



Guiding End-Stage Renal Disease Patients to Cope With Peritoneal Dialysis: Context and Intervening Conditions

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Purpose

The aim of this study was to explore the internal and external environment (the context) and the protective and restraining circumstances (intervening conditions) affecting the End Stage Renal Disease (ESRD) Patients to adapt to Peritoneal Dialysis (PD)

Methods

- A qualitative approach using grounded theory was used.
- The data was collected at a medical center in Southern Taiwan from January 2018 to September 2018.
- A total of 25 patients were interviewed until data saturation was achieved.
- ★ The inclusion criteria included: end stage renal disease patients, at least 20 years old, and has signed the consent form.
- ★ The patient is combined with hemodialysis and peritoneal dialysis were excluded.
- The interview guide were:
 - (1) What was the environment for peritoneal dialysis ?
 - (2) What factors would facilitate you adapt to peritoneal dialysis ?
 - (3) What factors would prevent you from adapting to peritoneal dialysis?
 - (4) How did you adapt to peritoneal dialysis ?
- The data was examined using constant comparative analysis.

Findings

A substantive theory was formulated to guide the adaptation process. Two categories surfaced in relation to the context used.

(1) A suitable dialysis environment: flexible adjustment of the dialysis environment, demand for a secure environment.

Case 12 : 「 The environment for peritoneal dialysis must be clean and closed, so I often clean the environment. I always choose the room at home, or

the peritoneal dialysis room in the hospital; if I go out with my family overnight, I almost always use it in a hotel room.」

(2) Dialysis leads to social restrictions: social inconvenience, worried about how other people would see them.

Case 08: 「 I used to like to go to the market , but the time of peritoneal dialysis treatment is difficult to match, so I don't go out, and I haven't been shopping for a long time. I don't like others knowing about my condition, so I will change the portion before eating out with friends. 」

In addition, three categories and nine subcategories surfaced in relation to the intervening conditions used. They included facilitating factors:

(1) Diverse support system: caring by medical professionals, family supports, social and spiritual support).

Case 05: 「 At first, my daughter would comfort me, and the nurse and Dr. Huang would come to care for me and help me. If I'm in a bad mood, I will go to Zizhu Temple to worship and give my spirit a sustenance .」

Inversely, inhibiting factors included:

(2) Troubles of daily life: inconvenience of life, recreational restrictions, discomfort of peritoneal dialysis.

Case 17: 「 Pay attention to what you eat and wear, and use a girdle which is hot in summer. It is also inconvenient to take a bath, and you cannot go swimming, bathing, or visit a hot spring. At night the machine for peritoneal dialysis rings and I cannot sleep well. 」

(3) Negative emotion: stress, worries and fear about treatment

Case 01 : 「 I feel sad at first. I think I am different from others and I worry that it will become a burden on my family. I am also worried that I cannot be treated for too long. I reduce the time of treatment outside to avoid infection.. 」

Conclusion

The results from this study can be used as a guide for medical personnel to take care of the peritoneal dialysis process in patients with the end stage renal disease, thereby facilitating the adaptation of ESRD patients to undergo dialysis in their daily life.