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A Nurse-Led Telephonic Self-Management Program: Quality of Life, Prevalence & Severity of Commonly Reported Symptoms and Readmissions among Adult Patients Newly Diagnosed with ESRD and on Hemodialysis

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Problem Statement: Complications of end stage renal disease (ESRD) cause patients to be admitted frequently to acute care settings. Nationally, readmission rates among this patient population are high. When complications are not well controlled, patients begin suffering a poor quality of life, resulting in even higher demands on the healthcare system. Research literature neglects the exploration of self-management programs among individuals with ESRD receiving hemodialysis.

Purpose: The purpose of this study is to determine the impact of a nurse-led telephonic self-management program on quality of life and a patient's ability to manage the many symptoms commonly experienced when receiving hemodialysis.

Methodology: The study applies an experimental design that incorporates prospective and descriptive elements. This randomized control trial with 28 consented patients has the intent of examining differences in prevalence and severity of commonly reported symptoms and quality of life scores among adult patients newly diagnosed with ESRD. Control group patients received standard care while intervention group patients received standard care and were enrolled in a nurse-led telephonic self-management program. For both groups, an initial and 3-month follow-up symptom measurement and quality of life survey were given. The Dialysis Symptom Index and Ferrans and Power's Quality of Life Dialysis Version III were used.

Intervention: The intervention includes weekly calls by a registered nurse to participants. Patients set goals relating to blood pressure, weight gain, diet, medication compliance, and symptom management. Available resources are discussed and referrals are made to support groups and community organizations as needed.

Results/Implications: Pilot results of this self-management program show an overall decrease in the readmission rate among frequently admitted patients in a telephonic self-management program. Data collection and analysis for this study are ongoing at this time. These types of programs could positively impact hospital readmission rates as well as quality of life and self-management of common symptoms among patients with ESRD on hemodialysis.

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