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SOCIO DEMOGRAPHIC PROFILE OF END STAGE RENAL DISEASE PATIENTS ATTENDING TERTIARY CARE TEACHING HOSPITAL OF INDIA

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ABSTRACT

Chronic kidney disease (CKD) is a worldwide public health problem, both for the number of patients and the cost of treatment involved. A retrospective study of 2 years was conducted among CKD Stage-V (End stage renal disease) patients admitted in nephrology wards, those undergoing dialysis and kidney transplantation in SKIMS between 1st October 2015 and 30st September 2017. In our study, majority of the ESRD patients belonged to the age group 41-60 years (44%).The present study had males more than females (68%). In the present study, it was observed majority of the patients were from rural areas (74%). It was observed 80% patients were living below poverty line.

KEYWORDS: End stage renal disease, Socio demographic, Profile.

INTRODUCTION

Chronic kidney disease (CKD) is a worldwide public health problem, both for the number of patients and the cost of treatment involved. In India, it is reported that the progression of CKD to End stage renal disease (ESRD) is rapid due to the factors such as lack of medical facilities, poor control of risk factors and delayed referral to nephrologists.[1]

The prevalence of CKD and ESRD are estimated at 7852 and 1870 per million respectively.[2,3] In India the number of deaths due to ESRD was 3.78 million in 1990 (40.4% of all death) and is expected to increase up to 7.73 million in 2020 (66.7% of all death).[4]

It is estimated that only 10-20% of ESRD patients in India continue long term renal replacement therapy (RRT). It is estimated in India in 1 year, there are 3,500 new renal transplant + 3,000 new continuous ambulatory peritoneal dialysis (CAPD) initiation + 15,000 new maintenance hemodialysis (MHD) patients.[5]

Limited resources for health care and lack of protection against catastrophic health spending have led to over-reliance on Out of pocket (OOP) health expenditure in India.[6] This in turn results in exposure to high financial risk, which pushes patients and their families into catastrophic poverty following diagnosis of life consuming diseases like cancer & ESRD.[7]

With this background, the present study was undertaken with the idea to understand the socio-demographic profile of ESRD patients undergoing treatment at SKIMS.

AIMS AND OBJECTIVES

To study to understand the socio-demographic profile of ESRD patients undergoing treatment at SKIMS.

MATERIAL AND METHODS

Study Design and Duration

A retrospective study of 2 years was conducted among CKD Stage-V (End stage renal disease) patients admitted in nephrology wards, those undergoing dialysis and kidney transplantation in SKIMS between 1st October 2015 and 30st September 2017.

Sampling

Using simple random sampling, 20% of the patients admitted in nephrology wards, those undergoing dialysis and kidney transplantation in SKIMS.

Study Tool

After obtaining the list of patients admitted in nephrology wards, those undergoing dialysis and kidney transplantation in SKIMS, the patients were contacted, consent taken from them after explaining the scope and purpose of study and were subjected to a questionnaire which was pretested by conducting a pilot study. Profile of ESRD patients was studied.

Exclusion Criteria
Those patients who refuse to participate in the study were excluded from the study.

Statistical Analysis
Data was analyzed with the help of SPSS software (version 23.0). All the categorical data was shown in the form of frequency and percentages & continuous data was shown in the form of averages and standard deviations.

RESULTS

The pretested questionnaire was given to 233 ESRD patients admitted in nephrology wards, those undergoing dialysis and kidney transplantation in SKIMS between 1st October 2015 and 30st September 2017. The response rate was 86.00%. A sample size of 200 ESRD patients was obtained for study.

Age wise distribution of patients
In our study majority of the patients, 44.0% (n=88) belonged to age group 41-60 years followed by 29.0% (n=58) belonged to age group 21-40 years. Only 13.0% (n=26) patients belonged to age group 61-80 years.

