# Perceptions of home therapies amongst in-centre haemodialysis nursing staff

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## Introduction

- Majority of patients with end-stage renal disease in the UK receive in-centre conventional haemodialysis (HD).
- Home therapies, which are peritoneal dialysis and home haemodialysis, remained under-utilised with wide national variation of update [1].
- In-centre HD nurses has the most direct contact time with patients and are therefore well-positioned in engaging and supporting their patients who might benefit from home therapies.
- However, there is limited information on perceptions of home therapies amongst in-centre HD nursing staff.

### Aims

To explore the knowledge and perceptions of home therapies amongst in-centre HD nursing staff in a single renal unit.

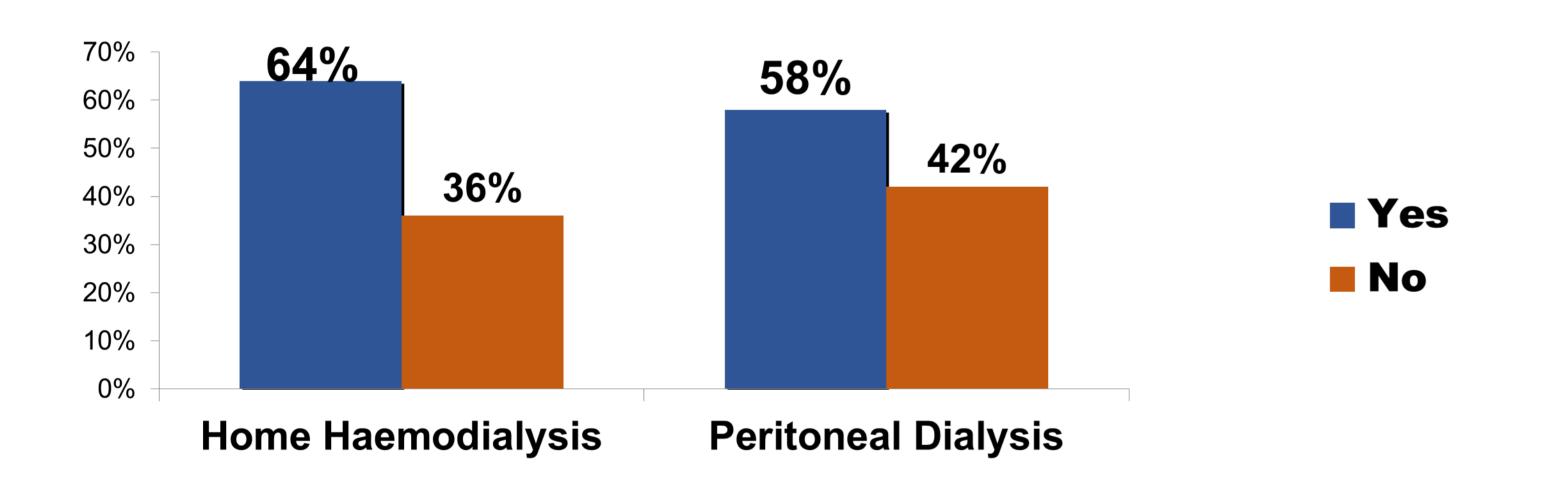
# **Methods**

- A cross-sectional survey of in-centre HD nursing staff in a single renal unit in the UK in 2019.,
- Data was collected using paper questionnaire, consisted of seven questions.

