failure patients at home. Thus, Investigator thought to assess the home care management practices of caregiver of patient undergoing hemodialysis during his clinical experience⁵,⁶,⁷.
PROBLEM STATEMENT

The study aims to evaluate the home care management practices among caregivers of patients undergoing hemodialysis in a selected hospital in Dehradun, Uttarakhand. This research seeks to examine the extent to which caregivers are effectively managing the home care needs of hemodialysis patients in this specific geographical location.

OBJECTIVES

1. To assess the practices regarding home care management among caregivers of patients undergoing haemodialysis.
2. To find the association between score of practice regarding home care management among caregiver of patient undergoing hemodialysis with their socio demographic variable.

MATERIALS AND METHODS

The study employed a quantitative research approach, utilizing a descriptive research design to comprehensively explore the subject matter. A total of 134 caregivers of patients undergoing haemodialysis were purposefully selected using purposive sampling technique, ensuring representation across various caregiving contexts. Data collection was carried out through interviews conducted within the dialysis unit of a chosen hospital. The structured practice scale was employed as a tool during these interviews, facilitating systematic and uniform assessment of caregiver practices and behaviour’s related to patient care during haemodialysis sessions.
Figure 1. Practices of caregivers regarding home care management of patients undergoing haemodialysis.

Analysis and Interpretation

Section 1: Frequency and percentage distribution of home care management practices of Caregivers of patients undergoing hemodialysis.  

Figure 1 shows the level of practices of caregivers regarding home care management of patients undergoing hemodialysis. Maximum participants 93 (69.40%) got an average 29 (21.64%) got poor and only 12 (8.95%) got good. Therefore, it could be inferred that a maximum number of caregivers got an average level and the minimum got good regarding home care management practices for patients undergoing hemodialysis.

Section 2: Association between practice score of caregivers regarding home care management with their socio-demographic characteristics.

Table 1. A statistically significant association between the practice score and various demographic characteristics

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Demographic Characteristics</th>
<th>Below Median ≤ 99</th>
<th>Below Median &gt;99</th>
<th>Chi Square</th>
<th>Df</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Age in Years 18 – 48</td>
<td>45</td>
<td>43</td>
<td>0.125</td>
<td>1</td>
<td>0.724</td>
</tr>
</tbody>
</table>
Table 1 revealed that there was no noteworthy or statistically significant association between the practice score and various demographic characteristics, including age, gender, education, occupation, dietary habits, monthly family income, residential location, family type, marital status, relationship with the patient, total number of family members, and duration of home care, at a significance level of p<0.05. As a result, the research hypothesis was rejected, and the null hypothesis was accepted. This suggests that the demographic factors examined do not significantly influence the practice score related to home care management for patients undergoing hemodialysis.

**DISCUSSION**

- The results of the current study indicate that regarding home care management for patients undergoing hemodialysis, 21.64% of caregivers demonstrated poor practices, while 69.40% exhibited average practices, and a mere 8.95% showcased good
practices. These findings are consistent with a study conducted by Varghese, Lydia Gee. et.al. (2016), which reported that the majority of caregivers scored well in their practice, with 78.3% achieving good practice scores, 21.7% obtaining average scores, and none falling into the category of poor practices.5

- A study was carried out by Mangrule PR (2017), to identify the educational needs of patients receiving hemodialysis and to create and evaluate a self-care training program for patients to use at home. The study used a descriptive evaluative methodology and included 60 individuals, easily chosen from a dialysis unit at a particular local hospital. Three parts of a structured questionnaire were used: one to collect demographic information, one to determine the hemodialysis patients' learning needs, and a third to assess the efficacy of the self-instructional module for home care. The main conclusions showed that 8% of the participants had a strong comprehension of hemodialysis, whereas 73% of the participants had an average level of knowledge.6

- An assessment of the effect of a self-instructional module on hemodialysis patients' understanding of home care management was carried out at a few Kollam hospitals. The aims of the study were evaluating the patients' initial understanding of home care management, evaluating the efficacy of the self-instructional module, and investigating any correlations between the patients' knowledge and demographic factors. With a sample size of thirty patients, the study used purposive sampling and a pre-experimental one-group pretest-posttest design. A pretest was given by the researcher to gauge the participants' starting knowledge levels, and then the self-instructional module was introduced. After that, a posttest was given using the identical evaluation instrument to see how well the module had improved the patients' understanding of home care management7-10.

CONCLUSION
The results of the current study revealed that the majority of caregivers, accounting for 69.40%, exhibited average home care management practices, while only a small proportion, 8.95%, demonstrated good practices. Furthermore, no significant correlations were observed between the caregivers' practice scores and various demographic characteristics such as age, gender, education, occupation, dietary habits, monthly family income, residential location, family type, marital status, relationship with the patients, total number of family members, and duration of home care, at a significance level of p<0.05.
These findings underscore the importance of organizing health counselling sessions aimed at enhancing the practices of caregivers. Such sessions can play a pivotal role in improving the quality of care provided to patients undergoing haemodialysis by empowering caregivers with the knowledge and skills necessary for effective home care management.

REFERENCES

promotion. 2020;9.
