Integrated Care to Individuals Suffering From Kidney Failure: A Commentary Article

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Introduction

Chronic kidney disease (CKD) affects millions of people worldwide, and its prevalence continues to rise. In advanced stages of the disease, kidney failure can occur, requiring dialysis or kidney transplantation to sustain life. Individuals with kidney failure require comprehensive care to manage their symptoms, prevent complications, and maintain their quality of life. Integrated care has emerged as an effective approach to meet the complex needs of patients with kidney failure. In this manuscript, we will discuss the key components of integrated care for individuals suffering from kidney failure.

Chronic kidney disease (CKD) is a progressive, long-term condition characterized by a gradual loss of kidney function over time. It is a common health problem worldwide and is associated with an increased risk of premature death, cardiovascular disease, and reduced quality of life. In this article, we will discuss the causes, symptoms, diagnosis, and management of CKD.

Description

CKD can be caused by a variety of factors, including diabetes, high blood pressure, and autoimmune diseases such as lupus. Other causes of CKD include infections, congenital abnormalities, and obstructive uropathy. Certain medications, such as nonsteroidal anti-inflammatory drugs (NSAIDs), can also contribute to CKD. In the early stages of CKD, individuals may not experience any symptoms. As the condition progresses, however, symptoms may include fatigue, weakness, loss of appetite, nausea, vomiting, and sleep disturbances. Patients may also experience changes in urination patterns, such as increased frequency or decreased volume. In advanced stages of CKD, patients may develop fluid overload, swelling, and shortness of breath.

Diagnosis of CKD involves several tests, including blood tests, urine tests, and imaging studies. Blood tests can measure kidney function by assessing the level of creatinine in the blood, which is a waste product that the kidneys normally filter out. Urine tests can assess the presence of protein and other abnormalities in the urine. Imaging studies, such as ultrasound or CT scan, can evaluate the structure and function of the kidneys. Management of CKD involves several strategies, including lifestyle modifications, medication, and, in advanced stages, dialysis or kidney transplantation. Lifestyle modifications may include dietary changes, such as reducing salt and protein intake, and increasing physical activity. Medications may be used to control blood pressure, blood sugar levels, and other medical conditions that may contribute to CKD. In advanced stages of CKD, dialysis or kidney transplantation may be necessary to replace lost kidney function.

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Received: 21 February, 2023, Manuscript No. JNT-23-95505; **Editor Assigned:** 23 February, 2023, PreQC No. P-95505; **Reviewed:** 07 March, 2023, QC No. Q-95505; **Revised:** 13 March, 2023, Manuscript No. R-95505; **Published:** 20 March, 2023, DOI: 10.37421/2161-0959.2023.13.445

Preventing CKD involves managing risk factors, such as diabetes and high blood pressure, and making lifestyle modifications, such as quitting smoking and maintaining a healthy weight. Regular monitoring of kidney function in high-risk individuals, such as those with a family history of kidney disease or a history of urinary tract infections, can also help detect CKD early. Integrated care involves a holistic approach that addresses not only the medical needs of patients but also their social, psychological, and emotional needs. The key components of integrated care for individuals with kidney failure are as follows:

A multidisciplinary team comprising nephrologists, nurses, dietitians, social workers, and psychologists should be involved in the care of individuals with kidney failure. Each member of the team brings a unique set of skills and expertise to address the complex needs of patients.

Patient-centered care involves actively involving patients in their care, respecting their preferences and values, and ensuring that their needs and expectations are met. Individuals with kidney failure should be empowered to make informed decisions about their care. Education and self-management are critical components of integrated care. Patients should receive education on their condition, treatment options, and self-care practices to manage their symptoms and prevent complications.

Coordination of care involves ensuring that patients receive seamless, coordinated care across different healthcare settings. This includes facilitating communication between healthcare providers and ensuring that patients receive timely and appropriate care. Continuity of care involves ensuring that patients receive ongoing, uninterrupted care across different stages of their illness. This includes ensuring that patients have access to appropriate services, follow-up appointments, and support. Integrated care has been shown to improve outcomes for patients with kidney failure. Studies have demonstrated that integrated care can improve quality of life, reduce hospitalizations, and improve patient satisfaction. Integrated care can also reduce healthcare costs by improving the efficiency of care delivery [1-5].

Conclusion

Integrated care has emerged as an effective approach to meet the complex needs of individuals with kidney failure. The key components of integrated care include a multidisciplinary team, patient-centered care, education and self-management, coordination of care, and continuity of care. Integrated care has been shown to improve outcomes for patients with kidney failure and can also reduce healthcare costs. Implementation of integrated care requires collaboration between healthcare providers, patients, and caregivers to ensure that patients receive high-quality, comprehensive care.

Acknowledgement

Not applicable.

Conflict of Interest

There is no conflict of interest by authors.

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How to cite this article: Rathod, Samar Sing. "Integrated Care to Individuals Suffering From Kidney Failure: A Commentary Article." *J Nephrol Ther* 13 (2023): 445.