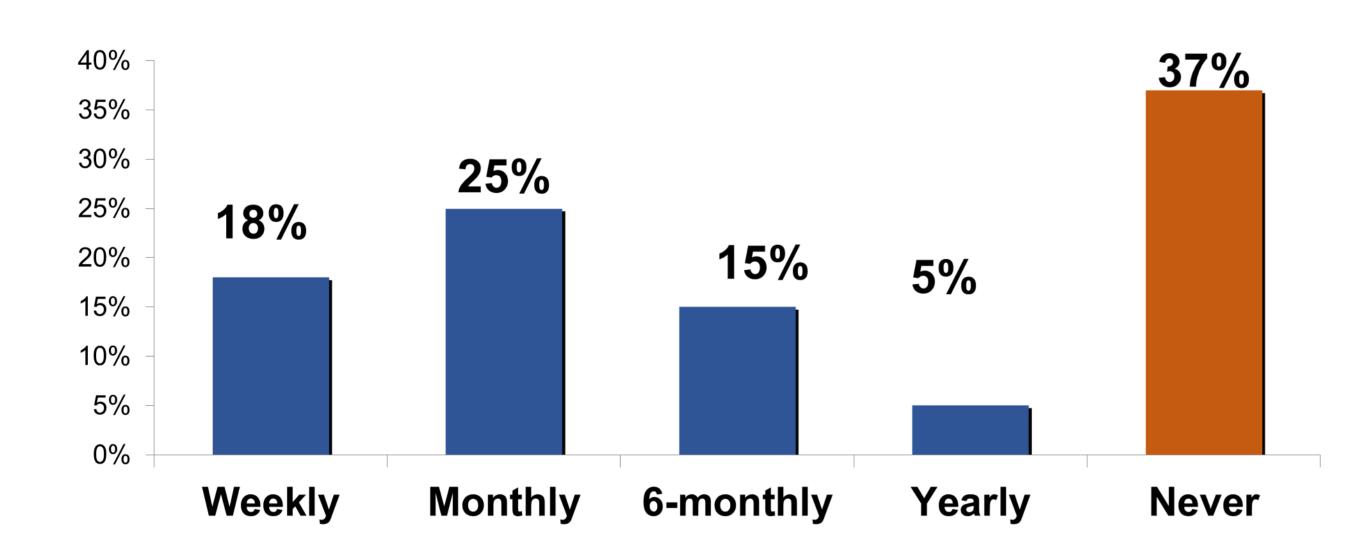
### Results

• 55 nurses completed the questionnaire.

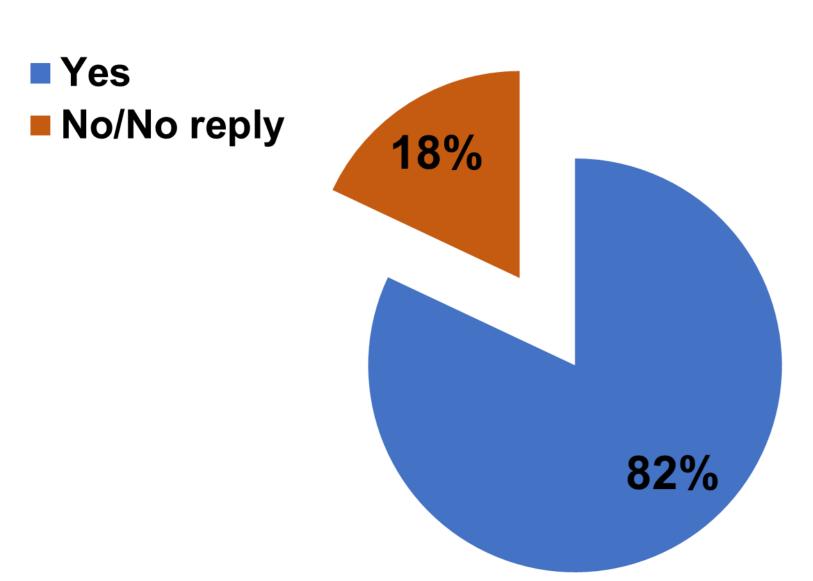
# Q1 & 2: Do you talk to patient about home therapy options?



# Q3: How often do you talk about home dialysis to patients?



Q4: Do you know how to identify patient who is suitable or interested in home dialysis?



# Q5. What do you think are the benefits of home dialysis?

	Percentages
Flexibility and freedom	26%
Improved quality of life	20%
Improve survival	8%
Better control of blood pressure	9%
Reduce the number of medications	4%
Reduce recovery time	7%
Improve energy level	12&
Improve sleep quality	13%
No reply	1%

# Q6: What makes a patient unsuitable for home dialysis?

	Percentages
Non-compliance	16%
Living alone	16%
Elderly	11%
Co-morbidities	9%
Access problem	8%
Physiologically unstable	8%
Cognitive impairment	7%
Mobility	4%
Dexterity	4%
Storage	3%
Care dependent	3%
Others: lack of support at home, diet/fluid balance, complications of dialysis, infection risk, constipation, patient not interested	

• Perceived knowledge gap amongst in-centre HD nurses on home therapies included clinical management of home therapies, operation of home dialysis machine and suitability or referral pathway for home therapies.

# Conclusions

- A third of nurses never engaged in home therapies discussion with their patients.
- Most were aware of the benefits of home therapies with regarding to flexibility and quality of life but less so of the potential clinical benefits of blood pressure control and medication burden.
- The study highlighted nurses' gap of knowledge on suitability, referral pathway and clinical management of home therapies.
- The results of this study had been used to guide educational session on home therapies for in-centre HD nurses, which aim to empower the nurses in engaging and supporting suitable patients to consider home therapy options

# **Bibliography**

1. MacNeill SJ, Ford D. UK Renal Registry 19<sup>th</sup> Annual Report: Chapter 2 UK Renal Replacement Therapy Prevalence in 2015: National and Centre-specific Analyses. Nephron 2017; 137(suppl1):45-72.