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Motivational Interviewing in Dialysis Adherence Study (MIDAS)

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Problem: Nonadherence to treatment therapy in adult hemodialysis patients is a prevalent and challenging problem. Intervention studies to improve adherence in this group have been few with mixed results.

Purpose: To pilot test motivational interviewing (MI), a patient-centered, semi-directive communication method, to enhance therapy adherence.

Approach: Using a pre-test, post-test design, a convenience sample of 29 adult hemodialysis patients were recruited from a Midwestern non-profit, free-standing clinic. After obtaining informed consent, participants received a 3-month, staff-delivered MI intervention during regular dialysis treatments. All staff (nurses, technicians, dietitian, social worker) were trained on the use of MI. Three month pre- and post-intervention adherence data (treatment, fluid, medication, diet) were extracted from medical records.

Results: The mean age was 66.41 years; 53% female; 68% Caucasian; and 74% high school (HS)/some HS. Improvements were found in treatment adherence with missed treatments improving in 26% and shortened treatments improving in 47%; fluid adherence as measured by interdialytic weight gain (IDWG) improved in 11%; diet/medication adherence as measured by phosphorous blood level improved in 32%; and diet adherence as measured by albumin blood level improved in 21%. Participants' perceptions of the MI intervention were highly favorable.

Conclusions: The MI intervention influenced dialysis attendance, shortened treatments, phosphorous and albumin levels favorably with less impact on IDWG. Dialysis staff effectively delivered the MI intervention.

Implications: The MI intervention shows promise as an effective and feasible approach to improve adherence in adult hemodialysis patients in most adherence measures. With MI training, dialysis staff can effectively deliver MI. A fully-powered study is needed to confirm these findings.

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