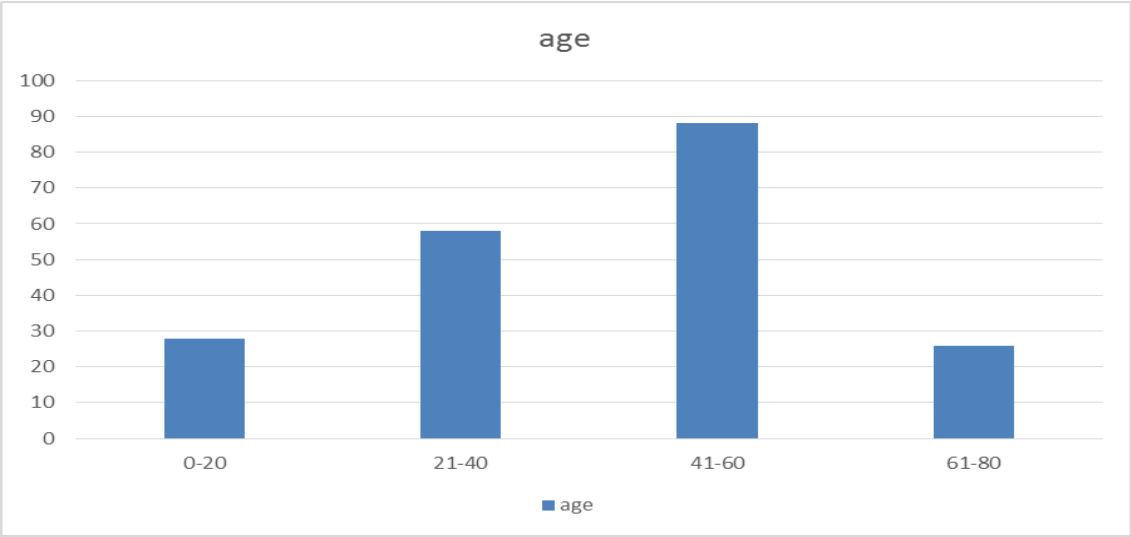

Figure 1: Showing age distribution of ESRD patients.

Gender wise distribution of patients
In our study, 68.0% (n=136) patients were males and 32.0% (n=64) were females (Figure 2).

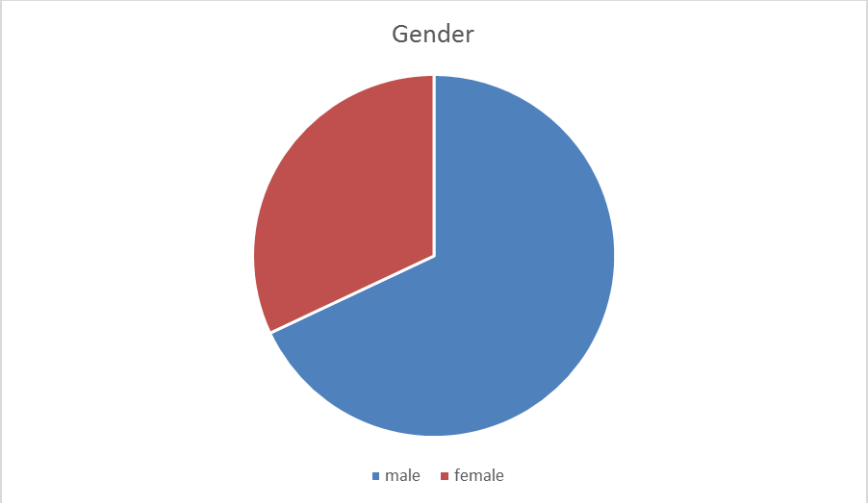

Figure 2: Showing gender of ESRD patients.

Domicile of patients
In our study, 74.0% (n=148) were from rural areas and 26.0% (n=52) were from urban areas (Figure 3).

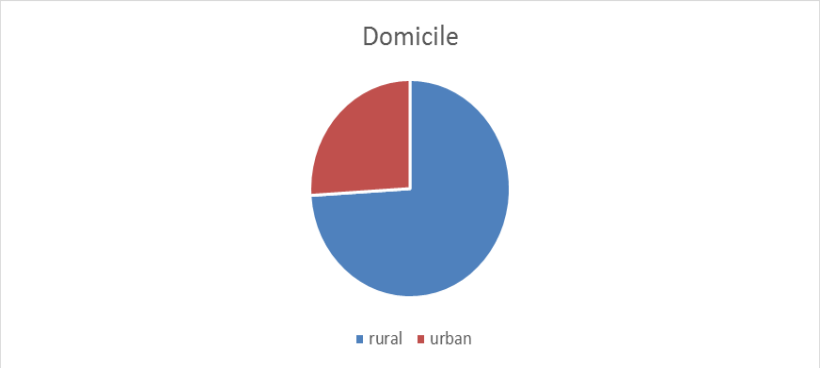

Figure 3: Showing domicile of ESRD patients.

