



ASSESSMENT OF HEALTH RELATED QUALITY OF LIFE (HRQOL) AND PROBLEM FACED BY KIDNEY TRANSPLANT PATIENT ATTENDING IN SELECTED NEPHROLOGY OPD, WEST BENGAL

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ABSTRACT Renal transplantation is generally believed to provide a considerable improvement in health related quality of life when compared with dialysis. As the number of kidney transplant patient increases, quality of life (QOL) after transplantation is an important area of concern for the health care professionals. A descriptive survey was undertaken with the objectives to assess the HRQOL of 60 patients underwent kidney transplantation, to identify their health related problems and to find out association between HRQOL and selected socio demographic variables among patient underwent kidney transplantation. The study setting was Nephrology OPD of IPGME&R, SSKM Hospital, Kolkata. The revised Wilson and Cleary model of HRQOL was adopted for this study. A valid and reliable structured tool KDQOL-SF and semi-structured interview schedule was used to collect the data from respondents who were selected through non-probability purposive sampling. The domain of role limitation and vitality were at significantly lower level. Majority of respondents (68.33%) showed moderate QOL after transplantation. There were significant association between gender, education, period of transplantation, monthly family income and level of QOL ($p < 0.05$).

The study result has several implications in nursing practice, education, administration and research. So the recommendations were made for further research. The study concluded that most of the respondent's HRQOL scores showed clinically significant improvement after transplantation.

KEYWORDS :

Major findings

Major findings of the study are –

I. Findings related to respondents characteristics and clinical profile

- Majority 75% of sample were male.
- Maximum respondents 63.3% belonged to the age group of 34-49 years.
- Maximum 43.3% respondents completed secondary education.
- Most of the 71.7% respondents were married.
- Maximum respondents 48.3% were self-employed.
- Majority of the respondents 81.7% had their monthly family income in between 5000-15000.
- Most of the respondents 48.33% had their source of treatment expenditure from family source.
- Majority 50% of respondents were between 3-5 years of post-transplantation.
- Most of the respondents 88.3% were in haemodialysis before transplant.
- Majority 80% donor types were living related.
- Majority of female 60% and 46.67% of male had normal creatinine level and 51.11% of male and 66.67% of female had below normal haemoglobin level.

I. Findings related to Quality of Life of respondents

- Majority 68.33% of respondents experienced a moderate level of QOL.
- Highest mean percentage 91.85 was obtained in the pain domain of QOL which rank 1.
- Lowest mean percentage 43.95% was obtained in the role limitation domain which rank 11.

II. Findings related to association between overall QOL and selected variables

- Statistically significant association was found between QOL and gender of the respondents ($\chi^2 = 7.94, p < 0.05$).
- Statistically significant association was found between QOL and education level of respondents ($\chi^2 = 8.04, p < 0.05$).
- Statistically significant association was found between QOL and family income of the respondents ($\chi^2 = 6.24, p < 0.05$).
- Statistically significant association was found between QOL and time period of transplantation ($\chi^2 = 8.37, p < 0.05$).

III. Findings related to problem faced by respondents

- Majority 51.7% respondents had problem related to taking large amount of medication daily.
- Most of the respondents 56.7% had problem related to medication cost.
- Maximum respondents 65% had UTI after transplantation.
- Respondents who suffered from infection, 18.3% of them admitted to hospital.
- After transplantation 35% of respondents had biopsy.

The study findings revealed that the most patients with renal transplantation experienced a moderate QOL. The study findings highlight that there were few demographic variables which impact the QOL in the various domains. Role limitation domain were restricted of maximum participants, but other domain were improved. UTI was the major infection that participant were experienced after transplantation. The chi-square value showed that significant association between gender, education, monthly family income, time period of transplantation and QOL.

On the basis of the objectives of the study analysis and interpretation of data were done by using descriptive and inferential statistics.

Table 1 Frequency and percentage distribution of respondents' level of quality of life.
n=60

Level of Quality of life (QOL)	Mean \pm SD	Frequency	Percentage (%)
Low QOL	<55.98	9	15
Moderate QOL	55.98 – 77.36	41	68.33
High QOL	>77.36	10	16.67

Table 2 Range, Mean, Median and Standard Deviation of respondents QOL score.
n=60

Area	Range	Mean	Median	SD
Quality of Life	39-89	66.67	67	10.69

Minimum possible score = 0

Maximum possible score = 100

Table 3 Distribution of Mean, Median, Standard deviation, Mean percentage and Rank according to the various domain of QOL.
n=60

Variables	Maximum	Mean	Median	S D	Mean %	Rank
General health	100	61.8	62	17.38	61.8	7
Physical function	100	81.25	85	16.73	81.25	4
Role limitation	100	43.95	33.33	31.17	43.95	11
Emotional problem	100	60.96	66.66	37.5	60.96	8
Pain	100	91.85	100	17.42	91.85	1
Social function	100	84.32	100	28.85	84.32	2
Vitality	97	45.8	43.51	17.70	47.21	10
Mental health	86	64.68	66.66	28.85	75.21	5
Restriction	100	82.76	85.52	17.70	82.76	3
Sleep	100	74.83	80	12.03	74.83	6
Overall health	100	59.8	50	17.72	59.8	9

Table 16 Association between QOL and selected socio-demographic variables namely period of transplantation and monthly family income.

Selected variables	QOL			Chi square	p value
	Low	Moderate	High		
Period of transplant					
3 months – 2 years	7	11	1	8.37*	0.01
2 – 5 year	2	30	9		
Monthly family income (in ₹)				6.24*	0.04
≤ 15000	7	37	5		
> 15000	2	4	5		

$\chi^2(2) = 5.991, p < 0.05$

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