

16th Clinical Nursing & Nurse Education Conference

November 21-22, 2016 Melbourne, Australia

Treatment adherence among patients undergoing hemodialysis

Niru Khatiwada

Nepal Medical College, Nepal

Background: Treatment adherence with four domains: hemodialysis schedule, diet restriction, fluid restriction and medicine adherence, is a crucial factor that influences morbidity and mortality of hemodialysis patients. The aim of the study was to assess treatment adherence among patients undergoing hemodialysis and the associated factors in the year 2014.

Methods: A total of 166 patients undergoing hemodialysis for at least 3 months in National Kidney Center, Kathmandu were interviewed. Patients with communication problems and those who were too sick for interview were excluded. Relationship between four domains and various factors were identified using inferential statistics.

Results: The self-reported treatment adherence was found to be 73.5%, 32.5%, 39.8% and 78.9% in hemodialysis schedule, diet restriction, fluid restriction and medicine adherence respectively. Adherence to hemodialysis schedule was significantly associated with duration of hemodialysis ($p=0.050$), companion to reach the center ($p=0.038$), time to reach the center ($p=0.020$) and type of transportation ($p=0.004$). Fluid restriction had significant association with marital status ($p=0.034$), adequacy of treatment expenditure ($p=0.015$) and Interdialytic Weight Gain (IDWG) ($p=0.012$). Adherence to diet restriction had significant association with counseling on the same ($p=0.013$). Medicine adherence was significantly associated with age ($p=0.017$) and duration of hemodialysis ($p=0.049$). It also showed association of age ($p=0.001$), Hepatitis C infection ($p=0.013$), Diabetes mellitus ($p=0.012$), duration of hemodialysis ($p=0.010$) with IDWG.

Conclusion: There is an immediate need for strategies to promote the treatment adherence of the patients under hemodialysis with focus on diet and fluid restriction adherence.

nirukhathiwada142@gmail.com

The effect of meditative movement intervention on sleep quality and frailty status in pre-frail elderly

Wei-wei Wu

Fujian Medical University, China

Sleep disorders are one of the most common difficulties facing older people. Meditative movement interventions (MMI), a new category of exercise integrating physical activity and meditation (e.g., tai chi, yoga, and qigong), may benefit older people with sleep problems. This study utilized a clustered randomized, single-blind control trial. A sample of one hundred and ten older people was randomized to experimental group and control group according to the nursing home. A 12 weeks tai-ji qigong exercise intervention was implemented three times per week for the participants in experimental group. Subject in control group received usual control-care. Sleep quality, frailty status (handgrip, walking speed), timed up-and-go test and quality of life were evaluated in baseline, on the sixth week and on the third month. Total of 115 participants were employed in this study, 58 were randomized to experimental group and 57 were randomized to control group. ITT results indicated that the global PSQI score, sleep efficiency and sleep disturbance subscale score of experimental group was significantly improved after 12 week intervention compared to control group ($P<0.05$). The 4.5m walking speed, TUGT time, PCS-12 and MCS-12 subscale score was significantly improved after 12 weeks intervention compared to control group ($P<0.05$). The results of study indicated Tai chi qigong exercise intervention can help to improve overall sleep quality, sleep efficiency, sleep disorder and daytime dysfunction; can help to improve walking speed, balance ability and quality of life for pre-frail elderly; but not have significant effect on improving sleep duration, upper limb muscle strength.

viviwoo@126.com