Marital Status

In our study, it was observed that 80.0% (n=160) patients were married and 20.0% (n=40) were unmarried (Figure 4).

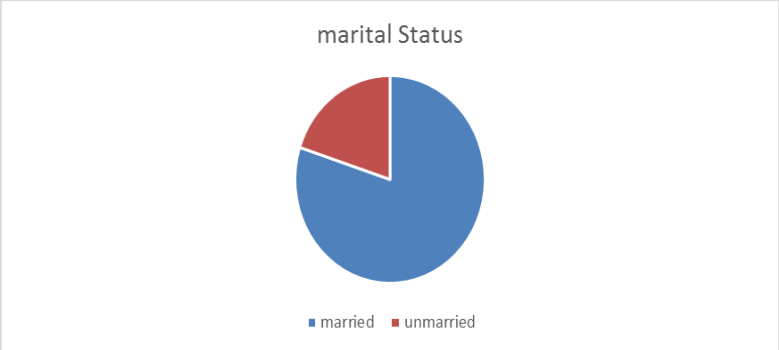

Figure 4: Showing marital status of ESRD patients.

Category of patients

In our study, 80.0% (n=160) patients belonged to privileged (BPL) category and 20.0% (n=40) patients belonged to non-privileged (APL) category (Figure 5).

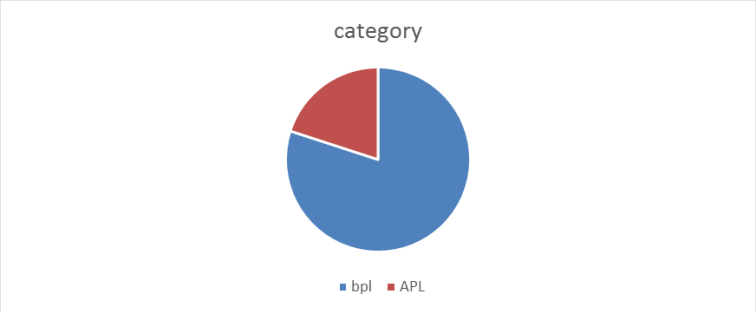

Figure 5: Showing category of ESRD patients as per below poverty line criteria.

DISCUSSION

Health care delivery in India is going through a process of transition, more so the tertiary specialty care of chronic diseases like diabetes, hypertension, cardiac diseases, kidney or liver failure, mental illness and cancer. Patients, more commonly those from the lower economic strata, have difficulty in availing the health care services because of the costs involved in diagnostic and curative procedures. Even in public hospitals where the cost of care is low, patient had to bear several direct and indirect costs, commonly referred to as out-of-pocket expenditure (OOPE), which impoverish them further. As a result, patients with life threatening diseases requiring tertiary care often go untreated even if they are aware of the availability of high quality services. It can also lead to delay in diagnostic and curative procedures and even causing deaths of several thousands of poor patients. This issue has been a concern for nation's health policy, which should address the cost, quality and accessibility of health care.[8]

In our study, majority of the ESRD patients belonged to the age group 41-60 years (44%). S Fathima et al in their study observed that most of the patients belonged to the age group 41-60 years (10). Suja A et al in their study also found that majority of the patients were in the age group 51-60 with mean age of 49.72±13.20.[9]

The present study had males more than females (68%). Suja A et al in their study also observed that majority of the patients were males (73%).[9] S Fathima et al in their study observed that 66.20% of the patients were males.[10] Similar results were obtained Raja Ramachandran et al.[11]

In the present study, it was observed majority of the patients were from rural areas (74%). The results are similar to the study by Gunjeet Kaur et al where 79% patients were from rural areas.[12]

The present study had 80% patients below poverty line. A study by Raja Ramachandran et al had 62% patients below poverty line.[11]

CONCLUSION

Chronic kidney disease (CKD) is a worldwide public health problem, both for the number of patients and the cost of treatment involved. In our study, majority of the ESRD patients belonged to the age group 41-60 years (44%).The present study had males more than females (68%). In the present study, it was observed majority of the patients were from rural areas (74%). It was observed 80% patients were living below poverty.

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