

Quality of life (QOL) in patients with chronic kidney disease

Abstract

The study guidelines for assessing quality of life in patients with chronic renal disease is so far unclear. Quality of Life guidelines are objective or subjective functional or satisfaction-based, and disease-specific or generic. Treatment of end-stage kidney disease with transplantation and treatment of anemia with erythropoietin in patients with Chronic Renal Disease have been associated with dramatic improvements of quality of life. Other causes such as gender, ethnic or national background, stage of Chronic Renal Disease, method of dialytic treatment, practice interventions, sleep disorders, pain, erectile disorders, patient satisfaction with care provided, sadness affect, symptom tolerance, and perception of intrusiveness of sickness may be associated with differential perception of quality of life. Modern researches stated an association between assessment of quality of life and morbidity and mortality in end stage kidney disease patients stating the measures do matter. Further studies are mandatory in patients with early stages of chronic kidney disease and in children. Quality of life measures should include validated psychosocial measures of sadness affect, perception of burden of illness, and social support. The obstacle for the next decade will be to continue to devise interventions that meaningfully increase the quality of life of patients with chronic kidney disease at all stages.

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Biography

MS. Nasrin has finished her Diploma Degree in Nursing in the academic year (2011-2012), then she started to work on some researches related to nursing care, nursing profession and nursing job satisfaction. She is currently working with MSF international organization as a maternity nurse and train the paramedical staff to develop their skills.



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